Image# 202212089547683098				PAGE 1 / 247
FEC AN	PORT OF R D DISBURS Other Than An Author	EMENTS		Office Use Only
1. NAME OF TYP COMMITTEE (in full)	e or print ▼	Example: If typing, ty	ype 12FE4M	15
UnitedHealth Group Incor	porated PAC (United	Health Group P	PAC)	
ADDRESS (number and street)	01 Pennsylvania Ave, NW			
Check if different	uite 600			
Alexandra de Calendar	Vashington			20004
2. FEC IDENTIFICATION NUMB	ER V CITY		STATE 🔺	ZIP CODE ▲
C C00274431	3. IS T REP	- v	OR AM	MENDED)
(Choose One) (a) Quarterly Reports:	b) Monthly Report Due On: Apr 20	(M3) Jun 2	20 (M6) Sep	20 (M8) Nov 20 (M11) (Non-Election Year Only) 20 (M9) Dec 20 (M12) (Non-Election Year Only) 20 (M10) Jan 31 (YE)
Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31	(c) 12-Day PRE-Election Report for the:	Primary (12P) Convention (12C)		
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:		Runoff (30R) State of Special (30S)
Termination Report (TER)	Election o	n 11 0	8 / Y Y Y Y 2022	in the State of
5. Covering Period 10	20 / Y Y Y Y Y 20 2022	through	11 / D D /	2022
I certify that I have examined this Re R Type or Print Name of Treasurer	eport and to the best of my cosenhaus, Morganne, , ,	knowledge and belie	f it is true, correct an	d complete.
Signature of Treasurer	, Morganne, , ,	[Electronically File	d] Date 12	M / D D / Y Y Y Y Y 08 2022
NOTE: Submission of false, erroneous	, or incomplete information m	ay subject the person s	signing this Report to t	he penalties of 52 U.S.C. § 3010
Office Use Only				FEC FORM 3X Rev. 05/2016

12/08/2022 14 : 27

x

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name

FEC Form 3X (Rev. 05/2016)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

R	Report Covering the Period: From:		To: 11 / D D / Y Y Y Y Y 2022
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2022		658083.72
	(b) Cash on Hand at Beginning of Reporting Period	257812.05	
	(c) Total Receipts (from Line 19)	161520.12	1407928.43
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	419332.17	2066012.15
7.	Total Disbursements (from Line 31)	76850.00	1723529.98
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	342482.17	342482.17
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Report Covering the Period: From:	/ 20 / 2022 To:	11 / 28 / Y Y Y Y 11 28					
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date					
1. Contributions (other than loans) From:	· · · · · ·						
(a) Individuals/Persons Other							
Than Political Committees							
(i) Itemized (use Schedule A)	160488.35	1304614.11					
	4004 77	04044.00					
(ii) Unitemized	1031.77	94814.32					
(iii) TOTAL (add	161520.12	1399428.43					
Lines 11(a)(i) and (ii)	101320.12	7 7 7 7					
(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)	161520.12	1399428.43					
2. Transfers From Affiliated/Other							
Party Committees	0.00	0.00					
3. All Loans Received	0.00	0.00					
1. Loan Repayments Received	0.00	0.00					
5. Offsets To Operating Expenditures							
(Refunds, Rebates, etc.)							
(Carry Totals to Line 37, page 5)	0.00	0.00					
5. Refunds of Contributions Made		4					
to Federal Candidates and Other							
Political Committees	0.00	8500.00					
7. Other Federal Receipts							
(Dividends, Interest, etc.)	0.00	0.00					
. 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					
) Tatal Descipts (add Lines 11(d)							
 Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) 	161520.12	1407928.43					
12, 13, 14, 13, 10, 17, and 10(0))₽	101320.12	1407 320.43					
. Total Federal Receipts							
(subtract Line 18(c) from Line 19)▶	161520.12	1407928.43					
		1+01 020.43					

Page 3

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016) Page 4 COLUMN A COLUMN B **II. Disbursements Total This Period Calendar Year-to-Date** 21. Operating Expenditures: Allocated Federal/Non-Federal (a) Activity (from Schedule H4) 0.00 0.00 Federal Share (i) 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 0.00 0.00 Expenditures (c) Total Operating Expenditures 0.00 (add 21(a)(i), (a)(ii), and (b)) 0.00 22. Transfers to Affiliated/Other Party Committees..... 0.00 0.00 23 Contributions to Federal Candidates/Committees 901500.00 and Other Political Committees... 34500.00 24. Independent Expenditures (use Schedule E)..... Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... 0.00 0.00 25. 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 Loans Made.... Refunds of Contributions To: (a) Individuals/Persons Other 0.00 27. 28. 0.00 Than Political Committees 904.98 0.00 (b) Political Party Committees 0.00 0.00 Other Political Committees (C) (such as PACs)..... 0.00 0.00 Total Contribution Refunds (d) (add Lines 28(a), (b), and (c))...... 0.00 904.98 29. Other Disbursements (Including Non-Federal Donations)..... 821125.00 42350.00 30. Federal Election Activity (52 U.S.C. § 30101(20)) (a) Allocated Federal Election Activity (from Schedule H6) (i) Federal Share 0.00 0.00 (ii) "Levin" Share..... 0.00 0.00 (b) Federal Election Activity Paid Entirely With Federal Funds 0.00 0.00 Total Federal Election Activity (add (C) 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)).. 76850.00 1723529.98 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... 76850.00 1723529.98

DETAILED SUMMARY PAGE

of Disbursements

COLUMN A

Total This Period

III. Net Contributions/ Operating Expenditures

33.	Total Contributions (other than loans)
	(from Line 11(d), page 3)
34.	Total Contribution Refunds
	(from Line 28(d))
35.	Net Contributions (other than loans)
	(subtract Line 34 from Line 33)
36.	Total Federal Operating Expenditures
	(add Line 21(a)(i) and Line 21(b))
37.	Offsets to Operating Expenditures
	(from Line 15, page 3)
38.	Net Operating Expenditures

(subtract Line 37 from Line 36)

		-			-	161520.12
	-	-				
		-			-7	0.00
	1		1			161520.12
<u></u>	÷	-	÷	÷	-7	
		-			_	0.00
÷	÷		÷	÷	7	
		-7			-7	0.00
			1			0.00
1		-7-			-7-	0.00

1399428.43				
1399426.43	7		7	1.00
904.98				
904.90	-7	 1	-7	
1398523.45				
1000020.40	7		7	 1.1.1
0.00				
0.00	7		7	
0.00				
0.00	7		7	1.00
0.00				
	-7-	 	-7-	 1.00

COLUMN B

Calendar Year-to-Date

Page 5

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 6 OF

		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (l	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle Ir A. STREB, DEBORAH, , ,	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 2201 NORTH STAR ROAD			11 28 2022									
City UPPER ARLINGTON	State OH	Zip Code 43221-3810	Transaction ID : PR1159794167043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		42.00									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Dir Capability	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P/R Deduction (\$14.00 Bi-Weekly)									
Full Name of Individual (Last, First, Middle Ir B. ELLISTON, JAMES, , ,	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 302 S 52ND ST			11 28 2022									
City OMAHA	State NE	Zip Code 68132-3544	Transaction ID : PR1159805967043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		30.00									
Name of Employer (for Individual) United HealthCare Services Inc	Occ Dir	upation (for Individual) Fin	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P/R Deduction (\$10.00 Bi-Weekly)									
Full Name of Individual (Last, First, Middle Ir GAUDIO, JOSEPH, , ,	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 4842 E MOUNTAIN VIEW R		Zie Oode	11 / D D / Y Y Y Y 11 28 2022									
City PARADISE VALLEY	State AZ	Zip Code 85253-1539	Transaction ID : PR1159811867043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		576.90									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n CEO	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			648.90									
TOTAL This Period (last page this line number	r only)											

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 7 OF

	*	Use separate schedule(s)	(check on	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11b	11c	12							
Any information copied from such Repo														
or for commercial purposes, other than NAME OF COMMITTEE (In Full)	using the name and a	duress of any political committe			utions in	IOTT SUCT	1 commu	ee.						
UnitedHealth Group Incol	rporated PAC (l	JnitedHealth Group P	AC)											
Full Name of Individual (Last, First, I FALK, DAVID, , ,	Aiddle Initial) or Full O	rganization Name	Date o	of Re	ceipt									
Mailing Address 323 LAWRENCE AV	Έ		M N 11	11 28 2022										
City HIGHLAND PARK	State NJ	Zip Code 08904-1851					32026704 is Period	3						
FEC ID number of contributing federal political committee.	C			Amount of Each Receipt this Period 42.00										
Name of Employer (for Individual) Optum Services, Inc	Occi Mec	upation (for Individual) I Dir		/lemo	Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P/R Dec	P/R Deduction (\$14.00 Bi-Weekly)										
Full Name of Individual (Last, First, I B. MIGLIORI, RICHARD, , ,	Aiddle Initial) or Full O	rganization Name	Date o	of Re	ceipt									
Mailing Address PO BOX 72			M N	11 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y										
City WAYZATA	State	Zip Code 55391-0072			-		32746704	3						
FEC ID number of contributing federal political committee.	C			Amount of Each Receipt this Period 576.90										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P, Senior Advisor		/lemo	Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Dec	ductic	on (\$192	2.30 Bi-W	′eekly)							
Full Name of Individual (Last, First, I HOCK, CHRISTOPHER, ,	,	rganization Name	Date o	of Re	ceipt									
Mailing Address 215 WINDMILL HILL			M 11		D D D 28	L	y y 2022							
City WETHERSFIELD	State CT	Zip Code 06109-2746		Amount of Each Receipt this P										
FEC ID number of contributing federal political committee.	C			34.62										
Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) Dir Gen Mgmt			Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 276.96	P/R De	ductio	on (\$11.	54 Bi-We	eekly)							
SUBTOTAL of Receipts This Page (op	tional)				,	,	653.5	52						
TOTAL This Period (last page this line	number only)				,	-								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 8 OF

	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
Any information copied from such Reports and or for commercial purposes, other than using			13 14 15 16 1 erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middle A. MILLER, KATHERINE, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 2321 HARBOR LAKE DRI	/E		11 28 2022								
City ORANGE PARK	State FL	Zip Code 32003-7799	Transaction ID : PR1554324367043 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		576.90								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) s Ntwk	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. ANDERSON, CRAIG, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 47 AMATO CIRCLE			11 / D D / Y Y Y Y Y 2022								
City WETHERSFIELD	State CT	Zip Code 06109-3971	Transaction ID : PR1575957367043 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		576.90								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) gn Pres Ntwk Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle KELLY, JOHN, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 4901 HAWTHORNE COUF SUITE 304 City	RT State	Zip Code	11 28 2022 Transaction ID : PR1575959767043								
EDINA	MN	55436-5802	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		576.90								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 'Tax	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			1730.70								
TOTAL This Period (last page this line numb	er only)										

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 9 OF

ITEMIZED RECEIPTS			Use separate schedule(s)	(ch	(check only one)									
11			for each category of the Detailed Summary Page		′ 11a 13		11b	11c		12 16	17			
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	I ay not be sold or used by any pe ddress of any political committee	erson e to so	for the	purp	ose of	soliciting	g cont	tributi	ons			
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group PA	NC)										
A.	Full Name of Individual (Last, First, Middle Initi JOHNSON, THAD, , ,	ial) or Full O	rganization Name		Date of	Re	ceipt							
	Mailing Address 9741 GLACIER BAY			M M 11	/	D D 28	/ Y	y 202	22	Y				
	City EDEN PRAIRIE	State MN	Zip Code 55347-2615	_				PR1596 eceipt th						
	FEC ID number of contributing federal political committee.	С			<u> </u>		y	-	ę	576.9	0			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Group Gen Counsel		M	emo	ltem							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	F	P/R Ded	uctic	on (\$192	2.30 Bi-W	/eekly	()				
в.	Full Name of Individual (Last, First, Middle Initi SCHUMACHER, DANIEL, , ,	ial) or Full O	rganization Name		Date of	Re	ceipt							
	Mailing Address 5401 LARADA LANE				11	/	28	/ Y	y 202	2	Y			
	City	State MN	Zip Code					PR15963						
	EDINA FEC ID number of contributing						Amount of Each Receipt this Period							
	federal political committee.	С		576.90						0				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef Strat & Growth Officer		M	emo	ltem							
	Receipt For:	Aggregate												
	Other (specify) V		4615.20		P/R Deduction (\$192.30 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initi THEISEN, SCOTT, , ,	ial) or Full O	rganization Name		Date of	Re	ceipt							
	Mailing Address 1950 MEADOWWOODS TRAI	L			11 ^M	/	28	/ Y	y 202	22	Y			
	City LONG LAKE	State MN	Zip Code 55356-9312		Transaction ID : PR1596305667043									
	FEC ID number of contributing federal political committee.	C				Amount of Each Receipt this Period								
	Name of Employer (for Individual) Optum Services, Inc	Occupation (for Individual) Bus Unit CEO			Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate		P/R Ded	uctio	on (\$192	2.30 Bi-V	Veekly	y)					
s	UBTOTAL of Receipts This Page (optional)						,	y	17	730.70	0			
т	OTAL This Period (last page this line number of	only)					-	1.46						

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)										
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17										
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions										
NAME OF COMMITTEE (In Full)													
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)										
Full Name of Individual (Last, First, Middle ANDERSON, MICHAEL, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 17907 INVERNESS CURV	E		11 28 2022										
City EDEN PRAIRIE	State MN	Zip Code 55347-2155	Transaction ID : PR1596309367043 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		576.90										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P CInt Relationship	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle B. BORCA, TROY, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 1649 SPRING VALLEY RO	AD		11 28 2022										
City	State	Zip Code	Transaction ID : PR1596310467043										
HARTLAND	WI	53029-2056	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		115.38										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item										
Receipt For:	Aggregate	Year-to-Date 🔻											
Other (specify) ▼		923.04	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Middle BRODIGAN, STEVEN, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 2159 BRINKER ST			11 / D D / Y Y Y Y 2022										
City CHANHASSEN	State MN	Zip Code 55317-9361	Transaction ID : PR1596310667043 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		42.09										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Jnderwriting	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 336.72	P/R Deduction (\$14.03 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional).			734.37										
TOTAL This Period (last page this line number	er only)												

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 11 OF

116	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a11b11c12									
•			, ,	13 14 15 16 17									
	y information copied from such Reports and State for commercial purposes, other than using the nar												
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	C)									
Α.	Full Name of Individual (Last, First, Middle Initial) DAVIDSON, TRACY, , ,	or Full O	rganization Name	Date of Receipt									
	Mailing Address 6058 HARBOUR TOWN CIR			M M / D D / Y Y Y Y 11 28 2022									
		State OH	Zip Code	Transaction ID : PR1596311667043									
	WESTERVILLE		43082-8144	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		576.90									
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Gen Mgmt	Memo Item									
		ggregate	Year-to-Date ▼	-									
	Primary General Other (specify) ▼		4615.20	P/R Deduction (\$192.30 Bi-Weekly)									
	Full Name of Individual (Last, First, Middle Initial) HEUMANN, KURT, , ,	or Full O	rganization Name	Date of Receipt									
	Mailing Address 63 MUIRFIELD COURT			11 28 2022									
	City	State	Zip Code	Transaction ID : PR1596313767043									
	SAINT LOUIS	MO	63141-7372	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		132.69									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item									
	Receipt For: A Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ , 1061.52	P/R Deduction (\$44.23 Bi-Weekly)									
	Full Name of Individual (Last, First, Middle Initial) HIGGINS, MARY, , ,	or Full O	rganization Name	Date of Receipt									
	Mailing Address 54 BELCREST ROAD			11 28 / Y Y Y Y 2022									
	5	State	Zip Code	Transaction ID : PR1596313867043									
	WEST HARTFORD	СТ	06107-3304	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		115.38									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item									
	Receipt For: A Primary General Other (specify) I	ggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)									
SI	JBTOTAL of Receipts This Page (optional)			824.97									
	OTAL This Period (last page this line number only												

Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a	11b	11c	12					
Any information copied from such Reports an or for commercial purposes, other than using											
NAME OF COMMITTEE (In Full)	and name and a					· commute					
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle STURKEY, DAVID, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 117 KELLER BLVD			M M		28 / Y	ү ү 2022	Ŷ				
City CLEMSON	State SC	Zip Code 29631-2149			PR1596 Receipt th		3				
FEC ID number of contributing federal political committee.	С			-		117.0	0				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP SIs Acct Mgmt	M	lemo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 936.00	P/R Dec	duction (\$3	39.00 Bi-We	eekly)					
Full Name of Individual (Last, First, Middle TODD, JEFFREY, , ,	Initial) or Full C	rganization Name	Date o	f Receipt							
Mailing Address 467 PRAIRIE WAY SOUTI		7.0.4	11		28 / Y	2022	Y				
City BAYPORT	State MN	Zip Code 55003-1607			: PR15963		}				
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FEC ID number of contributing federal political committee.	C					75.0	0				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Underwriting	M	lemo Item							
	Aggregate	Year-to-Date V									
Other (specify) ▼		600.00	P/R Ded	luction (\$2	25.00 Bi-We	ekly)					
Full Name of Individual (Last, First, Middle SANDY, LEWIS, , ,	,	rganization Name	Date o	f Receipt							
Mailing Address 1317 MONTVALE RIDGE			11	2	28	2022 Y					
City CARY	State NC	Zip Code 27519-1015			D: PR1600 Receipt th		3				
FEC ID number of contributing federal political committee.	С			,		576.9	00				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) D/SVP Clin Advancement	N	lemo Item	1						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4615.20	P/R Dec	duction (\$1	192.30 Bi-V	Veekly)					
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	y information copied from such Reports and St for commercial purposes, other than using the					for the		oose of	soliciting	contribut	tions
	NAME OF COMMITTEE (In Full)										
\rangle	UnitedHealth Group Incorporate	d PAC (Unite	dHealth Group PA	C)						
Α.	Full Name of Individual (Last, First, Middle Initi PETERSON, MATTHEW, , ,	al) or Full C	Organiza	tion Name		Date of	Re	ceipt			
	Mailing Address 2260 FOX STREET	1-				M M 11	/	D D 28	/ Y	ү ү 2022	Y
	ORONO	State MN		o Code 55356-8316	_					66996704 is Period	3
	FEC ID number of contributing federal political committee.	С							т ур.	576.9	90
	Name of Employer (for Individual) United HealthCare Services Inc		•	(for Individual) ary & Ind/Sgt CAO		Me	emc	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to	-Date ▼ 4615.20	F	P/R Ded	uctio	on (\$192	2.30 Bi-W	/eekly)	
в.	Full Name of Individual (Last, First, Middle Initi SEVIGNY, BRIAN, , ,	al) or Full C	Organiza	tion Name		Date of	Re	ceipt			
	Mailing Address 137 CREEKVIEW LANE	01-1-		0.4		M M 11	/	28	/ Y	2022	Y
	City LORETTO	State MN		o Code 5357-2111				-		4576704	3
	FEC ID number of contributing federal political committee.	С				Amount	OT		eceipt th	is Period 42.	12
	Name of Employer (for Individual) Optum Services, Inc		•	(for Individual) Technology		Me	emc	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to	-Date ▼ 336.96	F	P/R Dedu	uctio	on (\$14.0	04 Bi-We	ekly)	
С.	Full Name of Individual (Last, First, Middle Initi ARCHER, LORI, , ,	al) or Full C	Organiza	tion Name		Date of	Re	ceipt			
	Mailing Address 2781 SADDLE CLUB ROAD					M M 11	1	D D 28		ү ү 2022	
	City GREENWOOD	State IN		o Code 6143-9211	_					75016704 is Period	3
	FEC ID number of contributing federal political committee.	С				Ľ.		y .	,	34.0	62
	Name of Employer (for Individual) United HealthCare Services Inc		upation Gen Mg	(for Individual) mt		M	emo	ltem			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to	-Date ▼ 276.96	F	P/R Ded	ucti	on (\$11.	54 Bi-We	eekly)	
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SCHEDULE A (FEC Form 3X) DEOEIDTO

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	y information copied from such Reports and Stat										
or	for commercial purposes, other than using the n	ame and a	address of any political of	committee to	solicit con	itributions f	rom such	n committe	ee.		
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Gro	oup PAC	;)						
A.	Full Name of Individual (Last, First, Middle Initia EMERSON, PAUL, , ,	l) or Full O	organization Name		Date of	Receipt					
	Mailing Address 18855 MEADOW VIEW BLVD				M M	/ D D 28	/ Y	y y 2022	Y		
	City PRIOR LAKE	State MN	Zip Code 55372-3133			action ID : of Each R			3		
	FEC ID number of contributing federal political committee.	С					-	576.9	90		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Unit CEO		Me	emo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461	5.20	P/R Dedu	uction (\$192	2.30 Bi-W	/eekly)			
B.	Full Name of Individual (Last, First, Middle Initia ULLOA, SHAUNA, , ,	l) or Full O	organization Name		Date of	Receipt					
	Mailing Address 9 STRATFORD ROAD	1			M M 11	/ D D 28	/ Y	y y 2022	Y		
	City FARMINGTON	State CT	Zip Code 06032-1444			action ID :			3		
	FEC ID number of contributing federal political committee.	C			Amount	of Each R		42.2	2		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP CInt Relationship		Me	emo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	6.96	P/R Dedu	uction (\$14.	04 Bi-We	ekly)			
С.	Full Name of Individual (Last, First, Middle Initial ANDERSON, CATHERINE, , ,	l) or Full O	Organization Name		Date of	Receipt					
	Mailing Address 57 SIMMONS LANE	1			M M	/ D D 28	/ Y	2022	Y		
	City SEVERNA PARK	State MD	Zip Code 21146-1921			action ID : of Each R			3		
	FEC ID number of contributing federal political committee.	С				y	9	576.9	90		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Strat Initiv		Me	emo Item					
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<i>∕</i> ∪	InitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	NC)										
	II Name of Individual (Last, First, Middle Initial VEYMOUTH, PAUL, , ,) or Full Oi	rganization Name	[Date of	Ree	ceipt							
Ma	ailing Address 317 WRIGHTS MILL RD				м м 11	/	28	/ Y	ү ү 2022	Y				
Cit	ty OVENTRY	State CT	Zip Code 06238-1559		Transaction ID : PR1903636967043 Amount of Each Receipt this Period									
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	ame of Employer (for Individual)		pation (for Individual)		Me	emo	Item							
	otum Services, Inc	Mkt	Grp CIO											
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	III Name of Individual (Last, First, Middle Initial DUPERRE, BRIAN, , ,) or Full Oi	rganization Name		Date of	Ree	ceipt							
	ailing Address 100 LONG HILL DRIVE				M M	/	28	/ Y	у у 2022	Y				
Ci	ty	State	Zip Code		Transa	actio	on ID :	PR19104	41736704	13				
S	OMERS	СТ	06071-1272	/	Amount	of I	Each R	eceipt th	nis Period	k				
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Na Un	ame of Employer (for Individual) ited HealthCare Services Inc		upation (for Individual) uty Gen Counsel	Memo Item										
Re	eceipt For:	Aggregate	Year-to-Date ▼											
	Primary General	33 - 3		P/	/R Dedu	ictio	n (\$38.	46 Bi-We	eekly)					
	Other (specify) v		, 923.04											
	ll Name of Individual (Last, First, Middle Initial BEATY, JON, , ,) or Full Oi	rganization Name	1	Date of	Ree	ceipt							
Ma	ailing Address 32860 SE DIVERS RD				м м 11	/	28	/ Y	2022	Y				
Ci		State	Zip Code		Trans	acti	on ID :	PR2119	4678670	43				
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	otum Services, Inc	Dir C	Clin Qlty	_										
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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			Detailed Sumr	nary i age			i		1 1				
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Any or f	r information copied from such Reports and S or commercial purposes, other than using the	tatements ma name and a	ay not be sold or ddress of any po	used by any pe litical committee	erson to s	for the policit con	purp ntrib	oose o utions	of so fron	liciting n such	contr com	ibutio mitte	ons ə.
	NAME OF COMMITTEE (In Full)												
$\left \right $	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth	n Group PA	(C)								
	Full Name of Individual (Last, First, Middle Init CADRIEL, DANIEL, , ,	tial) or Full O	rganization Name	•		Date of	Re	ceipt					
1	Mailing Address 1936 WEST UNION PARK DR	RIVE				M M 11	/	D 28		/ Y	y 202	² 2	
(City	State	Zip Code			Transa	acti	on ID	: PR	21194	6986	7043	
_	PHOENIX	AZ	85085-863	4	_	Amount	of	Each I	Rec	eipt th	is Per	iod	
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	Name of Employer (for Individual) Jnited HealthCare Services Inc		upation (for Indivi R URS SAE	dual)		Me	emo	Item					
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	Primary General Other (specify) ▼			240.00		P/R Dedu	uctic	on (\$10	0.00	Bi-We	ekly)		
	Full Name of Individual (Last, First, Middle Init CAMPBELL, COLLEEN, , ,	tial) or Full O	rganization Name)		Date of	Re	ceipt					
ī	Mailing Address 10906 GREEN HARVEST DR					M M 11	/	D 28		/ Y	2022	2	1
Ō	City	State	Zip Code			Transa	acti	on ID :	: PR	21194	69967	7043	
_	RIVERVIEW	FL	33578-6185	5		Amount	of	Each I	Rec	eipt th	is Per	iod	
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- (Name of Employer (for Individual) Dptum Services, Inc		upation (for Indivi Adhr Sr Cnslt	dual)		Me	emo	Item					
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	360.00		P/R Dedu	uctic	on (\$15	5.00	Bi-We	ekly)		
	Full Name of Individual (Last, First, Middle Init	tial) or Full O	rganization Name	•		Date of	Re	ceipt					
I	Mailing Address 1390 FINCH LN					M M 11	/	D 28		/ Y	2022		
	City	State	Zip Code			Trans	acti	on ID	: PF	21194	47286	7043	_
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ī	Name of Employer (for Individual)	Occ	upation (for Indivi	dual)		Me	emo	Item					
	United HealthCare Services Inc		Act Svs	,									
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	Primary General Other (specify)		ap 1 ap 1	360.00		P/R Dedu	uctio	on (\$18	5.00	Bi-We	ekly)		
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PAGE 17 OF

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or for commercial purposes, other than using th	ie name and a	uuress of any political committee	e to solicit	contri	outions	ITOTTI SUCI	i committe	ee.		
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ted PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle In DUNGAN, TARA, , ,	nitial) or Full C	rganization Name	Date	of R	eceipt					
Mailing Address 619 HIGH COUNTRY RIDG	E		M 1		D 28		y y 2022	Y		
City SAN ANTONIO	State TX	Zip Code 78260-1829				PR2119 4 Receipt th	17326704 is Period	3		
FEC ID number of contributing federal political committee.	С						30.0	00		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir, Clin Appeals		Mem	o Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P/R D	educt	ion (\$10	0.00 Bi-We	eekly)			
Full Name of Individual (Last, First, Middle In GILDERNICK, AMY, , ,	nitial) or Full C	rganization Name	Date	of R	eceipt					
Mailing Address 2709 WILLIAMS GRANT			M 1		28		y y 2022	Y		
City DE PERE	State WI	Zip Code 54115-9456				PR21194 Receipt th	7526704: is Period	3		
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Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		Mem	o Item					
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Other (specify) ▼		480.00	P/R D	educt	ion (\$20	.00 Bi-We	ekly)			
Full Name of Individual (Last, First, Middle In HAYES, PAULINE, , ,	nitial) or Full C	rganization Name	Date	of R	eceipt					
Mailing Address 21851 NEWLAND ST 	State	Zip Code	1	1	28		2022			
	CA	92646-7629				Receipt th	47746704 is Period	J		
FEC ID number of contributing federal political committee.	С				, .	9	30.0	00		
Name of Employer (for Individual) United HealthCare Services Inc	Occ Dir F	upation (for Individual) Fin		Mem	o Item					
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NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P/	AC)									
Full Name of Individual (Last, First, Middle KANNE, KATHLEEN, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 4826 PALOMINO COURT			M M / D D / Y Y Y Y 11 28 2022									
City ERIE	State PA	Zip Code 16506-6624	Transaction ID : PR2119479667043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		576.90									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Experience	Memo Item									
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Full Name of Individual (Last, First, Middle B. MACEMEADOR, HEATHER, , ,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 13531 CARLTON OAKS			11 28 2022									
	State TX	Zip Code	Transaction ID : PR2119482567043									
		78232-4902	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		60.00									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify) ▼		480.00	P/R Deduction (\$20.00 Bi-Weekly)									
Full Name of Individual (Last, First, Middle MURRAY, CAROLYN, , ,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 834 WOODTACK COVE W			11 28 2022									
City HENDERSON	State NV	Zip Code 89002-8294	Transaction ID : PR2119484867043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		30.00									
Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) VP SIs Acct Mgmt	Memo Item									
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\rangle	UnitedHealth Group Incorporate	d PAC (l	UnitedHealth Group P	AC)							
Α.	Full Name of Individual (Last, First, Middle Initi NYGARD, KEITH, , ,	ial) or Full O	Organization Name		Date of	Re	eceipt				
	Mailing Address 8056 CARPENTER CREEK A	VENUE			M M 11	1	D D 28	/ Y	y y 2022]
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B.	Full Name of Individual (Last, First, Middle Initi OLLMANNWAGNER, TRACY, , ,	ial) or Full O	Organization Name		Date of	Re	eceipt				
	Mailing Address 2839 TIMBER LANE				M M 11	/	D D D 28	/ Y	y y 2022	Y]
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	Mailing Address 55 PERENNIAL				M M 11	1	28	/ Y	2022	Y]
	City IRVINE	State CA	Zip Code 92603-0621					PR2119 eceipt th			
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	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clin Qlty		M	emo	o Item				
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	NAME OF COMMITTEE (In Full)											
\rangle	UnitedHealth Group Incorporated	d PAC (I	UnitedHealth Grou	up PAC	C)							
Α.	Full Name of Individual (Last, First, Middle Initia SING, MARTIN, , ,	al) or Full C	Drganization Name		D	ate o	of Re	eceipt				
	Mailing Address 9407 LLANO VERDE					M M	/	D 28)22	Y
	City HELOTES	State TX	Zip Code 78023-4156						PR2119 Receipt t			j
	FEC ID number of contributing federal political committee.	С						-			30.0	0
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B.	Full Name of Individual (Last, First, Middle Initial STETTLER, RONALD, , ,	al) or Full C	Drganization Name		D	ate o	f Re	eceipt				
	Mailing Address 11527 TRAILS END RD	01-1-	Zie Oste			11	/	28		20	22 22	Y
	City	State TX	Zip Code						PR2119			
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С.	Full Name of Individual (Last, First, Middle Initia WRIGHT, GREGORY, , ,	al) or Full C	Drganization Name		D	ate o	of Re	eceipt				
	Mailing Address 10471 STRAND TERRACE					11		D 28	JL	20	1	
	City SANTA ANA	State CA	Zip Code 92705-1495						PR2119 Receipt t			}
	FEC ID number of contributing federal political committee.	С			ļ	-		y .	,		576.9	0
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4615.		P/F	R Dec	ducti	on (\$19	2.30 Bi-'	Week	ly)	
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SCHEDULE A (FEC Form 3X) DEOEIDTO

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	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group PA	NC)						
Α.	Full Name of Individual (Last, First, Middle Initi YOUNG, GEORGE, , ,	al) or Full O	rganization Name		Date of	f Re	eceipt			
	Mailing Address 36296 N 98TH WAY				M M 11	1	28		ү ү 2022	Y
	City SCOTTSDALE	State AZ	Zip Code 85262-3138	_					49446704 iis Period	
	FEC ID number of contributing federal political committee.	С			<u> </u>		-		45.	00
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Plan CEO		M	emo	o Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 360.00	I F	P/R Ded	ucti	on (\$15	.00 Bi-We	eekly)	
в.	Full Name of Individual (Last, First, Middle Initi CUMMINGS, DANIEL, , ,	al) or Full O	rganization Name		Date of	f Re	eceipt			
	Mailing Address 1929 FAIRMOUNT AVE		I		M M 11	1	D 28		y y 2022	Y
	City SAINT PAUL	State MN	Zip Code						3266704	
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	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP I	upation (for Individual) Fin	_	M	emo	o Item			
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С.	Full Name of Individual (Last, First, Middle Initi HULTGREN, BROR, , ,	al) or Full O	rganization Name		Date of	f Re	eceipt			
	Mailing Address 408 22ND ST				M M		28		y y 2022	
	City GOLDEN	State CO	Zip Code 80401-2452						13326704 iis Period	
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .		576.	90
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Gen Mgmt		М	emo	o Item			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4615.20	'	P/R Ded	lucti	ion (\$19	2.30 Bi-W	Veekly)	
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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/	UnitedHealth Group Incorporate	`		•	AC)								
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	City MINNEAPOLIS	State MN		Zip Code 55419-1349						PR2133			}
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	Other (specify) ▼		-	4615.20		/K Deu	lucti	.1011	(\$192.	.30 Bi-V	VEEK	iy <i>)</i>	
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						11	<i>'</i>	, 	28	/ 1	20		
	City	State		Zip Code						R2145			
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	FEC ID number of contributing federal political committee.	С	_			Ľ		-			_	30.0	0
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	Primary General Other (specify) ▼		,	240.00	P	/R Ded	ucti	ion	(\$10.0	0 Bi-We	ekly	')	
	Full Name of Individual (Last, First, Middle Init RUMMEL, LEAH, , ,	ial) or Full C	Orgai	nization Name		Date o	f D/	000	int				
	Mailing Address 12100 TRAUTWEIN ROAD					11 Date 0		_	D D D 28	/ Y		22	Y
	City	State		Zip Code		Trans	sact	tion	n ID : F	PR2145		1. A. A.	3
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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	y information copied from such Reports and State for commercial purposes, other than using the na																
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	UnitedHealth Group PA	C)													
A.	Full Name of Individual (Last, First, Middle Initial) LEWIS, KURT, , ,	or Full C	Organization Name	[Date of	Re	eceip	pt									
	Mailing Address 961 RIVER FOREST DRIVE			M M / D D / Y Y Y Y 11 28 2022													
	City	State	Zip Code	Transaction ID : PR2203967567043													
	MAINEVILLE	ОН	45039-7720	Amount of Each Receipt this Period													
	FEC ID number of contributing federal political committee.	С		576.90													
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item													
	Receipt For:		Year-to-Date V	-													
	Primary General Other (specify) ▼	4615.20	P/	/R Ded	uctio	on ((\$192.	30 Bi-W	/eekl	y)							
B.	Full Name of Individual (Last, First, Middle Initial) BEAULE, JEAN-FRANCOIS, , ,	or Full C	Organization Name		Date of	Re	eceip	pt									
	Mailing Address 7 STRATFORD RD	11 28 2022															
	City	State	Zip Code		Trans	acti	ion	ID : P	R22258	31366	67043						
	FARMINGTON	СТ	06032-1444	A	Amount	of	Ead	ch Re	ceipt th	iis Pe	eriod						
	FEC ID number of contributing federal political committee.	С					-		-9-		346.1	4					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P HIth Advancement		Me	emo	b Ite	em									
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2769.12	P/R Deduction (\$115.38 Bi-Weekly)													
С.	Full Name of Individual (Last, First, Middle Initial) MCGUIRE, MICHAEL, , ,	or Full C	Organization Name		Date of	Re	eceip	pt									
	Mailing Address 437 DRURY LANE				M M 11	/		28	/ Y	202	22	Y					
	City	State	Zip Code		Trans	acti	ion	ID : F	PR2225	8188	67043	3					
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	FEC ID number of contributing federal political committee.					y		y		288.4	5						
	Name of Employer (for Individual) United HealthCare Services Inc									Memo Item							
	Receipt For: A Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2307.60	P	/R Ded	uctio	on ((\$96.1	5 Bi-We	ekly)						
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NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorporate	ed PAC (I	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle Ini A. RYAN, JOHN, , ,	itial) or Full C	organization Name	Date of Receipt									
Mailing Address 45 WESTMORELAND LN			11 28 2022									
City	State	Zip Code	Transaction ID : PR2225819667043									
NAPERVILLE	IL	60540-5817	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		576.90									
Name of Employer (for Individual)		upation (for Individual)	Memo Item									
United HealthCare Services Inc Receipt For:		sion CEO										
Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$192.30 Bi-Weekly)									
Other (specify)		4615.20	() · · · · · · · · · · · · · · · · · · ·									
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B. GREENMAN, DEE, , ,			Date of Receipt									
Mailing Address 536 HIGH DR			11 / D D / Y Y Y Y 2022									
City CARMEL	State IN	Zip Code 46033-2338	Transaction ID : PR2231350267043									
FEC ID number of contributing		40000 2000	Amount of Each Receipt this Period	-								
federal political committee.	С		42.12									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼	-									
Other (specify)		, 336.96	P/R Deduction (\$14.04 Bi-Weekly)									
Full Name of Individual (Last, First, Middle Ini C. CARCIONE, JOSEPH, , ,	itial) or Full C	organization Name	Date of Receipt									
Mailing Address 11 CARRIAGE WAY			11 28 2022									
City	State NY	Zip Code	Transaction ID : PR2247626867043									
WHITE PLAINS		10605-5424	Amount of Each Receipt this Period	_								
FEC ID number of contributing federal political committee.	С		173.10									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Dir/CMO	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify)		1384.80	P/R Deduction (\$57.70 Bi-Weekly)									
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· · · · · · · · · · · · · · · · · · ·	mmercial purposes, other than using the na E OF COMMITTEE (In Full)	ame and ad	ddress of any political committee	to solicit co	ntributions	from such	n committe) e.						
	tedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)										
	lame of Individual (Last, First, Middle Initial ITOLA, KEVIN, , ,) or Full Or	rganization Name	Date o	f Receipt									
Mailin	g Address 7031 HALSTEAD DRIVE			11 28 2022										
City MINN	IETRISTA	State MN	Zip Code 55364-3201		Transaction ID : PR2247627067043 Amount of Each Receipt this Period									
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Optur	of Employer (for Individual) n Services, Inc	Occu VP I	upation (for Individual) IT	М	lemo Item									
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	lame of Individual (Last, First, Middle Initial RIEN, DENNIS, , ,) or Full Or	rganization Name	Date o	f Receipt									
	g Address 61 LOUGHLIN AVE		M M 11	y y 2022	Y									
City COS	СОВ	State CT	Zip Code 06807-2621			: PR22476 Receipt th		<u>ا</u>						
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	g Address 546 HARRINGTON ROAD	1		11 M	/ D		y y 2022	Y						
City WAY	ΖΑΤΑ	State MN	Zip Code 55391-1550			: PR2259 Receipt th		3						
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle CRONN, CHRISTOPHER, , ,	nitial) or Full C	organization Name	Date of Receipt								
Mailing Address 1122 COLORADO STREET SUITE 2399			11 / D D / Y Y Y Y Y 2022								
City AUSTIN	State TX	Zip Code 78701-2132	Transaction ID : PR2270522967043 Amount of Each Receipt this Period								
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Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) rt Affs Dir	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1384.56	P/R Deduction (\$57.69 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. FRASCINO, MJ, , ,	nitial) or Full C	organization Name	Date of Receipt								
Mailing Address 4575 SOUTH ATLANTIC A # 6311	11 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y										
City PONCE INLET	State FL	Zip Code 32127-7096	Transaction ID : PR2402316567043 Amount of Each Receipt this Period								
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Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Comm	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P/R Deduction (\$14.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. JACOBS, DONALD, , ,	nitial) or Full C	organization Name	Date of Receipt								
Mailing Address 19495 VINE RIDGE ROAD	Otata	Zin Oode	11 / 28 / 2022								
City EXCELSIOR	State MN	Zip Code 55331-9173	Transaction ID : PR2402317367043 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		30.00								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Proj Mgr II	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 240.00	P/R Deduction (\$10.00 Bi-Weekly)								
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City		State NC	Zip Code								1776704	3		
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Mailing	Address 2 LAKESHIRE COURT					M M 11	/		28	/ Y	y y 2022	Y		
City OWIN0	GS MILLS	State MD	Zip Code 21117-1246								31896704 is Period	3		
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	Uni	tedHealth Group PA	C)																
Α.	Full Name of Individual (Last, First, Middle Initial ROSSI, DAVID, , ,) or Full C	Drgan	ization Name		ate of	Re	ecei	ipt												
	Mailing Address 510 BUFFALO TOM DRIVE					11 28 / Y Y Y Y 2022															
	City GREENSBORO	State NC		Zip Code 27455-8344	Transaction ID : PR2402319667043 Amount of Each Receipt this Period																
	FEC ID number of contributing federal political committee.	С				_		,			- - -	42.	12								
	Name of Employer (for Individual) United HealthCare Services Inc		cupati ec Dir	on (for Individual)		Me	emo	o Ite	em												
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B.	Full Name of Individual (Last, First, Middle Initial HIGA, JOY, , ,) or Full C	Drgan	ization Name		ate of	Re	ecei	ipt												
	Mailing Address 2208 ELM AVENUE					[™] 11	1	Г	28	1	/ Y	y y 2022	Y								
	City MANHATTAN BEACH	State CA		Zip Code 90266-2809		4626704 s Period	3														
	FEC ID number of contributing federal political committee.	С										576.	90								
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) ompl Off & SVP Reg Affs	Memo Item																
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year	r-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)																
C.	Full Name of Individual (Last, First, Middle Initial ALEXANDER, CORY, , ,) or Full C	Drgan	ization Name		ate of	Re	ecei	ipt												
	Mailing Address 4901 HAMPDEN LANE	State		Zin Codo		11 T rows	/	L	28	1		2022									
	City BETHESDA	State MD		Zip Code 20814-7918	A			-				2886704 s Period	3								
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	y information copied from such Reports and Sta for commercial purposes, other than using the r												
$\left\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (L	InitedHealth Group PA										
A.	Full Name of Individual (Last, First, Middle Initia WEE, KATHLYN, , ,	al) or Full Or	ganization Name		Date of	Re	ceipt						
	Mailing Address 2225 46TH ST NW				м м 11	/	D D 28	/ Y	y y 2022	Y			
	City WASHINGTON	State DC	Zip Code 20007-1032						5 4506704 is Period	3			
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	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Plan CEO		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20]	P/R Dedu	uctio	on (\$192	2.30 Bi-W	/eekly)				
в.	Full Name of Individual (Last, First, Middle Initia BALTHAZOR, PAUL, , ,	al) or Full Or	ganization Name		Date of	Re	ceipt						
	Mailing Address 2002 SUGARWOOD DRIVE	01-1-	7		^M 11	/	28	/ Y	2022	Y			
	City ORONO	State MN	Zip Code 55356-9339						2076704 is Period	3			
	FEC ID number of contributing federal political committee.	С			576.90								
	Name of Employer (for Individual) Optum Services, Inc	Occu Bus	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615,20	P/R Deduction (\$192.30 Bi-Weekly)									
С.	Full Name of Individual (Last, First, Middle Initia NESS, LAURA, , ,	al) or Full Or	ganization Name		Date of	Re	ceipt						
	Mailing Address 10550 PINNACLE WAY	1			M M 11	1	D D 28	/ Y	y y 2022	Y			
	City WOODBURY	State MN	Zip Code 55129-4282						12156704 is Period	3			
FEC ID number of contributing federal political committee.					<u> </u>		9		576.	90			
Name of Employer (for Individual) United HealthCare Services Inc			pation (for Individual) Segment COO		Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4615.20]	P/R Ded	uctio	on (\$192	2.30 Bi-W	/eekly)				
s	UBTOTAL of Receipts This Page (optional)			<u> </u>			y		1730.	70			
т	OTAL This Period (last page this line number or	nly)		- ▶	_ .		, I	-					

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	Use separate schedule(s)	(check only one)										
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports and or for commercial purposes, other than using th	Statements ma	ay not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorporat	ed PAC (l	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle Ir A. COSGRIFF, JOHN, , ,	nitial) or Full C	rganization Name	Date of Receipt									
Mailing Address 1875 HUNTER LANE			11 28 2022									
City	State	Zip Code	Transaction ID : PR2437121667043									
MENDOTA HEIGHTS	MN	55118-4110	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		576.90									
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item									
United HealthCare Services Inc	Bus	Unit CEO										
Receipt For:	Aggregate	Year-to-Date V										
Other (specify) ▼		4615.20	P/R Deduction (\$192.30 Bi-Weekly)									
		45 45										
Full Name of Individual (Last, First, Middle Ir E. EDELSON, BRETT, , ,	nitial) or Full C	rganization Name	Date of Receipt									
Mailing Address 4600 DREXEL AVENUE			11 / D D / Y Y Y Y 2022									
City	State	Zip Code	Transaction ID : PR2437127167043									
EDINA	MN	55424-1132	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	EC ID number of contributing ederal political committee.											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼	-									
Primary General Other (specify) ▼		4615.20	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle Ir c. RAINEY, PETER, , ,	nitial) or Full C	rganization Name	Date of Receipt									
Mailing Address 8850 COUNTY ROAD 26			M M / D D / Y Y Y Y 11 28 2022									
City	State	Zip Code	Transaction ID : PR2437127567043									
MINNETRISTA	MN	55359-9445	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		576.90									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Corp Controller	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			1730.70									
TOTAL This Period (last page this line number	r only)											

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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			['			13			14		15		16	17
	y information copied from such Reports and S for commercial purposes, other than using the													
$\left[\right]$	NAME OF COMMITTEE (In Full)													
	UnitedHealth Group Incorporate	ed PAC (l	Un	itedHealth Group PA	NC)									
Α.	Full Name of Individual (Last, First, Middle Ini HEYMAN, STEPHEN, , ,	itial) or Full O	Drga	nization Name		Date of Receipt								
	Mailing Address 5300 SHERRILL AVENUE					M M / D D / Y Y Y Y 11 28 2022								
	City	State		Zip Code		Tra	ans	acti	ion	ID : I	PR2444	265	76704	3
	CHEVY CHASE	MD		20815-3720	_	Amo	unt	t of	Ead	ch Re	eceipt t	his F	Period	
	FEC ID number of contributing federal political committee.	С										_	576.9	90
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) rategy & Partnerships			Me	emo) Ite	em				
	Receipt For:			ar-to-Date V	_									
	Primary General Other (specify) ▼	Aggregate	100	4615.20		p/r d)ed	uctio	on (\$192	30 Bi-\	Neel	kly)	
В.	Full Name of Individual (Last, First, Middle Ini LANGER, DONALD, , ,	tial) or Full O	Drga	nization Name		Date	e of	Re	eceip	pt				
	Mailing Address 5110 OAK RAMBLING DRIVE	<u>.</u>			11 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y									
	City	State		Zip Code		Tra	ins	acti	ion	ID : F	PR2445	015	46704	3
	КАТҮ	TX		77494-1971		Amc	unt	tof	Ead	ch Re	eceipt t	his F	Period	
	FEC ID number of contributing federal political committee.	С					-			_	576.9	90		
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) an CEO			Me	emo	b Ite	em				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 4615.20		9/R C)edı	uctio	on (\$192	.30 Bi-\	Veel	kly)	
<u> </u>	Full Name of Individual (Last, First, Middle Ini ALCOREZA, LENYS, , ,	itial) or Full O	Drga	nization Name		Date	e of	Re	eceip	pt				
	Mailing Address 675 THALIA POINT RD						™ 1	1		28			022	Y
	City	State		Zip Code		Tr	ans	act	ion	ID :	PR2445	5016	86704	3
	VIRGINIA BEACH	VA		23452-1815		Amc	unt	t of	Ead	ch Re	eceipt t	his F	Period	
	FEC ID number of contributing federal political committee.	С							9		, ,	_	576.9	90
	Name of Employer (for Individual)	Occ	upa	tion (for Individual)		П	M	emc	b Ite	em				
	United HealthCare Services Inc	VP S												
	Receipt For:	Aggregate	Yea	ar-to-Date ▼		P/R [Ded	ucti	on ((\$192	2.30 Bi-\	Wee	klv)	
	Other (specify)		-	4615.20					(- , /	
F	UBTOTAL of Receipts This Page (optional)								y		· ·	-	1730.7	70
Т	OTAL This Period (last page this line number	only)		••••••			<u>.</u>		-		-	_		

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	11b	11c	12					
	y information copied from such Reports and Sta											
or	for commercial purposes, other than using the r	name and a	ddress of any political committee	to solicit cor	itributions from	m such	committe	эе.				
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	C)								
A.	Full Name of Individual (Last, First, Middle Initia SIEGEL, DAVID, , ,	al) or Full O	rganization Name	Date of	Receipt							
	Mailing Address 264 LAKEWOOD DRIVE			11 28 2022								
	City BLOOMFIELD HILLS	State MI	Zip Code 48304-3531		action ID : Pf of Each Rec			\$				
	FEC ID number of contributing federal political committee.	С				-y	42.1	2				
	Name of Employer (for Individual) Optum Services, Inc	Occu Med	upation (for Individual) I Dir	Me	emo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.96	P/R Ded	uction (\$14.04	l Bi-We	ekly)					
в.	Full Name of Individual (Last, First, Middle Initia WALKOWSKI, KAREN, , ,	al) or Full O	rganization Name	Date of	Receipt							
	Mailing Address 6359 COUNTRY ROAD		M M 11	/ D D 28	/ Y	y y 2022	Ŷ					
	City	State	Zip Code		action ID : PF			•				
		MN	55346-1342	Amount	of Each Rec	eipt th	is Period					
	FEC ID number of contributing federal political committee.	С		42.12								
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Director Data Analytics	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.96	P/R Dedu	uction (\$14.04	Bi-We	ekly)					
С.	Full Name of Individual (Last, First, Middle Initia MCMAHON, DIRK, , ,	al) or Full O	rganization Name	Date of	Receipt							
	Mailing Address 60 WILDHURST ROAD			M 11	/ D D 28		y y 2022					
	City EXCELSIOR	State MN	Zip Code 55331-8461		action ID : PI of Each Rec			3				
	FEC ID number of contributing federal political committee.	С				y	576.9	10				
United HealthCare Services Inc Pre			upation (for Individual) sident UHG & COO	Memo Item								
	Receipt For: Primary General Other (specify)	Year-to-Date ▼ 4615.20	P/R Ded	uction (\$192.3	30 Bi-W	/eekly)						
s	UBTOTAL of Receipts This Page (optional)						661.1	4				
т	OTAL This Period (last page this line number or	nly)				7						

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	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
			13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)	-										
> UnitedHealth Group Incorpor	rated PAC (l	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middl A. NATHAN, DONALD, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 1643 SPRING CREEK D	RIVE		M M / D D / Y Y Y Y Y 11 28 2022								
City	State FL	Zip Code	Transaction ID : PR2491457367043								
SARASOTA		34239-5046	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		681.00								
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item								
United HealthCare Services Inc	EVF	P, Senior Advisor									
Receipt For:	Aggregate	Year-to-Date V									
Other (specify) ▼		4540.00	P/R Deduction (\$227.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middl	e Initial) or Full O	rganization Name									
B. SMITH, KARA, , ,			Date of Receipt								
Mailing Address 3917 TERRY PLACE			11 28 2022								
City ALEXANDRIA	State VA	Zip Code	Transaction ID : PR2540175367043								
		22304-1737	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		576.90								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify)		4615.20	P/R Deduction (\$192.30 Bi-Weekly)								
Other (specify) ▼		4010.20									
Full Name of Individual (Last, First, Middl C. PURDY, PATRICIA, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 3615 THORNAPPLE ST	REET		11 28 2022								
City	State	Zip Code	Transaction ID : PR2541300667043								
CHEVY CHASE	MD	20815-4113	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		576.90								
Name of Employer (for Individual)		upation (for Individual)	Memo Item								
Optum Services, Inc Receipt For:		Strategy									
Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$192.30 Bi-Weekly)								
Other (specify)		4615.20									
SUBTOTAL of Receipts This Page (optiona	l)		1834.80								
TOTAL This Period (last page this line num	ber only)										

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		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full)	ted PAC (I	JnitedHealth Group P/	AC)									
Full Name of Individual (Last, First, Middle In A. RAMSAY, RICHARD, , ,	nitial) or Full C	rganization Name	Date of Receipt									
Mailing Address 543 E LURAY AVE			M M / D D / Y Y Y Y 11 28 2022									
City ALEXANDRIA	State VA	Zip Code 22301-1605	Transaction ID : PR2542542267043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		150.00									
Name of Employer (for Individual) United HealthCare Services Inc	d HealthCare Services Inc VP Regl Affs											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1200.00	P/R Deduction (\$50.00 Bi-Weekly)									
Full Name of Individual (Last, First, Middle In B. DAVENPORT, ALLISON, , ,	nitial) or Full C	rganization Name	Date of Receipt									
Mailing Address 141 PELHAM ROAD			M M / D D / Y Y Y Y 11 28 2022									
City 	State PA	Zip Code 19119-2661	Transaction ID : PR2552313667043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		576.90									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item									
Receipt For:		Year-to-Date ▼										
Other (specify) V		4615.20	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle In BRYANT, JEREMY, , ,	nitial) or Full C	rganization Name	Date of Receipt									
Mailing Address 4534 MYSTIQUE WAY	1		11 D D / Y Y Y Y Y 128 2022									
City ROSWELL	State GA	Zip Code 30075-2087	Transaction ID : PR2552961367043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		115.38									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) CInt Mgmt NA Accts	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			842.28									
TOTAL This Period (last page this line numbe	r only)											

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		Use separate schedule(s)	(check only one)	
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17	
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions	
NAME OF COMMITTEE (In Full)				
UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P	AC)	
Full Name of Individual (Last, First, Middle COLEMAN, MICHAEL, , ,	Initial) or Full C	rganization Name	Date of Receipt	
Mailing Address 842 NAGLE STREET			M M / D D / Y Y Y Y 11 28 2022	
City HOUSTON	State TX	Zip Code 77003-1266	Transaction ID : PR2552961467043 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		115.38	
Name of Employer (for Individual) Optum Services, Inc	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name EHLMAN, MICHAEL, , ,			Date of Receipt	
Mailing Address 10051 VALLEY RIDGE CO	11 28 2022			
City LAS VEGAS	State NV	Zip Code 89148-7602	Transaction ID : PR2552962267043 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	42.00			
Name of Employer (for Individual) Optum Services, Inc	Memo Item			
Receipt For: Primary General	Aggregate	Year-to-Date 🔻	P/R Deduction (\$14.00 Bi-Weekly)	
Other (specify) v		, 336.00		
Full Name of Individual (Last, First, Middle FLANNERY, SCOTT , , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name FLANNERY, SCOTT, , ,			
Mailing Address 8508 TRELADY CT			11 28 / Y Y Y Y 2022	
City PLANO	State TX	Zip Code 75024-6827	Transaction ID : PR2552962367043 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		288.45	
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2307.60	P/R Deduction (\$96.15 Bi-Weekly)	
SUBTOTAL of Receipts This Page (optional).			445.83	
TOTAL This Period (last page this line number	er only)			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12	
	y information copied from such Reports and Stat for commercial purposes, other than using the na				
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	UnitedHealth Group PA	C)	
Α.				Date of Receipt	
	Mailing Address 2323 KINGS POINT DRIVE	11 28 2022 Transaction ID : PR2552963267043			
	LARGO	State Zip Code FL 33774-1009		Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		115.38	
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Dir	Memo Item	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)	
в.	Full Name of Individual (Last, First, Middle Initial KIDAMBI, NARASIMHAN, , ,	Date of Receipt			
	Mailing Address 18477 85TH AVE N	11 28 2022			
	City MAPLE GROVE	State Zip Code Transaction ID : PR255296 MN 55311-1663 Amount of Each Receipt this			
	FEC ID number of contributing federal political committee.	С		60.00	
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) sc Dir Bus Anlys	Memo Item	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 480.00	P/R Deduction (\$20.00 Bi-Weekly)	
с.	Full Name of Individual (Last, First, Middle Initial LOVELADY, JOHN, , ,	Date of Receipt			
	Mailing Address 5378 BUENA VISTA DR	11 28 2022			
	City FRISCO	State TX	Zip Code 75034-2253	Transaction ID : PR2552964267043 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		576.90	
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Bus Ops	Memo Item	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)	
s	UBTOTAL of Receipts This Page (optional)			752.28	
т	OTAL This Period (last page this line number on	ly)			

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group PA	ιC)
Full Name of Individual (Last, First, Middle MORRIS, MICHAEL, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 2624 N HARTLAND COUR			11 / D D / Y Y Y Y 2022
City CHICAGO	State IL	Zip Code 60614-4955	Transaction ID : PR2552965067043
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 46.14
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs Acct Mgt	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 369.12	P/R Deduction (\$15.38 Bi-Weekly)
Full Name of Individual (Last, First, Middle B. PAULUS, LESLIE, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 305 E TUCKEY LN			11 / D D / Y Y Y Y 2022
City PHOENIX	State AZ	Zip Code 85012-1048	Transaction ID : PR2552965267043 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		115.38
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) d Dir	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. POTTER, DONALD, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 116 FULLER LANE	1		11 / D D / Y Y Y Y 2022
City WINNETKA	State IL	Zip Code 60093-4213	Transaction ID : PR2552965467043 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP CInt Relationship Prd	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 830.64	P/R Deduction (\$34.61 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional).			265.35
TOTAL This Period (last page this line number	er only)		

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page		4 11a		11b	11c	12	1 7		
	y information copied from such Reports and Sta for commercial purposes, other than using the n											
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	InitedHealth Group PA	NC)								
A.	Full Name of Individual (Last, First, Middle Initia SAMSEL, KRISTINE, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt					
	Mailing Address 91 WAVERLY RD				M M 11	/	28) / Y	ү ү 2022	Ŷ		
	City HUNTINGTON	State CT	Zip Code 06484-5835					PR25529 Receipt th				
	FEC ID number of contributing federal political committee.	С							42	.00		
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Gen Mgmt		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 336.00		P/R Dedu	uctio	on (\$14.	.00 Bi-We	eekly)			
	Full Name of Individual (Last, First, Middle Initia TINKER, ANN, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt					
	Mailing Address 137 AMOHI WAY	1		11 / 28 / 2022 Transaction ID : PR2552966867043								
	City LOUDON	State TN	Zip Code 37774-3009					PR25529 Receipt th				
	FEC ID number of contributing federal political committee.	С				U	7		42	_		
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Compli		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	F	P/R Dedu	uctio	on (\$14.	00 Bi-We	ekly)			
	Full Name of Individual (Last, First, Middle Initia WACKER, AARON, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt					
	Mailing Address 4704 CAVAN ROAD				M M 11	/	28	JL	2022			
	City MOUND	State MN	Zip Code 55364-1877				-	PR2552		-		
	FEC ID number of contributing federal political committee.	С			<u> </u>		y 1			.00		
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) incipal Engineer, TLCP		Me	emc	ltem					
	Receipt For: Primary General Other (specify)	Aggregate Y	Year-to-Date ▼ 336.00		P/R Ded	ucti	on (\$14	.00 Bi-We	eekly)			
s	UBTOTAL of Receipts This Page (optional)		••••••	•			,	. ,	126.	00		
т	OTAL This Period (last page this line number on	ly)		•	_		,					

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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			for each category of the Detailed Summary Page		X 11a	11b	11c	12			
	y information copied from such Reports and Staten for commercial purposes, other than using the nam										
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (I	JnitedHealth Group	o PAC))						
A.	Full Name of Individual (Last, First, Middle Initial) of PROSKAUER, DANIEL, , ,	or Full C	organization Name	Date of Receipt							
	Mailing Address 240 DERBY STREET	State	Zip Code		11 Transa	ction ID :	/ Y	2022 7506704			
	5	MA	02465-1006	F		of Each R			0		
	FEC ID number of contributing federal political committee.					-		57.6	69		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Architecture		Me	mo Item					
	Receipt For: Ag Primary General Other (specify) ▼	gregate	Year-to-Date ▼ 461.52	2	P/R Dedu	ction (\$19.)	23 Bi-We	ekly)			
в.	Full Name of Individual (Last, First, Middle Initial) o ZERAFA, DANIEL, , ,	or Full C	organization Name		Date of	Receipt					
	Mailing Address 61234 ADMIRAL DRIVE				M M 11	/ D D 28	/ Y	y y 2022	Y		
		State MI	Zip Code 48094-1242			ction ID : of Each R			3		
	FEC ID number of contributing federal political committee.						-	42.0	00		
	Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) IT		Me	mo Item					
	Receipt For: Ag Primary General Other (specify) ▼	gregate	Year-to-Date ▼ 336.00	0	P/R Dedu	ction (\$14.0	00 Bi-We	ekly)			
с.	Full Name of Individual (Last, First, Middle Initial) or REIDY, GREGORY, , ,	or Full C	organization Name		Date of	Receipt					
	Mailing Address 1005 BLAKEFIELD DRIVE				M M 11	/ D D D 28	/ Y	ү ү 2022	Y		
	5	State TN	Zip Code 37027-8479			of Each R			3		
	FEC ID number of contributing federal political committee.					y .	. <u>,</u>	576.9	90		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n CEO		Me	mo Item					
	Receipt For: Ag Primary General Other (specify)	igregate	Year-to-Date ▼ 4615.20	D	P/R Dedu	ction (\$192	2.30 Bi-W	eekly)			
s	UBTOTAL of Receipts This Page (optional)			►		<u> </u>	. ,	676.5	59		
Т	OTAL This Period (last page this line number only)			····· Þ							

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17			Use separate schedule(s)	(check only one)
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	≭ 11a □ 11b □ 11c □ 12
	y information copied from such Reports and Sta			
or	for commercial purposes, other than using the n	ame and a	ddress of any political committee	to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	C)
A.	Full Name of Individual (Last, First, Middle Initia ALEXANDER, JOY, , ,	l) or Full O	rganization Name	Date of Receipt
	Mailing Address 5116 NORTH TIOGA WAY			11 28 2022
	City LAS VEGAS	State NV	Zip Code 89149-5830	Transaction ID : PR2560064167043 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		42.00
	Name of Employer (for Individual) Health Plan of Nevada	Occu Dir N	upation (for Individual) Mktg	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P/R Deduction (\$14.00 Bi-Weekly)
в.	Full Name of Individual (Last, First, Middle Initia CLUTE, DANIEL, , ,	l) or Full O	rganization Name	Date of Receipt
	Mailing Address 7756 N 85TH STREET	1-		11 28 2022
	City OMAHA	State NE	Zip Code 68122-1281	Transaction ID : PR2560064467043 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.38
	Name of Employer (for Individual) Optum Services, Inc	Occu Med	upation (for Individual) I Dir	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)
с.	Full Name of Individual (Last, First, Middle Initia COY, THOMAS, , ,	l) or Full O	rganization Name	Date of Receipt
	Mailing Address 6970 SUZANNE COURT			M M / D D / Y Y Y Y 11 28 2022
	City SCHENECTADY	State NY	Zip Code 12303-5285	Transaction ID : PR2560064567043 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		30.00
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 240.00	P/R Deduction (\$10.00 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)			187.38
т	OTAL This Period (last page this line number or	ly)		

SCHEDULE A (FEC Form 3X) _____ _

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	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12								
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middle GAZELEY, PAULA, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 36 MAYFAIR ROAD			M M / D D / Y Y Y Y 11 28 2022								
City WYNANTSKILL	State NY	Zip Code 12198-8018	Transaction ID : PR2560064867043 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		42.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clnt Svc Acct Mgt	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 336.00	P/R Deduction (\$14.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. GIANCURSIO, DONALD, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 72 MIDNIGHT RIDGE DR			11 / D D / Y Y Y Y Y 28 2022								
City	State NV	Zip Code	Transaction ID : PR2560064967043								
LAS VEGAS	INV	89135-1680	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		576.90								
Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) n Plan CEO	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. LIPPMAN, SHELDON, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 55 CLIFFIELD ROAD	1		11 / D D / Y Y Y Y 2022								
City BEDFORD	State NY	Zip Code 10506-1210	Transaction ID : PR2560065467043 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		291.00								
Name of Employer (for Individual) United HealthCare Services Inc	Occi Med	upation (for Individual) I Dir	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2328.00	P/R Deduction (\$97.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			909.90								
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or	y information copied from such Reports and State for commercial purposes, other than using the na					for	the		oos	se of		liciting	contrib	utions
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Jni	tedHealth Group PA	C)									
A.	Full Name of Individual (Last, First, Middle Initial) LOBERG, ANGELA, , ,	or Full O	rgai	nization Name		Date of Receipt								
	Mailing Address 2837 EAST PARK PLACE	04-4-4		7:- 0-1-		M M / D D / Y Y Y Y 11 28 2022								
	City MILWAUKEE	State WI		Zip Code 53211-3845	\vdash								655670	
		С	Ì				nount	OT	Ea	cn R	ece		s Perio 115	a 5.38
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) /P SIs Acct Mgt		C	Me	emo) Ite	əm				
	Receipt For: A Primary General Other (specify) ▼ I	ggregate	Yea	923.04		P/R	Ded	uctio	on	(\$38	.46	Bi-We	ekly)	
	Full Name of Individual (Last, First, Middle Initial) MARONEY, KEVIN, , ,	or Full O	rgai	nization Name		Da	ate of	Re	cei	pt				
	Mailing Address 5052 NORMAN DRIVE			1		N	11	1	Ľ	28]	/ Y	y y 2022	Y
	City MINNETONKA	StateZip CodeMN55345-4636											657670 s Perio	
	FEC ID number of contributing federal political committee.	С				Ē			,		_	-7	42	2.00
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) en Counsel			Me	emo	lte	əm				
	Receipt For: A Primary General Other (specify) ▼	ggregate	Yea	r-to-Date ▼ 336.00	F	P/R	Dedu	uctic	on ((\$14.(00	Bi-We	ekly)	
	Full Name of Individual (Last, First, Middle Initial) MILICH, DAVID, , ,	or Full O	rgai	nization Name		Da	ate of	Re	cei	pt				
	Mailing Address 2702 BIRCHMERE COURT					N	11 ^M	/	Ľ	28	1	/ Y	ү ү 2022	Y
	City KATY	State TX		Zip Code 77450-1303									660670	
		C				An	nount	or	Ea	cn R	ece	eipt thi	s Perio 576	a 5.90
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Regr	•	ion (for Individual) EO		ľ	Me	emo	o Ite	em				
	Receipt For: A Primary General Other (specify)	ggregate	Yea	ur-to-Date ▼ 4615.20		P/R	2 Ded	uctio	on	(\$192	2.3	0 Bi-W	eekly)	
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т	OTAL This Period (last page this line number only	′)			-	Ľ			,			7		-

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×			11b	11c	12	_	_
	y information copied from such Reports and Stat for commercial purposes, other than using the n			rson fo						butior	
	NAME OF COMMITTEE (In Full)	ame and a	address of any political committee		SIL CON		utions i	iom suc	n comm	Intee	
\rangle	UnitedHealth Group Incorporated	PAC (l	UnitedHealth Group PA	C)							
A.	Full Name of Individual (Last, First, Middle Initial VAIL, DENISE, , ,) or Full O	Drganization Name	Da	ate of	Re	ceipt				
	Mailing Address 35 CLEVELAND AVENUE				11	/	D D D 28	/ Y	y 2022]
	City SAYVILLE	State NY	Zip Code 11782-1322					PR2560 eceipt th			
	FEC ID number of contributing federal political committee.	С					7		4	2.00	
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) CInt Svc Acct Mgt		Me	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P/F	R Dedu	uctio	on (\$14.	00 Bi-W	eekly)		
в.	Full Name of Individual (Last, First, Middle Initial DICKMAN, KRISTA, , ,) or Full O	Drganization Name	Di	ate of	Re	ceipt				
	Mailing Address 2533 ONYX DRIVE				и м 11	/	D D D 28	/ Y	2022	Y]
	City SHAKOPEE	State MN	Zip Code 55379-2770				-	PR2560 eceipt th			
	FEC ID number of contributing federal political committee.	С					7	95-	4	2.00	
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) Proj Mgr III		Me	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P/R	Dedu	uctio	on (\$14.0	00 Bi-We	eekly)		
С.	Full Name of Individual (Last, First, Middle Initia MURRAY, GARY, , ,) or Full O	Drganization Name	Da	ate of	Re	ceipt				
	Mailing Address 13093 GROUSE POINTE COVE			- L	11 ^M	/	D D D 28	L	2022]
	City DRAPER	State UT	Zip Code 84020-8258					PR2560 eceipt th			
	FEC ID number of contributing federal political committee.	С		ļĘ			y	, <u>,</u>	3	0.00	
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) Bus Risk Mgmt		Me	emo	Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 240.00	P/F	R Dedu	uctio	on (\$10.	00 Bi-W	eekly)		
s	UBTOTAL of Receipts This Page (optional)						, .	. ,	11	4.00	
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		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)
Full Name of Individual (Last, First, Middle I A. NOEL, TIMOTHY, , ,	nitial) or Full C	rganization Name	Date of Receipt
Mailing Address 4316 FREMONT AVENUE	SOUTH		11 28 2022
City MINNEAPOLIS	State MN	Zip Code 55409-1721	Transaction ID : PR2560398867043 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		576.90
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CEO	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle I B. WULF, ROBERT, , ,	nitial) or Full C	rganization Name	Date of Receipt
Mailing Address 622 N 11TH ST	1		11 28 2022
City WAUSAU	State WI	Zip Code 54403-5004	Transaction ID : PR2560398967043 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.12
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)
Full Name of Individual (Last, First, Middle I C. OBRIEN, PATRICK, , ,	nitial) or Full C	rganization Name	Date of Receipt
Mailing Address 33 BARRINGTON DRIVE			11 / D D / Y Y Y Y 2022
City BEDFORD	State NH	Zip Code 03110-5601	Transaction ID : PR2560821467043 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		42.00
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP (upation (for Individual) Ops	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 336.00	P/R Deduction (\$14.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)			661.02
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	ay r Iddr	ot be sold or used by any political committee	ersor to s	n for the solicit cor	purp ntrib	pos outic	se of sons fr	solicitir om sue	ig co ch co	ontribu ommitt	tions ee.	
\backslash	NAME OF COMMITTEE (In Full)		_		-									
$\Big)$	UnitedHealth Group Incorporate	d PAC (l	Jn	itedHealth Group PA	NC)									
۹.	Full Name of Individual (Last, First, Middle Initia PERO, MARIE, , ,	al) or Full O	rga	nization Name		Date of Receipt								
	Mailing Address 28012 CAPTIVA SHELL LOOP	·				M M 11	/		28	/ [2022	Y	
	City	State		Zip Code		Trans	acti	ion	ID : F	PR256)821	56704	3	
	BONITA SPRINGS	FL		34135-8624	_	Amount	of	Ea	ch Re	eceipt t	his I	Period		
	FEC ID number of contributing federal political committee.	С				42.00								
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) Svc Acct Mgt		Memo Item								
	Receipt For:			ar-to-Date V										
	Primary General Other (specify) ▼	Aggregate	160	336.00	ı.	P/R Ded	uctio	on ((\$14.0	00 Bi-W	/eek	ly)		
			7		4									
	Full Name of Individual (Last, First, Middle Initia LUND, BRIAN, , ,	al) or Full O	rga	nization Name		Date of	Re	cei	pt					
	Mailing Address 11471 NORTH SHORE DRIVE			M M	1		28			022	Y			
-	City	State		Zip Code 54840-8059		Trans	acti	PR2561	457	66704	3			
	GRANTSBURG	WI	_	Amount	of	Ea	ch Re	eceipt 1	his I	Period				
	FEC ID number of contributing federal political committee.	С						,				117.	00	
	Name of Employer (for Individual) United HealthCare Services Inc	Occi Dir	•	tion (for Individual)		Me	emo) Ite	əm					
	Receipt For:	Aggregate	Yea	ar-to-Date 🔻										
	Primary General Other (specify) ▼		,	936.00	l	P/R Dedu	uctio	on ((\$39.0	0 Bi-W	/eekl	y)		
<u>с.</u>	Full Name of Individual (Last, First, Middle Initia WILLSON, JOSH, , ,	al) or Full O	rga	nization Name		Date of	Re	cei	pt					
	Mailing Address 201 ADAMS CT					M M	/	ľ	28	/ [022	Y	
	City	State		Zip Code		Trans	acti	ion	ID : I	PR256	4802	56704	3	
	COLLEYVILLE	ТХ		76034-6811		Amount	of	Ea	ch Re	eceipt t	his I	Period		
	FEC ID number of contributing federal political committee.	С						,		, y		115.	38	
	Name of Employer (for Individual)	Occi	una	tion (for Individual)		M	emo	o Ite	em					
	United HealthCare Services Inc		•	S SB and Spec Ben										
	Receipt For:	I		ar-to-Date V										
	Primary General Other (specify)		-	923.04		P/R Ded	uctio	on	(\$38.4	16 Bi-V	/eek	ly)		
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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	y information copied from such Reports and State for commercial purposes, other than using the na													
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Uni	tedHealth Group PA	C)		_							
Α.	Full Name of Individual (Last, First, Middle Initial CARLSON, CHRISTOPHER, , ,) or Full O	Orgar	nization Name	[Date of Receipt								
	Mailing Address 10618 WEST RIVER ROAD					11 28 2022								
	City	State		Zip Code		Trans	acti	ion	ID : P	R2564	80266704	3		
	BROOKLYN PARK	MN		55443-1233	A	Amount	of	Eac	h Re	ceipt th	is Period			
	FEC ID number of contributing federal political committee.	С						-		-9-	288.	45		
	Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	•	ion (for Individual)		Me	emo	lte	m					
	Primary General	Aggregate	Yea	r-to-Date ▼	P/	/R Ded	uctic	on (\$96.1	5 Bi-We	eekly)			
	Other (specify)		-1	2307.60										
в.	Full Name of Individual (Last, First, Middle Initial HANSEN, PAUL, , ,) or Full O	Orgar	nization Name	(Date of	Re	eceip	ot					
	Mailing Address 4960 SHADY ISLAND CIRCLE		11 / 28 / Y Y Y Y 2022											
	City	State	Zip Code				-			30276704	3			
	MOUND	MN	55364-9218	/	Amount	of	Eac	ch Re	ceipt th	is Period				
	FEC ID number of contributing federal political committee.	С				291.00								
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) gment CFO		Me	emo	lte	m					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 2328.00	P/	'R Dedu	uctic	on (S	\$97.0	0 Bi-We	ekly)			
с.	Full Name of Individual (Last, First, Middle Initial, GOODWIN, MARYELLEN, , ,) or Full O	Orgar	nization Name		Date of	Re	eceip	ot					
	Mailing Address 3216 PLAYERS VIEW CIRCLE					M M 11	/	D	28	/ Y	y y 2022	Y		
	City LONGWOOD	State FL		Zip Code 32779-3154							80296704	3		
		' -	_	32119-3134		Amount	of	Eac	ch Re	ceipt th	is Period			
	FEC ID number of contributing federal political committee.	С						9		y	42.	00		
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) SIs Acct Mgmt		Me	emo	b Ite	em					
	Receipt For:	Aggregate	Yea	r-to-Date ▼										
	Primary General Other (specify)		-7-	336.00	P.	/R Ded	uctio	on (\$14.0	0 Bi-We	eekly)			
s	UBTOTAL of Receipts This Page (optional)							,			621.	45		
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SCHEDULE A (FEC Form 3X)

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IT.	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)							
			for each category of the Detailed Summary Page	X 11a 11b 13 14	11c 12 15 16 1						
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any p address of any political committe	erson for the purpose of sc to solicit contributions from	liciting contributions						
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group PA	AC)							
Α.	Full Name of Individual (Last, First, Middle Init MARDEN, PAUL, , ,	ial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 9 VAN MULEN STREET			11 / D D 11 28	2022						
	City MAHWAH	State NJ	Zip Code 07430-2977	Transaction ID : PF Amount of Each Rec							
	FEC ID number of contributing federal political committee.	С			576.90						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) I Plan CEO	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.3	0 Bi-Weekly)						
в.	Full Name of Individual (Last, First, Middle Init MOQUIST, DARREN, , ,	ial) or Full O	organization Name	Date of Receipt							
	Mailing Address 5313 MINNEHAHA BLVD	Ototo	Zin Oode	11 / D D 28	2022						
	City EDINA	State MN	Zip Code 55424-1406	Transaction ID : PR Amount of Each Rec							
	FEC ID number of contributing federal political committee.	С			576.90						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) I Regnl Pres	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.3	0 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Init BELLMAN, MARK, , ,	ial) or Full O	organization Name	Date of Receipt							
	Mailing Address 9120 BRANCH HOLLOW DR			11 / D D D 28	2022						
	City DALLAS	State TX	Zip Code 75243-7510	Transaction ID : PF							
	FEC ID number of contributing federal political committee.	С			42.00						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP SIs Acct Mgmt	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 336.00	P/R Deduction (\$14.00	Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)				1195.80						
Т	OTAL This Period (last page this line number of	only)									

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
			person for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (JnitedHealth Group P/	AC)
Full Name of Individual (Last, First, Middle A. CARTER, WILLIAM, , ,	e Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 1363 CHIPPENDALE RD			M M / D D / Y Y Y Y 11 28 2022
City HOUSTON	State TX	Zip Code 77018-5257	Transaction ID : PR2565448767043 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		115.38
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs Acct Mgt	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)
Full Name of Individual (Last, First, Middle B. KUNST, THOMAS, , ,	e Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 4872 103RD STREET			11 / 28 / Y Y Y Y 2022
City PLEASANT PRAIRIE	State WI	Zip Code 53158-6516	Transaction ID : PR2566302167043
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Plan CEO	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1846.08	P/R Deduction (\$76.92 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. MANSUKHANI, NEIL, , ,	e Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 2681 N FLAMINGO RD # 1006S			11 / 28 / Y Y Y Y 2022
City PLANTATION	State FL	Zip Code 33323-1766	Transaction ID : PR2567129467043 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		28.00
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Dir SIs Acct Mgmt	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optiona)		374.14
TOTAL This Period (last page this line num	ber only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

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(check only one)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17											
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions											
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (UnitedHealth Group PA	AC)											
Full Name of Individual (Last, First, Middle A. STEARNS, MATTHEW, , ,	Initial) or Full C	Organization Name	Date of Receipt											
Mailing Address 5118 FAIRGLEN LANE			11 28 2022 Transaction ID - PP2571777967043											
City CHEVY CHASE	State MD	Zip Code 20815-6517	Transaction ID : PR2571777967043											
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm	Memo Item											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)											
Full Name of Individual (Last, First, Middle PARRILLO, CHRISTOPHER, , ,	Initial) or Full C	Organization Name	Date of Receipt											
Mailing Address 12 WOODSUM DRIVE			11 28 2022											
City NEWBURY	State NH	Zip Code 03255-6232	Transaction ID : PR2571778267043 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	C		231.00											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 1848.00	P/R Deduction (\$77.00 Bi-Weekly)											
Full Name of Individual (Last, First, Middle C. MOYER, BRUCE, , ,	Initial) or Full C	Organization Name	Date of Receipt											
Mailing Address 6890 CANTERBURY LANE			11 28 / Y Y Y Y 2022											
City EDEN PRAIRIE	State MN	Zip Code 55346-2904	Transaction ID : PR2571778367043											
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period											
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item											
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 936.00	P/R Deduction (\$39.00 Bi-Weekly)											
SUBTOTAL of Receipts This Page (optional)			924.90											
TOTAL This Period (last page this line numb	er only)	•												

SCHEDULE A (FEC Form 3X) DEOEIDTO

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group P/	AC)
Full Name of Individual (Last, First, Middle A. HINTON, DUSTIN, , ,	nitial) or Full C	rganization Name	Date of Receipt
Mailing Address W132N6475 MARACH RD			11 28 2022
City	State	Zip Code	Transaction ID : PR2571978767043
MENOMONEE FALLS	WI	53051-6085	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		576.90
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
United HealthCare Services Inc	Hlth	Plan CEO	
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify) ▼		4615.20	P/R Deduction (\$192.30 Bi-Weekly)
			1
Full Name of Individual (Last, First, Middle B. ROBINSON, MARCUS, , ,	nitial) or Full C	rganization Name	Date of Receipt
Mailing Address 590 SPENDER TRACE			11 28 2022
City	State	Zip Code	Transaction ID : PR2572588967043
DUNWOODY	GA	30350-5018	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		42.00
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Sales IFP	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General		336.00	P/R Deduction (\$14.00 Bi-Weekly)
Other (specify) v		, 330.00	1
Full Name of Individual (Last, First, Middle C. JACQUET, SHAUN, , ,	nitial) or Full C	rganization Name	Date of Receipt
Mailing Address 4332 FOREST RIDGE DRI	νE		11 28 2022
City	State	Zip Code	Transaction ID : PR2572589367043
SUAMICO	WI	54313-8557	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		42.00
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
Optum Services, Inc	Dir (Gen Mgmt	
Receipt For:	Aggregate	Year-to-Date V	
Other (specify)		336.00	P/R Deduction (\$14.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional).			660.90
TOTAL This Period (last page this line number	er only)	······	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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				Detailed Summary Page	×			11		11c		12	<u> </u>					
	/ information copied from such Reports and St for commercial purposes, other than using the								se of s									
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate																	
<u>,</u> A.	Full Name of Individual (Last, First, Middle Initi CARLSON, KEVIN, , ,	ial) or Full C	Drga	nization Name	Date of Receipt													
	Mailing Address 4511 BROWNDALE AVENUE					M M	1	Ľ	28	/ Y	ү 20)22	Ŷ					
	City EDINA	State MN		Zip Code 55424-1142	Transaction ID : PR2572590067043 Amount of Each Receipt this Period													
	FEC ID number of contributing federal political committee.	С			288.45													
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) Mgmt		М	emo	o Ite	em									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 2307.60	F	P/R Dec	lucti	ion ((\$96.1	5 Bi-We	eekly	/)						
B.	Full Name of Individual (Last, First, Middle Initi BECK, JOANNE, , ,	ial) or Full C	Drga	nization Name	Date of Receipt													
	Mailing Address 117 GLORIA LANE				11 28 2022 Transaction ID : PR2572590367043													
	City CADIZ	State KY		Zip Code 42211-8824	Transaction ID : PR2572590367043 Amount of Each Receipt this Period													
	FEC ID number of contributing federal political committee.	С				42.12												
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) k Contrctng	Memo Item													
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ur-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)													
C.	Full Name of Individual (Last, First, Middle Initi OBRIEN, CHRISTINE, , ,	ial) or Full C	Date of Receipt															
	Mailing Address 931 FRENCH ST					11	J.	L	28	/ Y	20)22						
	City NEW ORLEANS	State LA		Zip Code 70124-3806						R2572			3					
	FEC ID number of contributing federal political committee.	С						y		,		42.0	0					
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) Mgmt		N	emo	o Ite	em									
	Receipt For: Primary General Other (specify)	Yea	ar-to-Date ▼ 336.00	P/R Deduction (\$14.00 Bi-Weekly)														
	JBTOTAL of Receipts This Page (optional)				-		-	j T		, ,	-	372.5	7					

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a ☐ 11b ☐ 11c ☐ 12												
		, , ,	13 14 15 16 17												
Any information copied from such Reports and S or for commercial purposes, other than using the															
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (JnitedHealth Group PA	.C)												
Full Name of Individual (Last, First, Middle In A. MILLER, KIMBERLEY, , ,	iitial) or Full C	organization Name	Date of Receipt												
Mailing Address 16 CELONOVA PLACE			11 28 2022 Transaction ID - DP2572501267042												
	State CA	Zip Code	Transaction ID : PR2572591267043												
FOOTHILL RANCH		92610-1942	Amount of Each Receipt this Period												
FEC ID number of contributing federal political committee.	С		42.00												
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Underwriting	Memo Item												
Receipt For:		Year-to-Date V	-												
Primary General Other (specify) ▼	, iggi egale	336.00	P/R Deduction (\$14.00 Bi-Weekly)												
Full Name of Individual (Last, First, Middle In B. WIFFLER, THOMAS, , ,	iitial) or Full C	rganization Name	Date of Receipt												
Mailing Address 1421 SOMERFIELD DRIVE			11 28 2022												
City	State	Zip Code	Transaction ID : PR2572992767043												
BOLINGBROOK	IL	60490-3207	Amount of Each Receipt this Period												
FEC ID number of contributing federal political committee.	С		576.90												
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) S Unit CEO	Memo Item												
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)												
Full Name of Individual (Last, First, Middle In C. BENSON, MICHAEL, , ,	iitial) or Full C	organization Name	Date of Receipt												
Mailing Address 2206 EAGLE VALLEY LN			11 28 2022												
City	State	Zip Code	Transaction ID : PR2573518967043												
WAUSAU	WI	54403-8154	Amount of Each Receipt this Period												
FEC ID number of contributing federal political committee.	С		43.26												
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir SIs Ops	Memo Item												
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 346.08	P/R Deduction (\$14.42 Bi-Weekly)												
SUBTOTAL of Receipts This Page (optional)	l		662.16												
TOTAL This Period (last page this line number															

Use separate schedule(s)

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		Use separate schedule(s)	(check o	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a]11b	11c	12						
Any information copied from such Reports and or for commercial purposes, other than using t													
		unces of any political continue					Committe						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle HARE, LESLIE, , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt								
Mailing Address 9029 SHEEP RANCH CT				11 28 / Y Y Y Y 2022									
City LAS VEGAS	State NV	Zip Code 89143-5432					9 7946704 is Period	3					
FEC ID number of contributing federal political committee.	С				-		42.0	00					
Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) Gen Mgmt		Memo	o Item								
Receipt For: Primary General Other (specify) $ earrow$	Aggregate	Year-to-Date ▼ 336.00	P/R De	educti	on (\$14.	.00 Bi-We	eekly)						
Full Name of Individual (Last, First, Middle MASTERS, SCOTT, , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt								
Mailing Address 1894 VILLAGE GLEN DRIV			M 11		28	/ Y	y y 2022	Y					
City SAINT IOHNS	State FL	Zip Code					7966704	3					
SAINT JOHNS	「∟	32259-9215	Amou	int of	Each R	leceipt th	is Period						
FEC ID number of contributing federal political committee.	C				-	-	115.5	50					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Ops		Memo	o Item								
Receipt For:	Aggregate	Year-to-Date ▼											
Other (specify) ▼		924.00	P/R De	P/R Deduction (\$38.50 Bi-Weekly)									
Full Name of Individual (Last, First, Middle C. WOHNOUTKA, CHRISTOPHER		rganization Name	Date	of Re	eceipt								
Mailing Address 17597 HIBISCUS AVE			11		28		2022 Y						
City LAKEVILLE	State MN	Zip Code 55044-3906			-		98196704 is Period	3					
FEC ID number of contributing federal political committee.	С				,	9	115.3	38					
Name of Employer (for Individual) United HealthCare Services Inc	Occ Dir T	upation (for Individual) Fax		Mem	o Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 923.04	P/R De	educti	ion (\$38.	.46 Bi-We	eekly)						
SUBTOTAL of Receipts This Page (optional).					,	. ,	272.8	8					
TOTAL This Period (last page this line number	er only)												

Use separate schedule(s)

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ידו			Use separate schedule(s)	(check only one)										
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a ☐ 11b ☐ 11c ☐ 12										
	y information copied from such Reports and Sta													
or	for commercial purposes, other than using the n NAME OF COMMITTEE (In Full)	name and a	adress of any political committee	e to solicit contributions from such committee.										
	UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	AC)										
A.	Full Name of Individual (Last, First, Middle Initia SIMPSON, TRENT, , ,	l) or Full O	rganization Name	Date of Receipt										
	Mailing Address 3111 NORCREST AVE N			M M / D D / Y Y Y Y 11 28 2022										
	City STILLWATER	State MN	Zip Code 55082-1779	Transaction ID : PR2574985067043 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		38.46										
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 846.12	P/R Deduction (\$38.46 Bi-Weekly)										
в.	Full Name of Individual (Last, First, Middle Initia CIANFROCCO, HEATHER, , ,	l) or Full O	rganization Name	Date of Receipt										
	Mailing Address 913 CHAMPLAIN PLACE			11 28 2022										
	City GIBSONIA	State PA	Zip Code	Transaction ID : PR2574986267043										
			15044-8079	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		576.90										
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CEO	Memo Item										
	Receipt For:	Aggregate	Year-to-Date ▼											
	Other (specify) ▼		4615.20	P/R Deduction (\$192.30 Bi-Weekly)										
C.	Full Name of Individual (Last, First, Middle Initia BURNETT, JAMIE, , ,		rganization Name	Date of Receipt										
	Mailing Address 4625 EWING AVENUE SOUTH		Zin Oode	11 / D D / Y Y Y Y 2022										
	City MINNEAPOLIS	State MN	Zip Code 55410-1745	Transaction ID : PR2574988267043 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		117.00										
	Name of Employer (for Individual) Optum Services, Inc	Occu VP I	upation (for Individual) T	Memo Item										
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 936.00	P/R Deduction (\$39.00 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			732.36										
	OTAL This Period (last page this line number or		r											

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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				Detailed Summary Page	×	11a		1	1b	L	11c	12					
						13		1	4		15	16	17				
or	/ information copied from such Reports and Station commercial purposes, other than using the																
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	d PAC (l	Un	itedHealth Group PA	AC)												
<u>م</u>	Full Name of Individual (Last, First, Middle Initi STRAIT, DENISE, , ,	al) or Full O	Drga	nization Name		Date of Receipt											
	Mailing Address 4362 SPORTSMAN CLUB RD					M N 11	/	I	D 28		/ Y	ү ү 2022	Y				
	City JOHNSTOWN	State OH		Zip Code 43031-9461				-				98936704 is Period	-				
	FEC ID number of contributing federal political committee.	С						-,				42.					
	Name of Employer (for Individual) Optum Services, Inc			tion (for Individual) Mgmt		N	lemo	o I	tem								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 336.72	P.	/R Dec	ducti	ior	n (\$14	1.0	3 Bi-We	ekly)					
3.	Full Name of Individual (Last, First, Middle Initi LANG, HEATHER, , ,	-	Drga	nization Name		Date c	of Re	ece	eipt								
	Mailing Address 1210 RIVER TERRACE DRIVE			1		[™] 11	/		28		/ Y	ү ү 2022	Y				
	City BLOOMINGTON	State MN		Zip Code 55431-4230								9146704 is Period	-				
	FEC ID number of contributing federal political committee.	С				115.38											
	Name of Employer (for Individual) Jnited HealthCare Services Inc		•	tion (for Individual) Gen Counsel Mgr		N	lemo	o I	tem								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ur-to-Date ▼ 923.04	P/	P/R Deduction (\$38.46 Bi-Weekly)											
).	Full Name of Individual (Last, First, Middle Initi NEWKIRK, MEGHAN, , ,	al) or Full O	Drga	nization Name	(Date c	of Re	ece	eipt								
	Mailing Address 10162 BEAVER CIR			1		^M 11	1		D 28		/ Y	2022 Y	Y				
-	City CYPRESS	State CA		Zip Code 90630-4113				-				00876704 is Period	-				
	FEC ID number of contributing federal political committee.	С						,			9	42.	12				
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) rowth Off		N	lemo	0	ltem								
	Receipt For: Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 336.96]	/R Deo	ducti	ior	ח (\$14	1.0 [,]	4 Bi-We	eekly)					
รเ	JBTOTAL of Receipts This Page (optional)			-			-	,			y	199.	59				

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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	LIVIZED RECEIPTS			Detailed Summary Page		X 11a		11	1b	ļ	11c		12				
				Detailed Summary Page		13		14	- F		15		16	17			
or	y information copied from such Reports and S for commercial purposes, other than using the													ions			
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Un	itedHealth Group PA	NC)												
۹.	Full Name of Individual (Last, First, Middle Init SJOBLAD, BETHANY, , ,	tial) or Full O	Drga	nization Name	Date of Receipt												
	Mailing Address 100 2ND STREET NE #510					11 / D D / Y Y Y Y Y 2022											
	City MINNEAPOLIS	State MN		Zip Code 55413-2541	_	Trans Amount								3			
	FEC ID number of contributing federal political committee.	C	Ì					-			-		576.9	90			
	Name of Employer (for Individual) Optum Services, Inc		•	tion (for Individual) n Mgmt		M	emo	o It	em								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 4615.20		P/R Ded	ucti	on	(\$192	2.3	0 Bi-W	/eek	ly)				
	Full Name of Individual (Last, First, Middle Init	tial) or Full O	Drga	nization Name		Date of	Re	ece	ipt								
	Mailing Address N54W20825 CARTERS CROS	SSING CIR				M m / D = D / Y = Y = Y = Y Y 11 28 2022 2022 Transaction ID : PR2575011667043 2023											
	City MENOMONEE FALLS	State WI		Zip Code 53051-6281	_	Trans Amount								3			
	FEC ID number of contributing federal political committee.	С				46.14											
	Name of Employer (for Individual) United HealthCare Services Inc	Occ KA	Memo Item														
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 369.12		P/R Deduction (\$15.38 Bi-Weekly)											
<u>с.</u>	Full Name of Individual (Last, First, Middle Init KEMMER, HEIDI, , ,	tial) or Full O	Drga	nization Name		Date of Receipt											
	Mailing Address 2211 WEST ROCKROSE PLA	ACE				^M 11	/	l	D D D 28		/ Y		22	Y			
	City CHANDLER	State AZ		Zip Code 85248-4208		Trans Amount					2 5750 eipt th			3			
	FEC ID number of contributing federal political committee.	С						,			y		42.4	12			
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) alth Plan Operations		M	emo	o It	em								
	Receipt For: Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 339.36		P/R Ded	ucti	ion	(\$14.	.14	Bi-We	eekly	()				
s	UBTOTAL of Receipts This Page (optional)			•••••				,	-		7		665.4	16			

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	-	Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
			Person for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)
Full Name of Individual (Last, First, Middle A. MADDOX, JEFFREY, , ,	Initial) or Full C	Prganization Name	Date of Receipt
Mailing Address 7810 HANOVER ST			M M / D D / Y Y Y Y Y 11 28 2022
City DALLAS	State TX	Zip Code 75225-8220	Transaction ID : PR2575039567043 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		576.90
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) I Plan CEO	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle B. HEATH, SEAN, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 1292 CASTLE CT			11 D D / Y Y Y Y Y 28 2022
City GOLDEN VALLEY	State MN	Zip Code 55427-4453	Transaction ID : PR2575048767043 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		42.12
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Compli	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)
Full Name of Individual (Last, First, Middle FITZPATRICK, JOSEPH, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 3936 CAMPELLO CURVE			11 28 / Y Y Y Y Y 2022
City CHASKA	State MN	Zip Code 55318-4639	Transaction ID : PR2575053767043 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		576.90
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP I	upation (for Individual) Fin	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)			1195.92
TOTAL This Period (last page this line numb	er only)		

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17										
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions										
NAME OF COMMITTEE (In Full)		InitedHealth Group P											
			AC)										
Full Name of Individual (Last, First, Middle A. LINDSAY, VIVIAN, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 14930 SW 39 ST			11 28 2022										
City DAVIE	State FL	Zip Code 33331-2767	Transaction ID : PR2575054967043 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		576.90										
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item										
Optum Services, Inc	VP	Gen Mgmt											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle B. CLACKO, MARY ANN, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 6358 COTEAU TRAIL			11 28 2022										
City	State	Zip Code	Transaction ID : PR2575057967043										
EDEN PRAIRIE	MN	55344-5205	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		173.07										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Compli	Memo Item										
Receipt For:		Year-to-Date ▼											
Primary General Other (specify) ▼		1038.42	P/R Deduction (\$57.69 Bi-Weekly)										
Full Name of Individual (Last, First, Middle C. ALLEN, MARK, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 11359 ENTREVAUX DRIVE	E		M M / D D / Y Y Y Y 11 28 2022										
	State MN	Zip Code	Transaction ID : PR2575060267043										
EDEN PRAIRIE		55347-2862	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		230.76										
Name of Employer (for Individual) Optum Services, Inc	Occ M A	upation (for Individual) VP	Memo Item										
Receipt For:	Aggregate	Year-to-Date ▼											
Other (specify)		1846.08	P/R Deduction (\$76.92 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional).			980.73										
TOTAL This Period (last page this line number													

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using t			13 14 15 16 17 version for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		·····	
UnitedHealth Group Incorpora	ited PAC (l	JnitedHealth Group P	AC)
Full Name of Individual (Last, First, Middle MCEVOY, AMY, , ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 11230 CEDAR POINTE DR	S		M M / D D / Y Y Y Y 11 28 2022
City MINNETONKA	State MN	Zip Code 55305-2983	Transaction ID : PR2575062267043 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		60.00
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 480.00	P/R Deduction (\$20.00 Bi-Weekly)
Full Name of Individual (Last, First, Middle B. CURRIE, ULYSSES, , ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 8232 GUNNAR DRIVE			11 28 2022
City FULTON	State MD	Zip Code 20759-2218	Transaction ID : PR2575064167043 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		90.00
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Health Equity	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 720.00	P/R Deduction (\$30.00 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. ZAETTA, CHRISTOPHER, , ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 214 PRINCE STREET			11 / D D / Y Y Y Y 2022
City ALEXANDRIA	State VA	Zip Code 22314-3314	Transaction ID : PR2575068367043 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		576.90
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Group Gen Counsel	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional).			726.90
TOTAL This Period (last page this line number	er only)		

Use separate schedule(s)

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111	EMIZED RECEIPTS			r each category of the etailed Summary Page	[X	11a] 11	b	110	; [12				
							13		14		15		16		17		
or	y information copied from such Reports and Stat for commercial purposes, other than using the n																
\setminus	NAME OF COMMITTEE (In Full)				-												
\rangle	UnitedHealth Group Incorporated	I PAC (l	Unit	edHealth Group PA	AC)												
١.	Full Name of Individual (Last, First, Middle Initia VERCHICK, TAMI, , ,	l) or Full O	Organ	ization Name		Date of Receipt											
	Mailing Address 9916 DUSTY WINDS AVE				11 28 2022 Transaction ID : PR2575068967043												
	City	State NV		Zip Code			Trans	acti	ion	ID :	PR25	7506	589670	43			
	LAS VEGAS			89117-5986		Aı	moun	t of	Ea	ch R	eceipt	this	s Perio	d			
	FEC ID number of contributing federal political committee.	С							-				115	5.38			
	Name of Employer (for Individual) Optum Services, Inc		•	on (for Individual) Technology		l	М	emo	o Ite	эm							
	Dessint For:	Aggregate															
	Primary General Other (specify) ▼		-	923.04		P/F	R Ded	luctio	on	(\$38	46 Bi-	Wee	∍kly)				
	Full Name of Individual (Last, First, Middle Initia	l) or Full O	Organ	ization Name		D	ate of	f Re	ecei	pt							
	Mailing Address 8494 E HAWAII LN					Γ	M M 11	/	Γ	28	1	Y	y 2022	Y			
	City	State		Zip Code			Trans	acti	ion	ID :	PR25	7507	700670	43			
	DENVER	CO		80231-2732		Aı	moun	t of	Ea	ch R	eceipt	this	s Perio	d			
	FEC ID number of contributing federal political committee.	С				115.38											
	Name of Employer (for Individual) United HealthCare Services Inc			on (for Individual) Mgmt			М	emo	o Ite	эm							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Aggregate Year-to-Date ▼ 923.04						P/R Deduction (\$38.46 Bi-Weekly)								
	Full Name of Individual (Last, First, Middle Initia ENLOW, MARGARET, , ,	l) or Full O		D	ate of	f Re	ecei	pt									
	Mailing Address 196 SOMERSLY PL					Γ	^M 11	/	Γ	28	1	Y	y y 2022	Y			
	City	State		Zip Code			Trans	sacti	ion	ID :	PR25	750	710670)43			
	LEXINGTON	KY		40515-5717		Aı	moun	t of	Ea	ch R	eceipt	this	s Perio	d			
	FEC ID number of contributing federal political committee.	С				ļ			y		. ,		42	2.12			
	Name of Employer (for Individual)	Occi	upati	on (for Individual)		1	М	emo	o Ite	em							
	United HealthCare Services Inc	Dir N	Ntwk	Contrctng													
	Receipt For: Primary General Other (specify)	Aggregate	Year	336.96	ı	P/F	R Ded	luctio	on	(\$14.	.04 Bi-	Wee	əkly)				
S	JBTOTAL of Receipts This Page (optional)		- y -		•	[_	9	-		_	272	2.88	_		
т	OTAL This Period (last page this line number on	ıly)			•	E			-					-	i L		

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorporat	ed PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle Ir NICHOLS, SANDRA, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 16900 CROWN BRIDGE DR	IVE		M M / D D / Y Y Y Y 11 28 2022							
City DELRAY BEACH	State FL	Zip Code 33446-2407	Transaction ID : PR2575074567043 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		576.90							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 2 CMO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle Ir B. BECK, RALPH, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address W155 N5314 SHARPTAIL C			11 / D D / Y Y Y Y 2022							
City	State	Zip Code	Transaction ID : PR2575074967043							
MENOMONEE FALLS	WI	53051-6771	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Health Plan Operations	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼	1							
Primary General Other (specify) ▼		336.96	P/R Deduction (\$14.04 Bi-Weekly)							
Full Name of Individual (Last, First, Middle Ir C. BURNAM, DEBRA, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 377 CALABRIA BEACH ST			M M / D D / Y Y Y Y 11 28 2022							
City HENDERSON	State NV	Zip Code 89015-2430	Transaction ID : PR2575076267043 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		42.12							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Clin Ops	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			661.14							
TOTAL This Period (last page this line number	r only)									

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 1						
			13 14 15 16 1 erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middl A. ONEILL, AUDREY, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 71 CHESTNUT RIDGE F	D		M M / D D / Y Y Y Y 11 28 2022						
City QUEENSBURY	State NY	Zip Code 12804-7317	Transaction ID : PR2575089467043 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		57.69						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.52	P/R Deduction (\$19.23 Bi-Weekly)						
Full Name of Individual (Last, First, Midd B. VIESTA, RICHARD, , ,	Date of Receipt								
Mailing Address 1 COMPASS COURT			11 / 28 / Y Y Y Y 2022						
City OYSTER BAY	State NY	Zip Code 11771-1602	Transaction ID : PR2575098567043 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Actuary	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middl C. BENARDETTE, DANIEL, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 175 W 60TH ST APT 30C			11 / D D / Y Y Y Y 2022						
City NEW YORK	State NY	Zip Code 10023-7559	Transaction ID : PR2575102867043 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		288.45						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2307.60	P/R Deduction (\$96.15 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional	l)		461.52						
TOTAL This Period (last page this line nun	ber only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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(check only one)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17										
Any information copied from such Reports and S or for commercial purposes, other than using the			erson for the purpose of soliciting contributions										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	JnitedHealth Group PA	NC)										
Full Name of Individual (Last, First, Middle Ini CHAMPION, PHEBE, , ,	itial) or Full C	rganization Name	Date of Receipt										
Mailing Address 2763 THUNDER BAY AVE													
City	State NV	Zip Code	Transaction ID : PR2575108367043										
HENDERSON FEC ID number of contributing	C	89052-7001	Amount of Each Receipt this Period										
federal political committee.													
Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) Cust Service	Memo Item										
Receipt For: Primary General Other (specify) ▼	imary General Aggregate Teal-to-Date V												
Full Name of Individual (Last, First, Middle Ini B. HAYDEN, KARI, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name HAYDEN, KARI, , ,												
Mailing Address 6109 BANEY COURT	M M / D D / Y Y Y Y Y 11 28 2022												
City MINNETONKA	State MN	Zip Code 55345-6301	Transaction ID : PR2575110367043 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		115.38										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ops	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 884.58	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Middle Ini C. MADDIGAN, DANIEL, , ,	itial) or Full C	rganization Name	Date of Receipt										
Mailing Address 766 S MARTIN STREET C22	28		M M / D D / Y Y Y Y 11 28 2022										
City LONGMONT	State CO	Zip Code 80501-6493	Transaction ID : PR2575114867043 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		42.12										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ir Software Engineering	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)			232.50										
TOTAL This Period (last page this line number													

Use separate schedule(s)

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		Use separate schedule(s) for each category of the	(check only one)						
ITEMIZED RECEIPTS	X 11a 11b 11c 12								
Any information copied from such Reports and									
or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	ne name and a	adress of any political committee	to solicit contributions from such committee.						
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle I DOERFLER, JAMES, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 9163 WASSERMANN CT			11 28 2022						
City VICTORIA	State MN	Zip Code 55386-4592	Transaction ID : PR2575131567043 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		115.38						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Tax	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle II B. HUNT, ZOE, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 4030 SERANGO COURT			11 28 2022						
City WEST LINN	State OR	Zip Code 97068-2840	Transaction ID : PR2575136267043 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		42.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P/R Deduction (\$14.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle In C. MCDONNEL, LISA, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 9664 LAFORET DRIVE			11 / D D / Y Y Y Y 28 / 2022						
City EDEN PRAIRIE	State MN	Zip Code 55347-3538	Transaction ID : PR2575136367043 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		42.12						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ? Ntwk	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			199.50						
TOTAL This Period (last page this line numbe	r only)								

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

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			for each category of the Detailed Summary Page	X 11a 11b 11c 12					
			_ claired Summary Fugo	13 14 15 16 17					
or	information copied from such Reports and Stat for commercial purposes, other than using the n	tements ma ame and a	y not be sold or used by any p ddress of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.					
\backslash	NAME OF COMMITTEE (In Full)								
$\left \right $	UnitedHealth Group Incorporated	I PAC (L	InitedHealth Group PA	AC)					
١.	Full Name of Individual (Last, First, Middle Initia DEWALL, PATRICK, , ,	l) or Full Oi	ganization Name	Date of Receipt					
	Mailing Address 7662 RIDGEVIEW WAY			11 / D D / Y Y Y Y Y 2022					
	City	State	Zip Code	Transaction ID : PR2575145367043					
	CHANHASSEN	MN	55317-4507	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		25.23					
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) uty Gen Counsel Mgr	Memo Item					
	Paggint For:		Year-to-Date ▼	—					
	Primary General	. iggi ogalo		P/R Deduction (\$8.41 Bi-Weekly)					
	Other (specify) ▼								
	Full Name of Individual (Last, First, Middle Initia MCGANN, JEAN, , ,	l) or Full Oi	Date of Receipt						
	Mailing Address 4 VILLAGE ROAD	11 28 2022							
	City	State	Zip Code	Transaction ID : PR2575146967043					
	FLORHAM PARK	NJ	07932-2415	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		42.12					
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Acct Mgmt SB KA	Memo Item					
	Receipt For:	Aggregate	Year-to-Date ▼	1					
	Primary General Other (specify) ▼		, 336.96	P/R Deduction (\$14.04 Bi-Weekly)					
	Full Name of Individual (Last, First, Middle Initia PETERSOHN, PATRICK, , ,	l) or Full Oi	ganization Name	Date of Receipt					
	Mailing Address 16413 BIRCH STREET	11 28 2022							
	City	State	Zip Code	Transaction ID : PR2575148367043					
	OVERLAND PARK	KS	66085-7842	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		576.90					
	Name of Employer (for Individual)	Occi	pation (for Individual)	Memo Item					
	United HealthCare Services Inc		Reg VP of SIs	-					
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General Other (specify)		4615.20	P/R Deduction (\$192.30 Bi-Weekly)					
s	JBTOTAL of Receipts This Page (optional)			644.25					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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		X 11a 11b 11c 12									
		13 14 15 16 1									
nd Statements ma g the name and a	ay not be sold or used by any p ddress of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.									
rated PAC (l	JnitedHealth Group PA	AC)									
le Initial) or Full O	rganization Name										
A PARKWAY		Date of Receipt									
		11 28 2022									
		Transaction ID : PR2575155967043									
С		Amount of Each Receipt this Period									
	,	Memo Item									
		P/R Deduction (\$19.23 Bi-Weekly)									
le Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 2701 KING JAMES AVE											
State	Zip Code	Transaction ID : PR2575156467043									
IL	60174-7827	_ Amount of Each Receipt this Period									
C		230.76									
	,	Memo Item									
Aggregate	Year-to-Date ▼ 1846.08	P/R Deduction (\$76.92 Bi-Weekly)									
le Initial) or Full O	rganization Name	Date of Receipt									
RAZVI, NIGHET, , , Mailing Address 1015 S CLINTON AVENUE											
State IL		Transaction ID : PR2575168667043									
С		Amount of Each Receipt this Period									
		Memo Item									
	Year-to-Date ▼										
	g the name and a rated PAC (L le Initial) or Full O A PARKWAY State MN C Occu VP I Aggregate le Initial) or Full O State IL C Occu Mkt Aggregate le Initial) or Full O UE State IL C Occu Mkt Occu Ne	State MN Zip Code 55419-1163 C Occupation (for Individual) VP Real Estate Svs Aggregate Year-to-Date 461.52 Aggregate Year-to-Date 461.52 Ite Initial) or Full Organization Name Occupation (for Individual) Mkt Pres Occupation (for Individual) Mkt Pres 1846.08 Ite Initial) or Full Organization Name 1846.08 UE Zip Code 60304-1823 Ite Code 60304-1823									

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
or for commercial purposes, other than using t			erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle HAMANN, CHAD, , ,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 7638 RIDGEVIEW WAY	1-		11 / D D / Y Y Y Y Y 2022									
City CHANHASSEN	State MN	Zip Code 55317-4507	Transaction ID : PR2575170167043									
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Tax	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$36.06 Bi-Weekly)										
Full Name of Individual (Last, First, Middle WIELAND, MICHAEL, , ,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 6741 EAST SHADOW LAK	M M / D D / Y Y Y Y Y 11 28 2022											
City CIRCLE PINES	State MN	Zip Code 55014-1348	Transaction ID : PR2575181667043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		42.12									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Dir I O Engineering	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)									
Full Name of Individual (Last, First, Middle C. MELLO, STEPHANIE, , ,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 179 HILTON LANE			11 / D D / Y Y Y Y Y 28 2022									
City SWANSEA	State MA	Zip Code 02777-3809	Transaction ID : PR2575191367043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		42.12									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional).	_, 		192.42									
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SCHEDULE A (FEC Form 3X) DEAEIDTA

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ITEMIZED RECEIPTS for each category Detailed Summary					X 11a	11b	11c	12		
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements ma	ay not be sold or used by	any pers	13 on for the	14 purpose of	15 f soliciting	16 contribut	ions	
$\overline{\langle}$	NAME OF COMMITTEE (In Full)		address of any political col							
\rangle	UnitedHealth Group Incorporated	I PAC (l	UnitedHealth Grou	ıp PAC	2)					
Α.	Full Name of Individual (Last, First, Middle Initia DEMARIS, PETER, , ,	l) or Full O	Drganization Name		Date of	Receipt				
	Mailing Address 2301 OLIVER AVE S				M M 11	/ D 28		y y 2022	Y	
	City MINNEAPOLIS	State MN	Zip Code 55405-2448			action ID : of Each F			3	
	FEC ID number of contributing federal political committee.	С				 		576.9	90	
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Mktg eComm		Me	emo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.2	20	P/R Deduction (\$192.30 Bi-Weekly)					
в.	ull Name of Individual (Last, First, Middle Initial) or Full Organization Name MUELLER, CYNTHIA, , ,					Receipt				
	Mailing Address 6919 OLD WHISKEY CREEK D	R		11 28 2022						
	City FORT MYERS	State FL	Zip Code 33919-1828			action ID : of Each F			3	
	FEC ID number of contributing federal political committee.	С						42.7	2	
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) VP Clms			Me	emo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 336.	96	P/R Dedu	uction (\$14	.04 Bi-We	ekly)		
с.	Full Name of Individual (Last, First, Middle Initia CONDON, CRAIG, , ,	l) or Full O	Organization Name		Date of	Receipt				
Mailing Address 268 OAK LANDING WAY				M M 11	/ D		y y 2022	Y		
	City SEVERNA PARK	State MD	Zip Code 21146-3116			of Each F			3	
	FEC ID number of contributing federal political committee.	С			576.9				90	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Unit CEO		M (emo Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4615.2		P/R Ded	uction (\$19	92.30 Bi-W	/eekly)		
s	UBTOTAL of Receipts This Page (optional)			····· >				1195.9	2	
т	OTAL This Period (last page this line number or	ıly)		····· >						

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports and Sta or for commercial purposes, other than using the			rson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (I	UnitedHealth Group PA	C)					
Full Name of Individual (Last, First, Middle Initia CARRIS, DONNA, , ,	al) or Full C	Organization Name	Date of Receipt					
Mailing Address 27 WEST WILLOW LN			M M / D D / Y Y Y Y 11 28 2022					
City CHARLESTOWN	State RI	Zip Code	Transaction ID : PR2575212567043					
CHARLESTOWN		02813-1727	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		115.38					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item					
Receipt For:	Aggregate	Year-to-Date V	-					
Primary General Other (specify) ▼		923.04	P/R Deduction (\$38.46 Bi-Weekly)					
Full Name of Individual (Last, First, Middle Initia B. STORDAHL, PAUL, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name STORDAHL, PAUL,							
Mailing Address 7001 W 175TH AVENUE	11 28 2022							
City EDEN PRAIRIE	State MN	Zip Code 55346-2161	Transaction ID : PR2575213067043 Amount of Each Receipt this Period 576.90					
FEC ID number of contributing federal political committee.	С							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Chief Actuary	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 4615.20	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle Initia C. MARTIN, PETER, , ,	al) or Full C	Organization Name	Date of Receipt					
Mailing Address 7091 HIGHOVER DRIVE			11 28 2022					
City CHANHASSEN	State MN	Zip Code 55317-7572	Transaction ID : PR2575213667043 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		45.00					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Unit CFO	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 360.00	P/R Deduction (\$15.00 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			737.28					
TOTAL This Period (last page this line number o								

Use separate schedule(s)

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PAGE 70 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
or for commercial purposes, other than usin			erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Mide MEYERHOFER, JEFFREY, , ,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 6624 IROQUOIS TRAIL			11 / D D / Y Y Y Y Y 2022						
City EDINA	State MN	Zip Code 55439-1065	Transaction ID : PR2575214667043						
FEC ID number of contributing federal political committee.	С	33435-1003	Amount of Each Receipt this Period						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1384.56	P/R Deduction (\$57.69 Bi-Weekly)						
Full Name of Individual (Last, First, Mide B. TRUXAL, WILLIAM, , ,	dle Initial) or Full O	Date of Receipt							
Mailing Address 226 HARBOR VIEW LA	M M / D D / Y Y Y Y 11 28 2022								
City LARGO	State FL	Zip Code 33770-4007	Transaction ID : PR2575218467043 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		576.90						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) sion CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Mide C. WILSON, ADAM, , ,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 336 SALEM CHURCH F	ROAD		11 / D D / Y Y Y Y Y 28 2022						
City SUNFISH LAKE	State MN	Zip Code 55118-4719	Transaction ID : PR2575218667043 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1384.56	P/R Deduction (\$57.69 Bi-Weekly)						
SUBTOTAL of Receipts This Page (option	lal)		923.04						
TOTAL This Period (last page this line nu	mber only)	•							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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ITEMIZED RECEIPTS			Use separate schedule(s)	(ch	(check only one)							
			for each category of the Detailed Summary Page		′ 11a 13		11b 14	11c	12	17		
	y information copied from such Reports and Sta for commercial purposes, other than using the n				for the		oose of	soliciting	contribu	tions		
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	InitedHealth Group PA	NC)								
A.	Full Name of Individual (Last, First, Middle Initia GOODMAN, CYNTHIA, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt					
	Mailing Address 3717 BUCKEYE DRIVE				м м 11	/	28	/ Y	y y 2022	Y		
	City MCKINNEY	State TX	Zip Code 75071-8453						2 2016704 is Period			
	FEC ID number of contributing federal political committee.	С							43.	26		
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) (A VP SIs		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate `	P/R Deduction (\$14.42 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name SHORS, MATTHEW, , ,						ceipt					
	Mailing Address 4649 EWING AVENUE SOUTH		11 28 2022					Y				
	City MINNEAPOLIS	State MN	Zip Code 55410-1745				-		2236704	-		
	FEC ID number of contributing federal political committee.	C D number of contributing					Amount of Each Receipt this Period					
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) eputy Gen Counsel	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	F	P/R Dedu	uctio	on (\$192	2.30 Bi-W	'eekly)			
с.	Full Name of Individual (Last, First, Middle Initia SANTORO, MICHAEL, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt					
	Mailing Address 18 OLD FIRE ROAD				M M 11	/	28		2022 Y			
	City TRUMBULL	State CT	Zip Code 06611-1431						22266704 is Period			
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .		576.	90		
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP C	pation (for Individual) Ops	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 4615.20					on (\$19:	2.30 Bi-W	/eekly)			
s	UBTOTAL of Receipts This Page (optional)		•••••				, .		1197.	06		
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SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
or	y information copied from such Reports and State for commercial purposes, other than using the nar								
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	C)					
Α.	Full Name of Individual (Last, First, Middle Initial) GRUNDHOEFER, BRYAN, , ,		rganization Name	Date of Receipt					
	Mailing Address 317 SIDNEY BAKER STREET SC SUITE 400 PMB 519 City	OUTH State	Zip Code	11 28 2022 Transaction ID : PR2575232767043					
	KERRVILLE	ТХ	78028-6150	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		576.00					
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) D Med Grp Non Physn	Memo Item					
	Receipt For: A Primary General Other (specify) ▼	P/R Deduction (\$192.00 Bi-Weekly)							
B.	Full Name of Individual (Last, First, Middle Initial) KIRKPATRICK, SUSAN, , ,	or Full O	rganization Name	Date of Receipt					
	Mailing Address 417 STERLING STREET	11 28 2022							
	City LANCASTER	State MA	Zip Code 01523-1847	Transaction ID : PR2575233667043 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		115.38 Memo Item					
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Risk Management						
	Receipt For: A Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)					
с.	Full Name of Individual (Last, First, Middle Initial) RUSSELL, THOMAS, , ,	or Full O	rganization Name	Date of Receipt					
	Mailing Address 10205 GROOMSBRIDGE ROAD			11 28 2022					
	City JOHNS CREEK	State GA	Zip Code 30022-5645	Transaction ID : PR2575238667043 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		28.00					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Empl Rel	Memo Item					
	Receipt For: A Primary General Other (specify)	ggregate	Year-to-Date ▼ 308.00	P/R Deduction (\$14.00 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)			719.38					
т	OTAL This Period (last page this line number only)	►						

SCHEDULE A (FEC Form 3X) DEOEIDTO

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
			person for the purpose of soliciting contributions to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)									
 Full Name of Individual (Last, First, Middle A. SHUEY, JOANNE, , , 	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 2694 WEST CREEK DRIV	E		11 28 2022									
City FRISCO	State TX	Zip Code 75033-4759	Transaction ID : PR2575241667043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		30.00									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) C SIs RVP KA	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P/R Deduction (\$10.00 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. CHOATE, THOMAS, , ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 8222 STONE MASON CT			11 28 2022									
City WINDERMERE	State FL	Zip Code 34786-5624	Transaction ID : PR2575247867043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		576.90									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Unit CEO	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle C. DIMARTINO, TIMOTHY, , ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 49605 KEYCOVE ST			11 28 2022									
City CHESTERFIELD	State MI	Zip Code 48047-2361	Transaction ID : PR2575248167043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		115.38									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs Acct Mgt	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			722.28									
TOTAL This Period (last page this line numb	per only)											

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				Detailed Summary Page	×	11a		11k		11c	12	— 1 – 7			
	y information copied from such Reports and Stat for commercial purposes, other than using the na								e of s						
<u> </u>	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated														
A.	Full Name of Individual (Last, First, Middle Initial DARRAH, JACQUELINE, , ,) or Full O	Drgan	ization Name	C	Date of Receipt									
	Mailing Address 6725 YORK AVENUE SOUTH #	612				M M 11	1		28	1	y y y 2022	Y			
	City EDINA	State MN		Zip Code 55435-3238	A	Transaction ID : PR2575248567043 Amount of Each Receipt this Period 115.38									
	FEC ID number of contributing federal political committee.	С													
	Name of Employer (for Individual) Optum Services, Inc		•	on (for Individual) Gen Counsel	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year	r-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)										
	Full Name of Individual (Last, First, Middle Initial BRANT, PAUL, , ,) or Full O	Drgan	ization Name		Date of	Re	ceip	pt						
	Mailing Address 17 ROCKY BROOK ROAD			7.0.1		™M 11	/	D	28		y y y 2022	Ý			
	City WILTON	State CT		Zip Code 06897-1919				-			52502670 this Perio				
	FEC ID number of contributing federal political committee.	С			[115.38									
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) /P SIs Acct Mgt		Me	emo	lte	em						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year	r-to-Date ▼ 923.04	P/I	P/R Deduction (\$38.46 Bi-Weekly)									
	Full Name of Individual (Last, First, Middle Initial KUETER, DANIEL, , ,) or Full O	Drgan	ization Name		Date of	Re	ceip	pt						
	Mailing Address 1500 WINGATE DRIVE					M M	1	L	28	/	y y y 2022	_			
	City DELAWARE	State OH		Zip Code 43015-9200	A						52558670 this Perio				
	FEC ID number of contributing federal political committee.	С				_		y		9	576	.90			
	Name of Employer (for Individual) United HealthCare Services Inc		•	on (for Individual) ment CEO		Me	emo) Ite	əm						
	Receipt For: Primary General Other (specify)	Aggregate	Year	r-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			•	[,		,	807	.66			
т	OTAL This Period (last page this line number on	ly)						,							

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	EMIZED RECEIPTS			Detailed Summary Page	×	-		111	b [11c	12				
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	y information copied from such Reports and Stat for commercial purposes, other than using the na														
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Jni	tedHealth Group PA	C)										
A.	Full Name of Individual (Last, First, Middle Initial BACHMANN, ANITA, , ,) or Full O	rgar	nization Name	[Date of	Re	eceip	pt						
	Mailing Address 815 NORTHERN SHORES POIN	NT				11 / D D / Y Y Y Y Y 2022									
	City	State		Zip Code		Trans	acti	ion	ID : F	PR2575	2584670	43			
	GREENSBORO	NC		27455-3459	/	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			576.90										
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) n CEO	Memo Item										
	Receipt For:	Aggregate	Yea	r-to-Date ▼											
	Primary General Other (specify) ▼		-	4615.20	P	P/R Deduction (\$192.30 Bi-Weekly)									
В.	Full Name of Individual (Last, First, Middle Initial BROOMFIELD, ROBERT, , ,) or Full O	rgar	nization Name		Date of	Re	eceip	pt						
	Mailing Address 12501 WEST 156TH STREET					M M 11	/	D	28	/ Y	ү ү 2022	Ŷ			
	City	State KS		Zip Code				-			2604670				
	OVERLAND PARK	r.S	-	66221-2662	_	Amount	of	Ead	ch Re	eceipt t	his Perio	d			
	FEC ID number of contributing federal political committee.	С				138.45 Memo Item									
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) In CEO											
Possint For:				r-to-Date ▼ 1107.60	P/	P/R Deduction (\$46.15 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial ZARN, MARY, , ,) or Full O	rgar	nization Name		Date of	Re	eceip	pt						
	Mailing Address 11192 BLUESTEM LANE					^M 11	/	D	28	/]	2022	Y			
		State MN		Zip Code							52691670				
			_	55347-4731	_ /	Amount	of	Ead	ch Re	eceipt t	his Perio	d			
	FEC ID number of contributing federal political committee.	s a l								, ,	20 [.]	1.90			
	Name of Employer (for Individual)	Occi	upat	ion (for Individual)		Me	emo	b Ite	em						
	United HealthCare Services Inc	Divis	sion	CEO	_										
	Receipt For:	Aggregate	Yea	r-to-Date ▼		/P Dod	uctio	on ((¢ 67)		(ookhy)				
	Other (specify)		-	1615.20		P/R Deduction (\$67.30 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)							,			91	7.25			
т	OTAL This Period (last page this line number on	ly)		•••••				,							

SCHEDULE A (FEC Form 3X) DEOEIDTO

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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions									
	NAME OF COMMITTEE (In Full)												
\rangle	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group P/	AC)									
Α.	Full Name of Individual (Last, First, Middle Init ZAFFIRIS, NICHOLAS, , ,	ial) or Full O	rganization Name	Date of Receipt									
	Mailing Address 1241 LAUREL CT			11 28 2022									
	City MARCO ISLAND	State FL	Zip Code 34145-2351	Transaction ID : PR2575270667043 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		42.12									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Init HAMBLIN, JILLIAN, , ,	ial) or Full O	rganization Name	Date of Receipt									
	Mailing Address 3103 BEACON GROVE ST			11 / Y Y Y Y 28 2022									
	City	State	Zip Code	Transaction ID : PR2575290367043									
	SPRING	TX	77389-4348	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		115.38									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Product	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Init MUELLER, STEVEN, , ,	ial) or Full O	rganization Name	Date of Receipt									
	Mailing Address 6895 LAKE HARRISON CIRC		7.0.1	11 / D D / Y Y Y Y 11 28 2022									
	City CHANHASSEN	State MN	Zip Code 55317-4589	Transaction ID : PR2575294567043 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		115.38									
	Name of Employer (for Individual) Optum Services, Inc	Occu VP (upation (for Individual) Dps	Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)									
⊢	UBTOTAL of Receipts This Page (optional)			272.88									

Use separate schedule(s)

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	MIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a ☐ 11b ☐ 11c ☐ 12										
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	AME OF COMMITTEE (In Full) JnitedHealth Group Incorporated I	PAC (U	InitedHealth Group PA	C)										
	ull Name of Individual (Last, First, Middle Initial) HEWITT, SCOTT, , ,	or Full Or	ganization Name	Date of Receipt										
N	lailing Address 1443 RAYMOND AVE													
	· ·	State MN	Zip Code	Transaction ID : PR2575296767043										
_	SAINT PAUL		55108-1430	Amount of Each Receipt this Period										
	EC ID number of contributing deral political committee.			230.76										
	ame of Employer (for Individual) ptum Services, Inc		pation (for Individual) Itwk Prgms	Memo Item										
R		For: Aggregate Year-to-Date ▼												
	Other (specify)		1846.08	P/R Deduction (\$76.92 Bi-Weekly)										
	ull Name of Individual (Last, First, Middle Initial)	or Full Or	ganization Name	Date of Receipt										
N	lailing Address 8 CLOISTER COURT			11 28 2022										
	5	State	Zip Code	Transaction ID : PR2575305667043										
L	ADERA RANCH	CA	92694-1556	Amount of Each Receipt this Period										
	EC ID number of contributing deral political committee.	C		576.90										
	lame of Employer (for Individual) nited HealthCare Services Inc	Occu SVP	pation (for Individual) Prd	Memo Item										
R	eceipt For: Primary General Other (specify) ▼	ggregate \	/ear-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)										
	ull Name of Individual (Last, First, Middle Initial) PEEL, CHAD, , ,	or Full Or	ganization Name	Date of Receipt										
N	lailing Address 7185 GUNFLINT TRAIL			11 28 / Y Y Y Y 2022										
	,	State MN	Zip Code	Transaction ID : PR2575329867043										
_	CHANHASSEN		55317-4743	Amount of Each Receipt this Period										
	EC ID number of contributing deral political committee.			230.76										
N	ame of Employer (for Individual)	Occu	pation (for Individual)	Memo Item										
	Inited HealthCare Services Inc	VP H	Ithcare Econ											
R	eceipt For: A	ggregate \	lear-to-Date ▼											
	Other (specify)		1846.08	P/R Deduction (\$76.92 Bi-Weekly)										
SU	BTOTAL of Receipts This Page (optional)		•	1038.42										
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Use separate schedule(s)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (UnitedHealth Group PA	.C)									
Full Name of Individual (Last, First, Middle Ir WHITE, WAYNE, , ,	nitial) or Full C	Organization Name	Date of Receipt									
Mailing Address 8727 W BUCKHORN TRL			11 / D D / Y Y Y Y 2022									
City PEORIA	State AZ	Zip Code 85383-4852	Transaction ID : PR2575342367043									
		00000-4002	_ Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		576.90									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Cust Svs	Memo Item									
Receipt For:	Aggregate	Year-to-Date V	-									
Primary General Other (specify) ▼		4615.20	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle Ir B. HUYSMAN, JAMES, , ,	nitial) or Full C	Organization Name	Date of Receipt									
Mailing Address 411 NORTH NEW RIVER DF # 904	RIVE E		11 28 2022									
City FORT LAUDERDALE	State FL	Zip Code 33301-3179	Transaction ID : PR2575342667043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		28.86									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.88	P/R Deduction (\$9.62 Bi-Weekly)									
Full Name of Individual (Last, First, Middle Ir c. IMDIEKE, PATRICK, , ,	nitial) or Full C	Date of Receipt										
Mailing Address 15900 WHITE PINE DRIVE			11 28 2022									
City WAYZATA	State MN	Zip Code 55391-2125	Transaction ID : PR2575347967043									
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 42.12									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus Anlys Cnslt	Memo Item									
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)		•	647.88									
TOTAL This Period (last page this line number	only)	·····										

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

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PAGE 79 OF

13 14 15 16 17 rson for the purpose of soliciting contributions to solicit contributions from such committee. C) Date of Receipt 11 28 2022 Transaction ID : PR2575350967043 Amount of Each Receipt this Period 117.00 Memo Item P/R Deduction (\$39.00 Bi-Weekly) 2022 117.00 Date of Receipt 11 28 2022 Transaction ID : PR2575354067043 117.00 11 Amount of Each Receipt this Period 117.00 117.00 Memo Item 28 2022 117.00 Amount of Each Receipt this Period 117.00 11 Transaction ID : PR2575354067043 Amount of Each Receipt this Period							
to solicit contributions from such committee. C) Date of Receipt 11 28 2022 Transaction ID : PR2575350967043 Amount of Each Receipt this Period 117.00 Memo Item P/R Deduction (\$39.00 Bi-Weekly) Date of Receipt 11 28 2022 Transaction ID : PR2575354067043							
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Date of Receipt 11 28 2022 Transaction ID : PR2575350967043 Amount of Each Receipt this Period 117.00 Memo Item P/R Deduction (\$39.00 Bi-Weekly) Date of Receipt 11 28 2022 Transaction ID : PR2575354067043							
M m m / 28 2022 Transaction ID : PR2575350967043 Amount of Each Receipt this Period 117.00 Memo Item P/R Deduction (\$39.00 Bi-Weekly) Date of Receipt 11 28 28 2022 Transaction ID : PR2575354067043							
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11 28 2022 Transaction ID : PR2575350967043 Amount of Each Receipt this Period 117.00 Memo Item P/R Deduction (\$39.00 Bi-Weekly) Date of Receipt 11 28 2022 Transaction ID : PR2575354067043							
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Date of Receipt 11 28 2022 Transaction ID : PR2575354067043							
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11 28 2022 Transaction ID : PR2575354067043							
Amount of Each Receipt this Period							
42.12							
P/R Deduction (\$14.04 Bi-Weekly)							
Date of Receipt							
11 28 2022							
Transaction ID : PR2575357767043							
Amount of Each Receipt this Period							
230.76							
Memo Item							
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P/R Deduction (\$76.92 Bi-Weekly)							

SCHEDULE A (FEC Form 3X) _____ _

Use separate schedule(s)

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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12					
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	ny information copied from such Reports and Sta for commercial purposes, other than using the r													
$\left/ \right.$	NAME OF COMMITTEE (In Full)	//												
	UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	NC)										
/	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name											
Α.	NIELSEN, MICHELE, , ,				Date of	Rec	eipt							
	Mailing Address 101 W 11TH STREET				M M 11	/	D D 28	/ Y	2022	Y				
	City	State NJ	Zip Code	_	Trans	actic	on ID : P	PR2575	36176704	43				
	SHIP BOTTOM	INJ	08008-6303	_ /	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		115.38										
	Name of Employer (for Individual)	Осси	upation (for Individual)		Me	mo	Item							
	United HealthCare Services Inc	Ntw	k Regn Pres											
	Receipt For:	Aggregate	Year-to-Date 🔻											
	Other (specify) ▼	· · ·	923.04	P.	/R Dedu	ictio	n (\$38.4	6 Bi-We	eekly)					
_	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name			_								
в.	COOK, JORDANA, , , Mailing Address 46 PALMETTO COVE COURT			- '	Date of	Rec								
	Maining Address 46 PALMETTO COVE COURT				M M	ĺ /	28	/ Y	2022	Y				
	City	State	Zip Code		Transa	actio	n ID : P	R25753	37166704	13				
	BLUFFTON	SC	29910-9580	/	Amount	of E	ach Re	ceipt th	is Perioc	1				
	FEC ID number of contributing federal political committee.	С			346.14									
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) PMktg		Memo Item									
	Receipt For:		Year-to-Date ▼											
	Primary General	33 - 3		P/R Deduction (\$115.38 Bi-Weekly)										
	Other (specify) v		, 2511.19											
C.	Full Name of Individual (Last, First, Middle Initia PIETROSIMONE, RALPH A, , ,	al) or Full O	rganization Name		Date of	Rec	eipt							
	Mailing Address 44 ROSES FARM ROAD				M M	1	DDD	/ Y	YYY	Y				
	City	State	Zip Code	-	11 Trans	ootia	28	002575	2022 37386704	42				
	EAST HAVEN	CT	06512-4665						is Perioc	-				
	FEC ID number of contributing													
	federal political committee.	С							28	.56				
	Name of Employer (for Individual)	Оссі	upation (for Individual)		Me	emo	Item							
	United HealthCare Services Inc	Sr N	twk Prgm Mgr											
	Receipt For:	Aggregate	Year-to-Date V						-1.1.3					
	Other (specify)	_ · · ·	228.48	P	/R Deal	ICTIO	n (\$9.52	BI-Wee	экіу)					
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s	UBTOTAL of Receipts This Page (optional)			.					490.	.08				
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Т	OTAL This Period (last page this line number or	nly)	••••••	•	_									

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (JnitedHealth Group P/	AC)									
Full Name of Individual (Last, First, Middle CUNNINGHAM, BRIAN, , ,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 1708 ROLLING HILLS RD			11 / D D / Y Y Y Y Y 2022									
City CHARLESTON	State WV	Zip Code 25314-2216	Transaction ID : PR2575375967043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		115.38									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Dir Tech Proj-Prgm Mgmt	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. CIAVARELLA, TRACY, , ,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 20 LORRAINE DRIVE			11 28 2022									
City BEACON FALLS	State CT	Zip Code 06403-1256	Transaction ID : PR2575377967043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		42.12									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Compli	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)									
Full Name of Individual (Last, First, Middle C. FENLON, STEVEN, , ,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 4925 DREW AVE S	04-4-	7. 0.1	11 D D / Y Y Y Y Y 128 2022									
City MINNEAPOLIS	State MN	Zip Code 55410-1743	Transaction ID : PR2575392067043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		27.48									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) uty Gen Counsel	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 219.84	P/R Deduction (\$9.16 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional).			184.98									
TOTAL This Period (last page this line number	er only)											

SCHEDULE A (FEC Form 3X) __ _ _ _ _ _ _ _

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1									
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorporat	ed PAC (l	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle Ir A. BRATTEBO, CRAIG, , ,	nitial) or Full C	rganization Name	Date of Receipt									
Mailing Address 10202 HARMONY CIRCLE			M M / D D / Y Y Y Y 11 28 2022									
City	State	Zip Code	Transaction ID : PR2575397267043									
EDEN PRAIRIE	MN	55347-5019	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		576.90									
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item									
Optum Services, Inc	Dep	outy Gen Counsel										
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify)		4615.20	P/R Deduction (\$192.30 Bi-Weekly)									
			1									
Full Name of Individual (Last, First, Middle Ir B. FELLER, WILLIAM, , ,	nitial) or Full C	rganization Name	Date of Receipt									
Mailing Address 3715 HUNTINGTON AVE			11 28 2022									
City	State	Zip Code	Transaction ID : PR2575400367043									
ST LOUIS PARK	MN	55416-4917	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		115.38									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Technology	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼	7									
Primary General Other (specify) ▼		, 923.04	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middle Ir C. UNDERWOOD, JEFFREY, , ,	l nitial) or Full C	rganization Name	Date of Receipt									
Mailing Address 14625 SW SUNRISE LN			11 28 2022									
City	State	Zip Code	Transaction ID : PR2575403367043									
TIGARD	OR	97224-1209	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		230.76									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1846.08	P/R Deduction (\$76.92 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)	<u> </u>		923.04									
TOTAL This Period (last page this line number												

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		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorporat	ed PAC (l	JnitedHealth Group P	4C)									
Full Name of Individual (Last, First, Middle Ir ANDERSON, BRADLEY, , ,	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 4613 W 56TH ST			11 28 2022									
City EDINA	State MN	Zip Code 55424-1558	Transaction ID : PR2575405267043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		115.38									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Strategy	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middle Ir B. VENKATESAN, CHANDRAMOULE			Date of Receipt									
Mailing Address 17698 62ND COURT NORTI		1	11 / D D / Y Y Y Y Y 28 2022									
	State MN	Zip Code	Transaction ID : PR2575410167043									
		55311-4619	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		576.90									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Seg CIO	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify) ▼		4615.20	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle Ir C. MILLER, ALLISON, , ,	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 11671 45TH PLACE NE			11 / D D / Y Y Y Y 28 2022									
City SAINT MICHAEL	State MN	Zip Code 55376-4536	Transaction ID : PR2575418167043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		288.45									
Name of Employer (for Individual) Optum Services, Inc	Occi VP I	upation (for Individual) T	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2307.60	P/R Deduction (\$96.15 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			980.73									
TOTAL This Period (last page this line number	r only)											

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				or each category of the Detailed Summary Page	×	11a 13] 11 14		11c		12		17	
	y information copied from such Reports and Stater for commercial purposes, other than using the nar					or the		pos	se of s	soliciti		contrib	utions		
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I	PAC (l	Uni	tedHealth Group PA	C)										
Α.	Full Name of Individual (Last, First, Middle Initial) GOTHARD, CAROL, , ,	or Full O	rgar	nization Name		Date of	Re	ecei	ipt						
	Mailing Address 16492 BROOKLANE BOULEVAR					11 28 2022 Transaction ID : PR2575419167043									
	5	State MI		Zip Code 48168-8417	A	Trans									
	FEC ID number of contributing federal political committee.	C				114.54									
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Dir F	•	ion (for Individual)	Memo Item										
	Receipt For: An Primary General Other (specify) ▼	ggregate	Yea	r-to-Date ▼ 916.32	P/R Deduction (\$38.18 Bi-Weekly)										
в.	Full Name of Individual (Last, First, Middle Initial) ARMSTRONG, LORI, , ,	or Full O	rgar	nization Name		Date of	Re	ecei	ipt						
	Mailing Address 808 CAREN DRIVE					™ M 11	/		28	1		y y 2022	Y		
	City ELDERSBURG	State MD		Zip Code 21784-8569		Trans mount		-			-				
	FEC ID number of contributing federal political committee.	0				_		-				45	5.00		
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Acct Mgmt		Memo Item									
	Receipt For: At Primary General Other (specify) ▼	ggregate	Yea	r-to-Date ▼ 360.00	P/	P/R Deduction (\$15.00 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial) OHARA, KARIN, , ,	or Full O	rgar	nization Name		Date of	Re	ecei	ipt						
	Mailing Address 1431 HENRY COURT			I		^M 11		L	D D D 28	'		2022			
	City CHANHASSEN	State MN		Zip Code 55317-2200	A	Trans		-			-	87670 Perio	-		
	FEC ID number of contributing federal political committee.							,		.,		288	8.45		
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP A	•	ion (for Individual) ng		M	emo	o Ite	em						
	Receipt For: And the second	ggregate	Yea	r-to-Date ▼ 2307.60	P/R Deduction (\$96.15 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)				[Ì				447	.99	٦	
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	y information copied from such Reports and State for commercial purposes, other than using the na													
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Uni	tedHealth Group PA	C)									
 A.	Full Name of Individual (Last, First, Middle Initial) CASTILLO, EFREM, , ,) or Full O	rgar	nization Name	[Date of Receipt								
	Mailing Address 630 ELIZABETH ROAD					м м 11	/	Γ	28	/	Y	y y 2022	Y	
	City	State		Zip Code		Trans	acti	ion	ID : I	PR2	257544	413670	43	
	SAN ANTONIO	ТХ		78209-6135	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			403.83									
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) e Initiv		Memo Item								
	Bossint For:	Agaregate	Yea	r-to-Date ▼										
	Primary General Other (specify) ▼	3230.64	P	'R Dedi	uctio	on	(\$134	.61	Bi-We	eekly)				
в.	Full Name of Individual (Last, First, Middle Initial) MURLEY, MARY, , ,	nization Name		Date of	Re	cei	ipt							
	Mailing Address 2775 COUNTRYSIDE DRIVE WEST						1	[28	1	Y	y y 2022	Y	
	City	State		Zip Code								436670		
	ORONO	MN		55356-9675	/	Amount	of	Ea	ch Re	ecei	pt this	s Perio	d	
	FEC ID number of contributing federal political committee.							,			- j -	576	6.90	
	Name of Employer (for Individual) United HealthCare Services Inc			ion (for Individual) gment CEO		Memo Item								
	Receipt For: // Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial) SPILKER, TIMOTHY, , ,) or Full O	rgar	nization Name	[Date of	Re	cei	ipt					
	Mailing Address 32 FITCH LANE	1				M M 11	1	Ľ	28	1	Y	y y 2022	Y	
	City	State CT		Zip Code								463670		
	NEW CANAAN			06840-5051	_ /	Amount	of	Ea	ch Re	ecei	pt this	s Perio	d	
	FEC ID number of contributing federal political committee.	С				_		,		_	9	576	6.90	
	Name of Employer (for Individual)	Occi	upat	ion (for Individual)		Me	emo	o Ite	em					
	United HealthCare Services Inc	Bus	Seg	ment CEO										
	Receipt For: , Primary General Other (specify)	Aggregate Year-to-Date ▼ 4615.20						P/R Deduction (\$192.30 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)											1557	.63	7
	OTAL This Period (last page this line number onl							,			, ,			Ī

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

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TEWIZED RECEIFTS		Detailed Summary Page	×	11a		11b		11c	12			
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Any information copied from such Reports or for commercial purposes, other than usi												
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (I	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Mide FLOCCO, LOUIS, , ,	dle Initial) or Full C	rganization Name		Date of Receipt								
Mailing Address 521 SAN BERNARDING	DAVENUE			11 28 2022								
City NEWPORT BEACH	State CA	Zip Code 92663-4812	A						44866704 his Period			
FEC ID number of contributing federal political committee.	С		300.00									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Underwriting		Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2400.00	P/	R Dedi	uctio	on (\$´	100.	00 Bi-W	Veekly)			
Full Name of Individual (Last, First, Mide B. RUNICE, PAUL, , ,	rganization Name		ate of	Re	eceipt							
Mailing Address 4622 BRUCE AVENUE				™ _ M 11	/	2	28	/ Y	2022	Y		
City EDINA	State MN	Zip Code 55424-1123							45156704 nis Period			
FEC ID number of contributing federal political committee.	С	C						-9-	553.	50		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Treasury		Me	emo	Item	I					
Receipt For: Primary General Other (specify) ▼	Aggregate	Aggregate Year-to-Date ▼ 4428.00					P/R Deduction (\$184.50 Bi-Weekly)					
Full Name of Individual (Last, First, Mide PEGG, JACK, , ,	dle Initial) or Full C	rganization Name		ate of	Re	eceipt						
Mailing Address 4917 KAMA LANE NE				^M 11	1	2	28	/ Y	2022			
	State MN	Zip Code 55301-3536	A						45606704 his Period			
FEC ID number of contributing federal political committee.	С			_		<u>y</u>		,	42.	12		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Underwriting		Me	emo) Item	ı					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)									
SUBTOTAL of Receipts This Page (option	nal)					,		,	895.	62		
TOTAL This Period (last page this line nu	mber only)		. [-9		-				

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	ED RECEIPTS		for each category of the Detailed Summary Page		1 1a		11b	11c	12				
	mation copied from such Reports and Stat nmercial purposes, other than using the n												
	OF COMMITTEE (In Full) edHealth Group Incorporated	PAC (U	InitedHealth Group PA	AC)									
	ame of Individual (Last, First, Middle Initia TT, CHRISTOPHER, , ,) or Full Or	ganization Name		Date of	Re	ceipt						
Mailin	g Address 631 GOODRICH AVE				11 28 2022								
City SAIN	T PAUL	State MN	Zip Code 55105-3522		Transaction ID : PR2575464967043 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.								-	57.	69			
			pation (for Individual) viation Corp Pilots		Me	emo	Item						
	ot For: Primary General Other (specify) ▼	Aggregate		P/R Dedu	uctio	on (\$19.	23 Bi-We	ekly)					
	ame of Individual (Last, First, Middle Initia NNEY, ASHLEY, , ,) or Full Or	ganization Name		Date of	Re	ceipt						
	City						D D D 28	/ Y	y y 2022	Y			
City GRAN	IBY	State CT	Zip Code 06035-1922						6846704	3			
FEC I	FEC ID number of contributing federal political committee.					42.12							
	of Employer (for Individual) Services, Inc		pation (for Individual) irector Technology	Memo Item									
	ot For: Primary General Other (specify) ▼	Aggregate	/ear-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)									
	ame of Individual (Last, First, Middle Initia DUSKE, NANETTE, , ,) or Full Or	ganization Name		Date of	Re	ceipt						
	G Address 4276 NICOLET DRIVE				M M 11	1	D D D 28		2022				
City GRE	EN BAY	State WI	Zip Code 54311-9798						17026704 is Period	3			
	D number of contributing I political committee.	С			<u> </u>		y .		115.	38			
United	of Employer (for Individual) I HealthCare Services Inc	Occu VP C	pation (for Individual) ompli		Memo Item								
	ot For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 923.04					P/R Deduction (\$38.46 Bi-Weekly)						
SUBTO	TAL of Receipts This Page (optional)		•••••	•			,	,	215.	19			
TOTAL	This Period (last page this line number on	ly)	•	•				- .					

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12									
Any information copied from such Reports and or for commercial purposes, other than using th												
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ted PAC (I	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle In HENSEL, KRISTA, , , Mailing Address 2211 HOMEWOOD DRIVE	nitial) or Full C	organization Name	Date of Receipt									
City	State	Zip Code	11 28 2022 Transaction ID : PR2575482667043									
ANCHORAGE	KY	40223-1326	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		576.90									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) I Plan CEO	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle II B. BARTHEL, THOMAS, , ,	nitial) or Full C	organization Name	Date of Receipt									
Mailing Address 9713 HEMLOCK LANE NOR			11 28 2022									
City MAPLE GROVE	State MN	Zip Code 55369-3665	Transaction ID : PR2575484367043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		42.12									
Name of Employer (for Individual) Optum Services, Inc												
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)									
Full Name of Individual (Last, First, Middle II C. MACLAUCHLAN, DANIEL, , ,	nitial) or Full C	organization Name	Date of Receipt									
Mailing Address 1833 HILLTOP RD			11 / D D / Y Y Y Y Y 2022									
City JENKINTOWN	State PA	Zip Code 19046-1538	Transaction ID : PR2575492767043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		42.12									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual))ir Capability	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			661.14									
TOTAL This Period (last page this line numbe	r only)	·····										

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		Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorporat	ted PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle Ir VESLEDAHL, MATTHEW, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 15598 MICHELE LANE			M M / D D / Y Y Y Y 11 28 2022							
City EDEN PRAIRIE	State MN	Zip Code 55346-2548	Transaction ID : PR2575499267043 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		576.90							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Network	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle Ir B. DELREAL, MAGDALENA, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 122 WILLOW CREEK LANE			M M / D D / Y Y Y Y Y 11 28 2022							
City WILLOW SPRINGS	State IL	Zip Code 60480-1274	Transaction ID : PR2575507767043 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	42.12									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Reg Sales Dir	Memo Item							
Receipt For:	Aggregate	Year-to-Date 🔻								
Primary General Other (specify) ▼		336.96	P/R Deduction (\$14.04 Bi-Weekly)							
Full Name of Individual (Last, First, Middle Ir c. MUNSON, RICHARD, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 4707 HAZELTINE LANE			11 / D D / Y Y Y Y Y 28 2022							
City EAGAN	State MN	Zip Code 55123-2172	Transaction ID : PR2575512467043 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		288.45							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Compli	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2211.45	P/R Deduction (\$96.15 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			907.47							
TOTAL This Period (last page this line number	r only)									

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
or for commercial purposes, other than usin			erson for the purpose of soliciting contributions to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpc	orated PAC (l	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Midd A. COHEN, SANFORD, , ,	lle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 28 CRESCENT LANE	Otata	Zin Oode	11 28 2022									
City LEVITTOWN	State NY	Zip Code 11756-2506	Transaction ID : PR2575526167043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		96.90									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P CMO	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 935.20	P/R Deduction (\$32.30 Bi-Weekly)									
Full Name of Individual (Last, First, Midd B. HUNTER, ROBERT, , ,	lle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 5420 COUNTRYSIDE R			11 / D D / Y Y Y Y Y 2022									
City EDINA	State MN	Zip Code 55436-2524	Transaction ID : PR2575528367043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	s a l											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Prd	P/R Deduction (\$192.30 Bi-Weekly)									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20										
Full Name of Individual (Last, First, Midd C. HERNANDEZ, MAYRENE, , ,		rganization Name	Date of Receipt									
Mailing Address 850 SW 189TH AVENU	E		11 / D D / Y Y Y Y Y 28 2022									
City PEMBROKE PINES	State FL	Zip Code 33029-6047	Transaction ID : PR2575529267043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ied Dir	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)									
SUBTOTAL of Receipts This Page (option	al)		789.18									
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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	≭ 11a 11b 11c 12							
	y information copied from such Reports and Sta for commercial purposes, other than using the r										
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	UnitedHealth Group PA	C)							
Α.	Full Name of Individual (Last, First, Middle Initia HOLOVNIA, KRISTEN, , ,	l) or Full O	Organization Name	Date of Receipt							
	Mailing Address 4610 LAKEVIEW DRIVE			11 28 / Y Y Y Y Y 2022							
	City EDINA	State MN	Zip Code 55424-1518	Transaction ID : PR2575533067043 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		576.90							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Deputy Gen Counsel	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)							
в.	Full Name of Individual (Last, First, Middle Initia HILL, JANE, , ,	l) or Full O	Organization Name	Date of Receipt							
	Mailing Address 34301 299TH PLACE			11 28 2022							
	City	State	Zip Code	Transaction ID : PR2575533167043							
	AITKIN	MN	56431-5914	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	115.38									
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Compli	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)							
С.	Full Name of Individual (Last, First, Middle Initia MULLANEY, SUSAN, , ,	ll) or Full O	Organization Name	Date of Receipt							
	Mailing Address 169 HUNNEWELL STREET			M M / D D / Y Y Y Y 11 28 2022							
	City NEEDHAM	State MA	Zip Code 02494-1421	Transaction ID : PR2575535167043 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		115.38							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)		····· •	807.66							
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports and Sta or for commercial purposes, other than using the			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle Initi A. HAMLIN, THOMAS, , ,	al) or Full C	organization Name	Date of Receipt								
Mailing Address 2800 NEWMAN			11 / D D / Y Y Y Y Y 2022								
City HOUSTON	State TX	Zip Code 77098-1408	Transaction ID : PR2575536267043								
FEC ID number of contributing	_	11090-1400	Amount of Each Receipt this Period								
federal political committee.	С		115.38								
Name of Employer (for Individual)		upation (for Individual)	Memo Item								
Optum Services, Inc Receipt For:		Behvrl Med Dir	_								
Primary General	Aggregate	Year-to-Date V	P/R Deduction (\$38.46 Bi-Weekly)								
Other (specify) ▼		923.04	P/R Deduction (\$36.46 Di-Weekiy)								
Full Name of Individual (Last, First, Middle Initi B. SULLIVAN, EILEEN, , ,	al) or Full C	organization Name	Date of Receipt								
Mailing Address 9675 WATERWAY PASSAGE	Mailing Address 9675 WATERWAY PASSAGE DRIVE										
City	State	Zip Code	Transaction ID : PR2575537267043								
WINTER GARDEN	FL	34787-4957	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	42.12										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Assc Gen Counsel	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)								
Full Name of Individual (Last, First, Middle Initi C. HAUF, NADINE, , ,	al) or Full C	organization Name	Date of Receipt								
Mailing Address 1008 WIMBERLY COURT			M M / D D / Y Y Y Y 11 28 2022								
City	State	Zip Code	Transaction ID : PR2575538867043								
ALLEN	TX	75013-1195	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		30.00								
Name of Employer (for Individual)		upation (for Individual)	Memo Item								
United HealthCare Services Inc	VP (Gen Mgmt									
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify)		240.00	P/R Deduction (\$10.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			187.50								
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ITEMIZED RECEIPTS	Use separate schedule(s)	(cł	(check only one)											
11			for each category of the Detailed Summary Page		X 11a		11b	11c	12	<u> </u>				
	y information copied from such Reports and S													
or	for commercial purposes, other than using the	e name and a	ddress of any political committee	e to s	solicit coi	ntrib	outions	from such	n committ	ee.				
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)										
Α.	Full Name of Individual (Last, First, Middle Ini	tial) or Full O	l) or Full Organization Name				Date of Receipt							
	Mailing Address 11700 PRESTON RD #660				M M 11	/	28) / Y	Y Y 2022	Y				
	City DALLAS	State TX	Zip Code 75230-2739	_					53926704 is Period	3				
	FEC ID number of contributing federal political committee.	С			45.00									
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Clin Ops		M	emo) Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 360.00	1	P/R Ded	lucti	on (\$15	.00 Bi-We	ekly)					
в.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name SUN, TONY, , ,					f Re	eceipt							
	Mailing Address 8408 ENSLEY PLACE						28) / Y	2022	Y				
	City LEAWOOD	State KS	Zip Code 66206-1402						54026704 is Period	3				
	FEC ID number of contributing federal political committee.	С					-		115.:	38				
	Name of Employer (for Individual) United HealthCare Services Inc	upation (for Individual) Med Dir/CMO	Memo Item											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Ini WENTZIEN, MICHAEL, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt							
	Mailing Address 6350 SUMMIT CIRCLE	04-4-	7. 0.1		11 		28		2022					
	City CHANHASSEN	State MN	Zip Code 55317-9138	_					54086704 is Period	3				
	FEC ID number of contributing federal political committee.	С			Ľ.		y .	, ,	42.	12				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Unit CEO		М	emo	o Item							
	Receipt For: Primary General Other (specify)	Aggregate	1	P/R Deduction (\$14.04 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			•			, .	. ,	202.	50				
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ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12									
			13 14 15 16 17									
or for commercial purposes, other than using t			erson for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	4C)									
Full Name of Individual (Last, First, Middle A. STEINBRECHER, HOLLY, , ,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 1800 N FIELD ST APT 421	1		11 / D D / Y Y Y Y 2022									
City	State TX	Zip Code	Transaction ID : PR2575544567043									
DALLAS		75202-2782	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		576.90									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Bus Dev	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼	-									
Primary General Other (specify) ▼		4615.20	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. BALCK, AMY, , ,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address N3681 VINE RD			M M / D D / Y Y Y Y 11 28 2022									
City FREEDOM	State WI	Zip Code 54913-6928	Transaction ID : PR2575548467043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	ů l											
Name of Employer (for Individual) United HealthCare Services Inc												
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P/R Deduction (\$14.00 Bi-Weekly)									
Full Name of Individual (Last, First, Middle C. MILLER, MAXIMILLIAN, , ,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 5328 CHOWEN AVENUE S	6		M M / D D / Y Y Y Y 11 28 2022									
City MINNEAPOLIS	State MN	Zip Code 55410-2122	Transaction ID : PR2575579567043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		115.38									
Name of Employer (for Individual) United HealthCare Services Inc	Occ M A	upation (for Individual) VP	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional).			734.28									
TOTAL This Period (last page this line number	er only)	······										

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			for each category of the Detailed Summary Page	X 1 ¹		\vdash	11b	11c		12 16 [17		
	ny information copied from such Reports and Stat for commercial purposes, other than using the na			rson for	the p	purp	ose of :	soliciting	g cont	tributio	ns		
	NAME OF COMMITTEE (In Full)												
\rangle	UnitedHealth Group Incorporated	PAC (l	UnitedHealth Group PA	C)									
Α.	Full Name of Individual (Last, First, Middle Initial WINSOR, ELIZABETH, , ,) or Full O	organization Name	Dat	te of	Red	ceipt						
	Mailing Address 57 WILDERS PASS			M M / D D / Y Y Y Y 11 28 2022									
	City CANTON	State CT	Zip Code 06019-2259		Transaction ID : PR2575582867043 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С					y		Ę	576.90			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) gn CEO		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R	Dedu	uctio	ın (\$192	.30 Bi-V	Veekly	1)			
Р	Full Name of Individual (Last, First, Middle Initial LYON, JAMIE, , ,) or Full O	Organization Name	Det		Dec							
в.	Mailing Address 2069 CIRCLE DRIVE			M	te of 11	rec	28	/ Y	202	Y Y 2	1		
	City	State	Zip Code	Tr	ansa	actio	on ID : F	PR2575	58596	7043			
	KRONENWETTER	WI	54455-9062	Am	ount	of E	Each Re	eceipt th	nis Pe	riod			
	FEC ID number of contributing federal political committee.		42					42.12					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 336.96	P/R I	Dedu	ıctio	n (\$14.0)4 Bi-We	eekly)				
с.	Full Name of Individual (Last, First, Middle Initial FINCH, ANNE, , ,) or Full O	Organization Name	Dat	te of	Red	ceipt						
	Mailing Address 208 STATION CIR NO	1		4 🗆	11 ^M	/	D D D 28	L	202				
	City HUDSON	State WI	Zip Code 54016-9555				on ID : I Each Re						
	FEC ID number of contributing federal political committee.	С			ount					115.38			
	Name of Employer (for Individual) Optum Services, Inc	Occu VP I	upation (for Individual) T		Me	emo	ltem						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 923.04	P/R	Dedu	uctio	on (\$38.4	46 Bi-W	eekly)	I			
s	UBTOTAL of Receipts This Page (optional)								7	734.40			
т	OTAL This Period (last page this line number on	ly)	····· •	Ē			,			-			

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
			13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorp	orated PAC (l	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Mid ASOLLER, BRIAN, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 1120 S 2ND STREET			M M / D D / Y Y Y Y 11 28 2022								
City MINNEAPOLIS	State MN	Zip Code 55415-1375	Transaction ID : PR2575586767043 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		576.90								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Seg CIO	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Mid B. GISCH, SHAWNA, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 320 PRESERVE COU											
City CHANHASSEN	State	Zip Code 55317-8717	Transaction ID : PR2575592167043 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		576.90								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Unit CEO	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Mic MILLER, MICHAEL, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 1 CANAL STREET	State	Zip Code	11 28 2022								
City BOSTON	MA	02114-2019	Transaction ID : PR2575595667043 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		576.90								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Business Development Exe	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optic	nal)		1730.70								
TOTAL This Period (last page this line n	umber only)										

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			Use separate schedule(s)	(check only one)							
			for each category of the Detailed Summary Page	× 11a	11b 11c	12	17				
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	l ay not be sold or used by any p ddress of any political committer	rson for the pur	pose of soliciting	contributi	ons				
$\overline{\}$	NAME OF COMMITTEE (In Full)										
	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group PA	C)							
 A.	Full Name of Individual (Last, First, Middle Initi IVERSON, LISA, , ,	al) or Full O	rganization Name	Date of Re	eceipt						
	Mailing Address 1330 EDGCUMBE RD			11 28 2022							
	City	State	Zip Code	Transact	ion ID : PR2575	603267043	5				
	SAINT PAUL	MN	55116-1780	Amount of	Each Receipt th	is Period					
	FEC ID number of contributing federal political committee.	e e e e e e e e e e e e e e e e e e e				576.9	0				
	Name of Employer (for Individual)	Осси	upation (for Individual)	Memo	o Item						
	United HealthCare Services Inc	VP \$	Strat Initiv								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		4615.20	P/R Deducti	ion (\$192.30 Bi-W	/eekly)					
			-1912 - 1912 - 1912 - 1912 - 1912 - 1912 - 1912 - 1912 - 1912 - 1912 - 1912 - 1912 - 1912 - 1912 - 1912 - 1912								
_	Full Name of Individual (Last, First, Middle Initi	Date of Re									
в.	GOODMAN, BENJAMIN, , ,	Mailing Address 13828 EVERGREEN COURT					1				
	Maining Address 13626 EVERGREEN COURT			11 /	28 / Y	2022	Ŷ				
	City	State	Zip Code	Transact	ion ID : PR25756	603867043					
	APPLE VALLEY	MN	55124-9257	Amount of	Each Receipt th	is Period					
	FEC ID number of contributing federal political committee.	С				576.9	0				
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CFO	Memo Item							
	Receipt For:		Year-to-Date ▼	-							
	Primary General Other (specify) ▼		4615.20	P/R Deduction (\$192.30 Bi-Weekly)							
C.	Full Name of Individual (Last, First, Middle Initi KING, SARAH, , ,	al) or Full O	rganization Name	Date of Re	eceipt						
	Mailing Address 23 GARDEN CITY ROAD			11 /	28 / Y	y y 2022	Y				
	City	State	Zip Code	Transact	tion ID : PR2575	612867043	5				
	DARIEN	СТ	06820-5343	Amount of	Each Receipt th	is Period					
	FEC ID number of contributing federal political committee.	С			, ,	576.9	0				
	Name of Employer (for Individual)	Оссі	upation (for Individual)	Memo	o Item						
	Optum Services, Inc	Bus	Segment CEO								
	Receipt For: Primary General	Aggregate	Year-to-Date V								
	Other (specify)		4615.20	P/R Deducti	ion (\$192.30 Bi-V	Veekiy)					
	UBTOTAL of Receipts This Page (optional)				<u>y</u> <u>y</u> <u>y</u>	1730.7	0				

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	TEMIZED RECEIPTS		for each category of the Detailed Summary Page				11b	11c	12			
	r information copied from such Reports and Stat or commercial purposes, other than using the n											
1	NAME OF COMMITTEE (In Full)											
	UnitedHealth Group Incorporated	PAC (U	nitedHealth Group PA	AC)								
	Full Name of Individual (Last, First, Middle Initial WAULTERS, SCOTT, , ,) or Full Or	ganization Name		Date of	Re	ceipt					
ſ	Mailing Address 38 BRISTOL ROAD				M M 11	/	28	/ Y	y 2022	Y		
	City MANALAPAN	State NJ	Zip Code 07726-4160						5 2216704 is Period	3		
	FEC ID number of contributing rederal political committee.	С							576.	90		
	Name of Employer (for Individual) Jnited HealthCare Services Inc		pation (for Individual) Plan CEO		Me	emo	Item					
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)								
	Full Name of Individual (Last, First, Middle Initial THOMPSON, BRIAN, , ,) or Full Org	ganization Name		Date of	Re	ceipt					
-	Mailing Address 17829 63RD AVE N	State	Zip Code		M M 11	/	28	/ Y	y y 2022	Y		
	MAPLE GROVE	MN	55311-4650						3466704 is Period	3		
	FEC ID number of contributing federal political committee.				576.90							
- I L	Name of Employer (for Individual) Jnited HealthCare Services Inc		pation (for Individual) UHC CEO		Me	emo	Item					
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)								
	Full Name of Individual (Last, First, Middle Initial WILSON, STEPHEN, , ,) or Full Org	ganization Name		Date of	Re	ceipt					
-	Mailing Address 2420 DURHAM MANOR DRIVE				11 28 2022							
	City FRANKLIN	State TN	Zip Code 37064-5266						53616704 is Period	3		
	FEC ID number of contributing rederal political committee.	С			<u> </u>		y .		576.	00		
I	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Plan CEO		Me	emc	tem					
I	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 4608.00					on (\$19:	2.00 Bi-W	/eekly)			
รเ	JBTOTAL of Receipts This Page (optional)			•			, .		1729.8	30		
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or for commercial purposes, other than usin			erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middl CLARK, TERRENCE, , ,	le Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 8 COOPER AVENUE	01-1-	7. 0.4	11 / 28 / Y Y Y Y 2022								
City EDINA	State MN	Zip Code 55436-1315	Transaction ID : PR2575636967043 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		576.90								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P, Chief Cust Mktg Officer	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Midd CABANILLAS, MARIA, , ,	le Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 2411 WORDSWORTH S			11 / D D / Y Y Y Y 128 2022								
City HOUSTON	State TX	Zip Code 77030-1833	Transaction ID : PR2575637367043 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		576.90								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middl C. COLLINS, NEIL, , ,	le Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 8465 MISSION HILLS LA			11 28 / Y Y Y Y Y 11 28								
City CHANHASSEN	State MN	Zip Code 55317-7712	Transaction ID : PR2575637667043 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 336.00	P/R Deduction (\$14.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optiona	al)		1195.80								
TOTAL This Period (last page this line nun	nber only)	•									

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			for each category of the Detailed Summary Page	X 11a 11b 11c 12							
	y information copied from such Reports and Stat for commercial purposes, other than using the n										
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	InitedHealth Group PA	AC)							
	Full Name of Individual (Last, First, Middle Initia										
۹.	HERMAN, CRAIG, , , Mailing Address 9609 WYOMING CIRCLE			Date of Receipt							
	City	State	Zip Code	11 28 2022 Transaction ID : PR2575650267043							
	BLOOMINGTON	MN	55438-1628	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		576.90							
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) Advisory Svc	Memo Item							
	Receipt For: Primary General Other (specify) ▼	P/R Deduction (\$192.30 Bi-Weekly)									
	Full Name of Individual (Last, First, Middle Initia HAYHURST, JENNY, , ,	l) or Full O	ganization Name	Date of Receipt							
	Mailing Address 23A MOUNT HYGEIA ROAD	11 28 2022									
	City	State	Zip Code	Transaction ID : PR2575651867043							
	FOSTER	RI	02825-1434	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	ů – Elektrik – Elektri									
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Ntwk Contrctng	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P/R Deduction (\$14.00 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Initia KANE, HEATHER, , ,	l) or Full Oi	ganization Name	Date of Receipt							
	Mailing Address 7624 N MOUNTAIN VIEW PASS	S		11 28 2022							
		State AZ	Zip Code	Transaction ID : PR2575657467043							
	PARADISE VALLEY	AZ	85253-2844	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		576.90							
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual)	Memo Item							
	Dessint For:		Plan CEO Year-to-Date ▼								
	Other (specify)		4615.20	P/R Deduction (\$192.30 Bi-Weekly)							
S	UBTOTAL of Receipts This Page (optional)		••••••	1195.80							

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	-	Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12					
Any information copied from such Reports an or for commercial purposes, other than using			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)								
> UnitedHealth Group Incorpora	ated PAC (I	UnitedHealth Group PA	AC)					
Full Name of Individual (Last, First, Middle A. WARSHAW, ROBERT, , ,	Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 94 CARLSON DRIVE			11 28 2022					
City PORTLAND	State CT	Zip Code 06480-1699	Transaction ID : PR2575665567043 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		42.12					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ops	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. EVERETT, RICARDO, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 10507 WALPOLE LANE			11 / D D / Y Y Y Y 28 2022					
City AUSTIN	State TX	Zip Code 78739-1554	Transaction ID : PR2575667667043 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	FEC ID number of contributing							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Ntwk Prgms	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼						
Other (specify) ▼		336.96	P/R Deduction (\$14.04 Bi-Weekly)					
Full Name of Individual (Last, First, Middle ALLEN, CARL, , ,	Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 8675 AZURE SKY DRIVE		1	11 / D D / Y Y Y Y 2022					
City LAS VEGAS	State NV	Zip Code 89129-2227	Transaction ID : PR2575669367043 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		117.00					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Dir/CMO	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 936.00	P/R Deduction (\$39.00 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			201.24					
TOTAL This Period (last page this line numb	per only)							

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		Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Report or for commercial purposes, other than	ts and Statements ma using the name and a	ay not be sold or used by any p ddress of any political committe	person for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incor	porated PAC (I	JnitedHealth Group P	AC)
Full Name of Individual (Last, First, M LEON, LINDA, , ,	liddle Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 19 ENSIGN LANE			M M / D D / Y Y Y Y 11 28 2022
City MASSAPEQUA	State NY	Zip Code 11758-7839	Transaction ID : PR2575671867043 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		576.90
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Reg VP of SIs	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, N B. BOGATYRENKO, VICTORIA		rganization Name	Date of Receipt
Mailing Address 98 FIVE MILE RIVER	11 / D D / Y Y Y Y 2022		
City DARIEN	State CT	Zip Code 06820-6234	Transaction ID : PR2575675467043 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		172.77
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1382.16	P/R Deduction (\$57.59 Bi-Weekly)
Full Name of Individual (Last, First, M C. MITCHELL, JILL, , ,	liddle Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 11499 ASHLEY COU	IRT		11 / D D / Y Y Y Y 28 2022
City INVER GROVE HEIGHTS	State MN	Zip Code 55077-5251	Transaction ID : PR2575678367043 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		115.38
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Pres Ntwk Mgmt	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)
SUBTOTAL of Receipts This Page (opt	ional)		865.05
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	ommercial purposes, other than using the n	ame and ad	doress of any political committee	to s	olicit con	ITTID	utions t	rom sucr	i committ	ee.	
	tedHealth Group Incorporated	I PAC (L	InitedHealth Group PA	C)							
	Name of Individual (Last, First, Middle Initia IONSON, KELLY, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt				
Mailir	ng Address 10982 SANCTUARY COVE CO	URT			M M 11	1	D D D 28) / Y	y y 2022	Y	
City LAS	VEGAS	State NV	Zip Code 89135-9126	_					8236704 is Period	3	
	ID number of contributing al political committee.	С			<u> </u>				138.4	15	
Healt	e of Employer (for Individual) h Plan of Nevada		pation (for Individual) Gen Mgmt		Me	∋mo	Item				
	ipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1107.60	F	P/R Dedu	uctio	on (\$46.	.15 Bi-We	ekly)		
	Name of Individual (Last, First, Middle Initia DMAN, CHRISTOPHER, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt				
	ng Address 6504 CHEROKEE TRAIL				M M 11	/	28	/ Y	2022	Y	
City EDIN	14	State MN	Zip Code 55439-1109	-			-		8386704	3	
FEC	ID number of contributing al political committee.	C							576.9	90	
	e of Employer (for Individual) n Services, Inc		upation (for Individual) 9 Gen Mgmt	_	Me	emo	Item				
Rece	ipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)							
	Name of Individual (Last, First, Middle Initia	l) or Full Or	ganization Name		Date of	Re	ceipt				
Mailir	ng Address 20 DEAN STREET				M M 11	/	28) / Y	2022	Y	
City ANN	APOLIS	State MD	Zip Code 21401-2716						58576704 is Period	3	
	ID number of contributing al political committee.	С			<u> </u>		y .	. ,	576.9	90	
Unite	e of Employer (for Individual) d HealthCare Services Inc		pation (for Individual) Plan CEO		Me	emo	tem				
	ipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 4615.20					P/R Deduction (\$192.30 Bi-Weekly)				
SUBTO	TAL of Receipts This Page (optional)		••••••				, .	. ,	1292.2	25	
TOTAL	This Period (last page this line number or	ly)	••••••	-							

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\setminus	NAME OF COMMITTEE (In Full)		ب: ما ا												
/	UnitedHealth Group Incorporated				ιC)										
۹.	Full Name of Individual (Last, First, Middle Initia KALBACHER, JEAN, , ,	al) or Full C	Organi	zation Name		Date of	Re	eceip	ot						
	Mailing Address 4952 EAST DARTMOUTH STR	EET				м м 11	/	D	28	/ Y	ү 2	ү 022	Y		
	City	State	4	Zip Code		Transaction ID : PR2575688367043									
-	MESA	AZ		85205-6458	_	Amount	of	Eac	h Re	ceipt tl	nis F	Period			
	FEC ID number of contributing rederal political committee.	С				265.38									
	Name of Employer (for Individual) Jnited HealthCare Services Inc		cupatic n Plan	n (for Individual) CEO		Memo Item									
	Receipt For:	Aggregate	Year-	to-Date 🔻											
	Primary General Other (specify) ▼		-	2123.04	P/R Deduction (\$88.46 Bi-Weekly)										
	Full Name of Individual (Last, First, Middle Initia FINE, BRETT, , ,	zation Name		Date of	Po										
	Mailing Address 707 STONINGTON ROAD							M M / D D / Y Y Y Y							
						11		L	28	L	20)22			
	City SILVER SPRING	State MD	4	Zip Code 20902-1549	\vdash	Transaction ID : PR2575692867 Amount of Each Receipt this Perio							3		
-	FEC ID number of contributing	_				Amount	U	⊏ac	л пе	ceipt ti	115 F	enod	_		
	ederal political committee.	C					_	7		-		576.9	90		
	Name of Employer (for Individual) Jnited HealthCare Services Inc			on (for Individual) o Strat		Me	emo) Ite	m						
		Aggregate	Year-	to-Date 🔻											
	Primary General Other (specify) ▼		,	4615.20	'	P/R Deduction (\$192.30 Bi-Weekly)									
	Full Name of Individual (Last, First, Middle Initia PROKOCKI, ELIZABETH, , ,	al) or Full C	Organiz	zation Name		Date of	Re	ceir	ot						
	Mailing Address 821 HIBISCUS CT					M M	/		28	/ Y)22	Y		
	City	State	4	Zip Code		Trans	act	ion	ID : F	PR2575	705	86704	3		
-	CORONA DEL MAR	CA		92625-1548	_	Amount	of	Eac	h Re	ceipt tl	nis F	Period			
	FEC ID number of contributing ederal political committee.	С						y		y		576.9	90		
	Name of Employer (for Individual)	Occ	upatic	n (for Individual)		Me	emc	b Ite	m						
	United HealthCare Services Inc	Reg	n CE	ָרָ רָּיָרָ רָיָרָ ר											
	Receipt For:	Aggregate	Year-	to-Date 🔻											
	Other (specify)	4615.20					P/R Deduction (\$192.30 Bi-Weekly)								

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)					
		for each category of the Detailed Summary Page	X 11a 11b 11c 12					
			13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Midd A	le Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 999 LABEAUX AVE NE			M M / D D / Y Y Y Y Y 11 28 2022					
City HANOVER	State MN	Zip Code 55341-9292	Transaction ID : PR2575707867043 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		115.38					
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) Fin	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)					
Full Name of Individual (Last, First, Midd VOLLRATH, MICHELLE, , ,	le Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 7647 MARKER ROAD	Mailing Address 7647 MARKER ROAD City State Zip Code							
SAN DIEGO	CA	92130-5616	Transaction ID : PR2575719867043 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) S VP CInt Mgmt	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1384.56	P/R Deduction (\$57.69 Bi-Weekly)					
Full Name of Individual (Last, First, Midd CAIN, STEVE, , ,	le Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 4 COUNTRYSIDE CT			11 28 2022					
City DANVILLE	State CA	Zip Code 94506-1126	Transaction ID : PR2575724367043 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		346.14					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2769.12	P/R Deduction (\$115.38 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional	al)		634.59					
TOTAL This Period (last page this line num	nber only)							

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	EIVIZED RECEIPTS		Detailed Summary Page	×	11a		11b	Ъ	11c	12		
					13		14		15	16	17	
	y information copied from such Reports and State for commercial purposes, other than using the na											
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	UnitedHealth Group	PAC)								
Α.	Full Name of Individual (Last, First, Middle Initial) MCKEE, PATRICK, , ,	or Full O	Organization Name		Date of	Re	ceip	ot				
	Mailing Address 6500 TRANQUIL RIVER LANE				11 28 2022							
	City	State	Zip Code		Trans	acti	ion	ID : P	R2575	7267670	43	
	WAUSAU	WI	54401-3302		Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С			57.69							
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		Me	emo	Ite	m				
	Receipt For:	Aggregate	Year-to-Date V		P/R Ded	uctic	on (9	\$19.2	3 Bi-\//4	eklv)		
	Other (specify) V		461.52		P/R Deduction (\$19.23 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Initial) HELLAND, ROBYN, , ,	or Full O	Organization Name		Date of Receipt							
	Mailing Address 9089 PARTRIDGE RD				11 28 2022							
	City	State	Zip Code		Trans	actio	on l	ID : P	R25757	73386704	13	
	MINNETRISTA	MN	55375-4513		Amount	of	Eac	ch Re	ceipt th	is Period	ł	
	FEC ID number of contributing federal political committee.	C					,		-9-	42	.12	
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Cust Service		Memo Item							
		Aggregate	Year-to-Date V									
	Primary General Other (specify) ▼		, 280.80		P/R Deduction (\$14.04 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initial) OLSON, KRISTIN, , ,	or Full O	Organization Name		Date of	Re	ceip	ot				
	Mailing Address 5901 TRACY AVENUE	1			M M 11	/	D	28	/ Y	y y 2022	Ŷ	
	City	State MN	Zip Code							7344670		
	EDINA		55436-2516		Amount	of	Eac	ch Re	ceipt th	is Period	1	
	FEC ID number of contributing federal political committee.	С					y		y	42	.12	
	Name of Employer (for Individual)		upation (for Individual)		Me	emo	lte	em				
	United HealthCare Services Inc	Sr D	Dir Empl Rel									
	Receipt For:	Aggregate	Year-to-Date ▼		י בים חו		//	M 4 4 0	4 0' 14'	د مادام م		
	Other (specify)			P/R Deduction (\$14.04 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)						9		,	141	.93	
Т	OTAL This Period (last page this line number only	y)					-		-			

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

FOR LINE NUMBER:

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			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 11;						
	v information copied from such Reports and State			erson for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	C)						
	Full Name of Individual (Last, First, Middle Initial) GROSKLAGS, JEFFREY, , ,	or Full O	rganization Name	Date of Receipt						
	Mailing Address 3233 TIMBERWOLF CIRCLE			M M / D D / Y Y Y Y 11 28 2022						
		State MN	Zip Code	Transaction ID : PR2575735767043						
-	PRIOR LAKE	IVIIN	55372-3272	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		288.45						
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Group CFO	Memo Item						
Ĩ	Receipt For:		Year-to-Date ▼	_						
	Primary General Other (specify) ▼	2307.60	P/R Deduction (\$96.15 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Initial) MURRAY, THOMAS, , ,	Date of Receipt								
	Mailing Address 10 CIRCLE WEST	11 / D D / Y Y Y Y 2022								
	City	State	Zip Code	Transaction ID : PR2575736567043						
-	EDINA	MN	55436-1313	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		576.90						
	Name of Employer (for Individual) Jnited HealthCare Services Inc		upation (for Individual) s Segment COO	P/R Deduction (\$192.30 Bi-Weekly)						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20							
	Full Name of Individual (Last, First, Middle Initial)	or Full O	rganization Name	Date of Receipt						
	Mailing Address 675 PLEASANT VIEW ROAD			M M / D D / Y Y Y Y 11 28 2022						
	City	State	Zip Code	Transaction ID : PR2575737467043						
-	CHANHASSEN	MN	55317-9509	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		115.38						
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Actuary	Memo Item						
Ì	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)						
รเ	JBTOTAL of Receipts This Page (optional)		····· •	980.73						
тс	OTAL This Period (last page this line number only	y)								

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12						
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)	ig the hame and a								
UnitedHealth Group Incorpo	orated PAC (l	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Midd CESARETTI, GINA, , ,	lle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 5020 CIRCLE DOWN			11 28 2022						
City GOLDEN VALLEY	State MN	Zip Code 55416-1304	Transaction ID : PR2575739067043 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		576.90						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Compli/Sr Dep Gen Cnsl	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Midd B. STRICKLAND, JULIE, , ,	lle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3207 SUNNYWOOD DR			11 28 / Y Y Y Y Y 11 28						
City	State	Zip Code	Transaction ID : PR2575740967043						
FULLERTON	CA	92835-1858	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		42.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P/R Deduction (\$14.00 Bi-Weekly)						
Full Name of Individual (Last, First, Midd C. PORTZ, THOMAS, , ,	lle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2119 SHERIDAN HILLS	1		11 / D D / Y Y Y Y Y 28 / 2022						
City WAYZATA	State MN	Zip Code 55391-2327	Transaction ID : PR2575744567043 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		300.00						
Name of Employer (for Individual) United HealthCare Services Inc	Occi VP F	upation (for Individual) Fin	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2400.00	P/R Deduction (\$100.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (option	al)		918.90						
TOTAL This Period (last page this line nur	mber only)	· · · · · · · · · · · · · · · · · · ·							

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	y information copied from such Reports and State for commercial purposes, other than using the nar			erson fo	r the p		ose		oliciting	contribu	tions			
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I	PAC (I	UnitedHealth Group PA	C)										
A.	Full Name of Individual (Last, First, Middle Initial) PROBST, PETER, , ,	or Full C	Drganization Name	Da	Date of Receipt									
	Mailing Address 1927 SAUNDERS AVENUE			11 28 2022										
	City SAINT PAUL	State MN	Zip Code 55116-2016							4466704				
		C	33110-2010	Ar	mount	of I	Each	ı Re	ceipt th	is Period 300.	_			
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Clin Affordability	1	Me	mo	Item	ı						
	Receipt For: A Primary General Other (specify) ▼ I	ggregate	Year-to-Date ▼ 2400.00	P/F	R Dedu	ictio	on (\$′	100.	00 Bi-W	/eekly)				
В.	Full Name of Individual (Last, First, Middle Initial) PINERSKI, JENNIFER, , ,	or Full C	Drganization Name	Da	ate of	Red	ceipt							
	Mailing Address 7501 HART LN				11 28 2022									
	City AUSTIN	State TX	Zip Code 78731-2237				-			7 5286704 is Period				
	FEC ID number of contributing federal political committee.	С					J		-	115.	38			
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) h Plan CEO		Me	mo	Item	ı						
	Receipt For: A Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 923.04	P/R	R Dedu	ctio	on (\$3	38.4	6 Bi-We	ekly)				
с.	Full Name of Individual (Last, First, Middle Initial) FULTON, RYAN, , ,	or Full C	Drganization Name	Da	ate of	Red	ceipt							
	Mailing Address 805 LANEWOOD LANE NORTH				^M 11	/		28	/ Y	ү ү 2022	Y			
	City PLYMOUTH	State MN	Zip Code 55447-4347							75696704				
		C			mount		Lach	i Re	, seipt th	is Period 576.	_			
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Clms		Me	emo	ltem	n						
	Receipt For: A Primary General Other (specify)	ggregate	Year-to-Date ▼ 4615.20	P/F	R Dedu	uctic	on (\$ ⁻	192.	30 Bi-W	/eekly)				
s	UBTOTAL of Receipts This Page (optional)		•	. [992.	28			
т	OTAL This Period (last page this line number only)	>											

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		Detailed Summary Page		×	11a		11b	11c		12						
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An or	y information copied from such Reports and S for commercial purposes, other than using the	tatements m name and a	ay r addr	not be sold or used by any pe ess of any political committee	person for the purpose of soliciting contributions be to solicit contributions from such committee.											
\backslash	NAME OF COMMITTEE (In Full)			ин и о – -												
	UnitedHealth Group Incorporate				(C)											
Α.	Full Name of Individual (Last, First, Middle Initer EKLO, BENJAMIN, , ,	tial) or Full C	Drga	nization Name	Date of Receipt											
	Mailing Address 3942 CAMPELLO CURVE					11 28 / Y Y Y Y 2022										
	City	State		Zip Code		Trans	acti	ion ID :	PR2575	7618	86704	3				
	CHASKA	MN		55318-4639	/	Amount	t of	Each F	Receipt tl	nis F	Period					
	FEC ID number of contributing federal political committee.	С								_	576.9	90				
	Name of Employer (for Individual)	Occ	cupa	tion (for Individual)		M	emc	Item								
	United HealthCare Services Inc	Bus	s Se	gment CFO												
	Receipt For: Primary General	Aggregate	e Yea	ar-to-Date 🔻												
	Other (specify) ▼		-	4615.20	P	/R Ded	uctio	on (\$19	2.30 Bi-V	Veek	kly)					
	Full Name of Individual (Last, First, Middle Ini HOWARTH, CRAIG, , ,	tial) or Full C	Drga	nization Name		Date of	Be	ceint								
	Mailing Address 1820 NAPOLI DRIVE						/	D) / Y	Y	Y	Y				
						11 28 2022										
	City	State		Zip Code		Trans	acti	on ID :	PR2575	7624	46704:	3				
	APEX	NC		27502-9659		Amount	t of	Each F	Receipt th	nis F	Period					
	FEC ID number of contributing federal political committee.	С					115.3	38								
	Name of Employer (for Individual) Optum Services, Inc	Occ VP		tion (for Individual)		M	emc	ttem								
	Receipt For:	Aggregate	Yea	ar-to-Date 🔻												
	Primary General Other (specify) ▼		,	923.04	P,	/R Ded	uctio	on (\$38	.46 Bi-W	ekly	y)					
<u>с.</u>	Full Name of Individual (Last, First, Middle Ini NEESE, LARRY, , ,	tial) or Full C	Drga	nization Name		Date of	Re	eceipt								
	Mailing Address 309 DUNLEIGH COURT			_		M M 11	1	D 28)22 [°]	Y				
	City	State		Zip Code		Trans	act	ion ID :	PR2575	766 [,]	16704	3				
	MADISON	MS		39110-6806		Amount	t of	Each F	Receipt tl	nis F	Period					
	FEC ID number of contributing federal political committee.	С						,	, ,	_	46.	14				
	Name of Employer (for Individual)	Occ	cupa	tion (for Individual)		М	emo	tem								
	United HealthCare Services Inc	KA	Sr A	cct Exe Acct Opt Out Mk												
	Receipt For:	Aggregate	Yea	ar-to-Date 🔻												
	Primary General Other (specify)		-	369.12	P	P/R Ded	ucti	on (\$15	.38 Bi-W	eekl	у)					
	UBTOTAL of Receipts This Page (optional)			· · · · ·	 - -			,	· · ·	+	738.4	12				

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ITEMIZED RECEIPTS		X 11a		11b	11c	12						
Any information copied from such Reports and or for commercial purposes, other than using the												
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle I PAIK, JESSICA, , ,	nitial) or Full C	rganization Name	Date of Receipt									
Mailing Address 18 BUTTONWOOD LANE E	AST		M 11		28) / Y	ү ү 2022	Y				
City RUMSON	State NJ	Zip Code 07760-1010	Transaction ID : PR2575783167043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С				-		576.9	90				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Unit CEO		Mem	o Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R D	educt	ion (\$19)	2.30 Bi-W	/eekly)					
Full Name of Individual (Last, First, Middle I MADDUX, SUSAN, , ,	nitial) or Full C	rganization Name	Date	of Re	eceipt							
Mailing Address 16426 FARMERS MILL LAN			11 28 2022 Transaction ID : PR2575783867043									
City	State MO	Zip Code						3				
CHESTERFIELD	IVIO	63005-4549	Amou	unt of	Each H	leceipt th	is Period					
FEC ID number of contributing federal political committee.	С			42.12								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Pharmacy Programs		Mem	o Item							
Receipt For:	Aggregate	Year-to-Date 🔻		-								
Other (specify) ▼		336.96	P/R De	educti	on (\$14.	04 Bi-We	ekly)					
Full Name of Individual (Last, First, Middle I SUAREZ, MARIO, , ,	nitial) or Full C	rganization Name	Date	of Re	eceipt							
Mailing Address 21294 SMOKEHOUSE CT			11		28		2022 Y					
City ASHBURN	State VA	Zip Code 20147-5316					78736704 is Period	3				
FEC ID number of contributing federal political committee.	С				y		115.3	38				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Product		Mem	o Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 923.04	P/R D	educt	ion (\$38	.46 Bi-We	eekly)					
SUBTOTAL of Receipts This Page (optional)					,	,	734.4	10				
TOTAL This Period (last page this line numbe	r only)											

SCHEDULE A (FEC Form 3X) _____ _

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	-	Use separate schedule(s)	(check o	nly o	ne)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page			11b	11c	12	<u> </u>					
Any information copied from such Reports and or for commercial purposes, other than using													
NAME OF COMMITTEE (In Full)		duress of any pointed commute											
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)										
Full Name of Individual (Last, First, Middle BERGDOLL, JENNIFER, , ,	Initial) or Full O	rganization Name	Date	Date of Receipt									
Mailing Address 230 HARRIS PEAK ST			11		D D D 28	/ Y	y y 2022	Y					
City LAS VEGAS	State NV	Zip Code 89138-6351	Transaction ID : PR2575793767043 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С					-	115.3	38					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) People Team		Memo	o Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R De	educti	ion (\$38.	46 Bi-We	ekly)						
Full Name of Individual (Last, First, Middle B. SANKEN, SARA, , ,	Initial) or Full O	rganization Name	Date	of Re	eceipt								
Mailing Address 3018 ASPEN LAKE DRIVE			M M / D D / Y										
	State MN	Zip Code						3					
		55449-7517	Amou	int of	Each R	eceipt th	is Period	_					
FEC ID number of contributing federal political committee.	C		42.12										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) People Team		Memo	o Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.96	P/R De	educti	on (\$14.	04 Bi-We	ekly)						
Full Name of Individual (Last, First, Middle WIX, LACOSTA, , ,	Initial) or Full O	rganization Name	Date	of Re	eceipt								
Mailing Address 402 JULIA STREET <u>APARTMENT 403</u> City	State	Zip Code	11		28	JL	2022						
NEW ORLEANS	LA	70130-3699	-				30006704 is Period	3					
FEC ID number of contributing federal political committee.	С		Ē		y	, y	115.3	38					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ssc Gen Counsel		Mem	o Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 923.04	P/R D	educt	ion (\$38.	.46 Bi-We	ekly)						
SUBTOTAL of Receipts This Page (optional)					, .		272.8	88					
TOTAL This Period (last page this line numb	er only)												

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11	EMIZED RECEIPTS	for each category of the Detailed Summary Page			11a	\square	11b	11c	12	17					
	y information copied from such Reports and Sta for commercial purposes, other than using the r														
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	InitedHealth Group PA	AC)											
A.	Full Name of Individual (Last, First, Middle Initia GALIAN, SANDRA, , ,	l) or Full Or	ganization Name		Date of Receipt										
	Mailing Address 120 SEQUAMS LANE WEST				м м 11	/	D D D 28	/ Y	ү ү 2022	Y					
	City WEST ISLIP	State NY	Zip Code 11795-4549	Transaction ID : PR2575803267043 Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С		115.38											
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Itwk Prgms		Me	emo	Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 923.04] [P/R Dedu	uctic	on (\$38	46 Bi-We	ekly)						
B.	Full Name of Individual (Last, First, Middle Initia LEVINE, CAROL, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt								
	Mailing Address 9100 LARKSPUR LANE	01-1-	Zin Onde		11 28 2022 Transaction ID : PR2575803367043										
	City EDEN PRAIRIE	State MN	Zip Code 55347-2004						0336704 is Period	3					
	FEC ID number of contributing federal political committee.	С					,		576.	90					
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) Cust Strategy		Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 4615.20]	9/R Dedu	uctio	n (\$192	2.30 Bi-W	'eekly)						
C.	Full Name of Individual (Last, First, Middle Initia RUSSELL, LAURIE, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt								
	Mailing Address 3108 SONIA DRIVE				M M 11	/	D D D 28		y y 2022						
	City LAS VEGAS	State NV	Zip Code 89107-3246						31216704 is Period	3					
	FEC ID number of contributing federal political committee.	С			<u> </u>		,		117.	00					
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) ovt Affs		Me	emo	Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 936.00] F	P/R Ded	uctio	on (\$39.	00 Bi-We	eekly)						
s	UBTOTAL of Receipts This Page (optional)			•					809.2	28					
т	OTAL This Period (last page this line number or	ıly)		•			,								

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

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				Detailed Summary Page	×	11a		11		11c		12			
	y information copied from such Reports and State for commercial purposes, other than using the na								se of s						
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated								5.10 11						
A.	Full Name of Individual (Last, First, Middle Initial) LATINO, DAYNA, , , Mailing Address 41 BROOK CROSSING EXTENS		rgar	nization Name		Date of Receipt									
	City	State		Zip Code	11 28 2022 Transaction ID : PR2575813267043										
	ELLINGTON	CT		06029-2247								Period	5		
	FEC ID number of contributing federal political committee.	С						-				115.3	38		
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Staff		Me	emo	o Ite	em						
	Receipt For: A Primary General Other (specify) ▼	vggregate	Yea	r-to-Date ▼ 923.04	P/	R Ded	uctio	on	(\$38.4	6 Bi-\	Veel	kly)			
в.	Full Name of Individual (Last, First, Middle Initial) SCHENEMAN, STEPHEN, , ,	or Full O	rgar	nization Name	Date of Receipt										
	Mailing Address 428 8TH ST			te				^M ^M 11	/	E	28	/	Y	y y 2022	Y
	City HUNTINGTON BEACH	State CA		Zip Code 92648-4629		Transaction ID : PR2575813467043 Amount of Each Receipt this Period							3		
	FEC ID number of contributing federal political committee.	С						-				115.3	38		
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Affordability		Me	emo	o Ite	em						
	Receipt For: A Primary General Other (specify) ▼	aggregate	Yea	r-to-Date ▼ 923.04	P/	R Dedu	uctic	on	(\$38.4	6 Bi-\	Veel	dy)			
C.	Full Name of Individual (Last, First, Middle Initial)		rgar	nization Name	Date of Receipt										
	Mailing Address 5215 MORGAN AVENUE SOUTH					11 ^M	/	L	28	/	- 2	2022 2022			
	City MINNEAPOLIS	State MN		Zip Code 55419-1026	A							426704 Period	3		
	FEC ID number of contributing federal political committee.	С				_		9				576.9	90		
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Chief Cnsmr Off		Me	emo	o It	em						
	Receipt For: A Primary General Other (specify)	ggregate	Yea	r-to-Date ▼ 4615.20	P	/R Ded	uctio	on	(\$192	.30 Bi	-We	ekly)			
s	UBTOTAL of Receipts This Page (optional)			•	.			7				807.6	6		
Т	OTAL This Period (last page this line number only	/)						7		. ,					

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	-	Use separate schedule(s)	(check	only	one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 1	- F	11b	11c	12						
Any information copied from such Reports an			erson for										
or for commercial purposes, other than using	the name and a	ddress of any political committee	e to solici	t cont	ribution	s from su	ch commit	tee.					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle SPAULDING, TODD, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 15174 53RD ST NW			M	11 / D D / Y Y Y Y 2022									
City ANNANDALE	State MN	Zip Code 55302-3576	Transaction ID : PR2575814667043 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С				-		34	59					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Prov Svc		Mer	no Item	ı							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 276.72	P/R	Deduo	ction (\$	11.53 Bi-V	Veekly)						
Full Name of Individual (Last, First, Middle B. <u>TAYLOR, DUSTIN, , ,</u>	Initial) or Full C	rganization Name	Da	te of I	Receipt								
Mailing Address 7512 NE 34TH UNIT 2C	State	Zin Code	M	11		28	2022	Y					
City VANCOUVER	State WA	Zip Code 98665-0709					581816704 this Perioc						
FEC ID number of contributing federal political committee.	С						115	_					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) gn Pres Ntwk Mgmt		Mer	no Item	ı							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R	Deduc	tion (\$3	38.46 Bi-W	/eekly)						
Full Name of Individual (Last, First, Middle C. MCNATT, RICHARD, , ,	Initial) or Full C	rganization Name	Da	te of I	Receipt								
Mailing Address 4945 CANDACRAIG			М	11 ^M		28	2022	Y					
City ALPHARETTA	State GA	Zip Code 30022-6340				-	582496704 this Period	-					
FEC ID number of contributing federal political committee.	С			_	9	9	576	90					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 SIs		Mer	no Iten	ו							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4615.20	P/R	Dedu	ction (\$	192.30 Bi-	Weekly)						
SUBTOTAL of Receipts This Page (optional)					7	,	726.	87					
TOTAL This Period (last page this line numb	er only)												

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		Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12										
Any information copied from such Reports and or for commercial purposes, other than using t			13 14 15 16 1' erson for the purpose of soliciting contributions to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full)													
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)										
Full Name of Individual (Last, First, Middle KAUFMAN, PHILIP, , ,	Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 1580 BOHNS POINT ROAD			11 28 2022										
City WAYZATA	State MN	Zip Code 55391-9309	Transaction ID : PR2575829867043 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		576.90										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) D IFP & Chief Cnsmr/Grwth	Memo Item										
Receipt For: Primary General Other (specify) $ earrow$	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle B. SCHMITT, MARIE, , ,	Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 3045 25TH AVENUE			11 / D D / Y Y Y Y 2022										
	State CA	Zip Code	Transaction ID : PR2575830067043										
		94132-1541	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		115.38										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP CInt Relationship	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Middle C. HARPER, JENNIFER, , ,	Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 8206 WEST 16TH STREET			11 / D D / Y Y Y Y Y 2022										
City SAINT LOUIS PARK	State MN	Zip Code 55426-1904	Transaction ID : PR2575835567043 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		42.12										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) uty Gen Counsel	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional).			734.40										
TOTAL This Period (last page this line number	er only)												

SCHEDULE A (FEC Form 3X)

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		Use separate schedule(s)	(check or	(check only one)										
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 13		11b 14	11c 15	12	Г	17				
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the		ose of s	oliciting	, contri	ibutio	ons				
\setminus	NAME OF COMMITTEE (In Full)													
	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group P	AC)										
<u> </u>	Full Name of Individual (Last, First, Middle Init	ial) or Full O	rganization Name		Data of Dassist									
Α.	JERDE, MARY, , , Mailing Address 9324 N AERIE CLIFF			Date of Receipt										
	Maining Address 9324 N AERIE CLIFF			11	/	28	/ Y	2022						
	City	State	Zip Code	Tran	Transaction ID : PR2575837467043									
	FOUNTAIN HILLS	AZ	85268-6358	Amour	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		173.07										
	Name of Employer (for Individual)	Осси	upation (for Individual)	N	/lemo	Item								
	United HealthCare Services Inc	VP I	Med Clin Ops											
	Receipt For:	Aggregate	Year-to-Date ▼	D/D D .				1 - 1 - 1						
	Other (specify) ▼		1384.56	P/R Deduction (\$57.69 Bi-Weekly)										
Р	Full Name of Individual (Last, First, Middle Init MANDELL, WILLIAM, , ,	ial) or Full O	rganization Name	Data	of Do	aaint								
D.	Mailing Address 720 MISSION HILL WAY				Date of Receipt									
	Maining Addition 720 MISSION HILL WAT			11	n /	28	, T	2022						
	City	State	Zip Code	Tran	sacti	on ID : P	R25758	37867	7043					
	COLORADO SPRINGS	CO	80921-2672	Amour	nt of	Each Re	ceipt th	is Peri	iod					
	FEC ID number of contributing federal political committee.	С		42.12										
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ⁄Ied Dir	Memo Item										
	Receipt For:	Aggregate	Year-to-Date 🔻											
	Primary General Other (specify) ▼		336.96	P/R Dec	ductio	on (\$14.0	4 Bi-We	ekly)						
<u>с</u> .	Full Name of Individual (Last, First, Middle Init HARRISON, CHARLES, , ,	ial) or Full O	rganization Name	Date of	of Re	ceipt								
	Mailing Address 10603 MILLET SEED HILL			11	/	D D D 28	/ Y	2022		1				
	City	State	Zip Code		sacti	on ID : F	PR2575	1						
	COLUMBIA	MD	21044-4150			Each Re								
	FEC ID number of contributing federal political committee.	С				y	,		42.12					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ied Dir	Ν	Memo Item									
	Receipt For:	Aggregate	Year-to-Date V											
	Other (specify)		336.96	P/R De	ductio	on (\$14.0	94 Bi-W€	eekly)						
⊢	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number of					9	5	25	57.31	-				

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

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			Detailed Summary Page	X	11a		11b	11c		12				
				13		14	15		16	17				
	r information copied from such Reports and St or commercial purposes, other than using the							soliciti		ontribu	tions			
	NAME OF COMMITTEE (In Full)													
\geq	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group PA	AC)										
	Full Name of Individual (Last, First, Middle Initi BOROCH, BLAIR, , ,	ial) or Full C	rganization Name		Date of Receipt									
	Mailing Address 800 BELFRY DRIVE				11 / 28 / 2022 Transaction ID : PR2575849967043									
	City	State	Zip Code		Trans	acti	on ID :	PR257	5849	96704	3			
-	BLUE BELL	PA	19422-1210		Amoun	t of	Each F	Receipt	this	Period				
	FEC ID number of contributing rederal political committee.	С					.			615.	00			
	Name of Employer (for Individual) Jnited HealthCare Services Inc		upation (for Individual) Plan CEO		М	emo	Item							
Ī	Receipt For:	Aggregate	Year-to-Date ▼											
	Primary General	5594.0		Р	/R Ded	uctio	on (\$20	5.00 Bi	Wee	kly)				
	Other (specify)	L	4590.00	4										
	Full Name of Individual (Last, First, Middle Initi COTTINGTON, NYLE BRENT, , ,	ial) or Full C	rganization Name		Date of	f Re	ceipt							
	Mailing Address 15050 47TH STREET NE				M M	/	28			022	Y			
	City	State	Zip Code		Trans	acti	on ID :	PR257	5865	36704	3			
	SAINT MICHAEL	MN	55376-1613		Amoun	t of	Each F	Receipt	this	Period				
	FEC ID number of contributing ederal political committee.	С					.			576.	90			
	Name of Employer (for Individual) Jnited HealthCare Services Inc		upation (for Individual) Acctng		М	emo	Item							
Ī	Receipt For:	Aggregate	Year-to-Date V											
	Primary General Other (specify) ▼		4615.20] P.	/R Ded	uctic	on (\$19	2.30 Bi	Wee	kly)				
	Full Name of Individual (Last, First, Middle Initi ADAMO, BRENT, , ,	ial) or Full C	rganization Name		Date of	f Re	ceipt							
	Mailing Address 3109 E DESERT LN				M M 11	/	28			022	Y			
(City	State	Zip Code		Trans	acti	ion ID :	PR257	/5867	786704	3			
-	PHOENIX	AZ	85042-7198		Amoun	t of	Each F	Receipt	this	Period				
	FEC ID number of contributing rederal political committee.	С					,	,		115.	38			
Ī	Name of Employer (for Individual)	Occ	upation (for Individual)		М	emo	Item							
	Optum Services, Inc		Software Engineering											
Ī	Receipt For:	Aggregate	Year-to-Date V											
	Primary General		923.04	1 P	/R Ded	luctio	on (\$38	8.46 Bi-\	Neek	ly)				
	Other (specify)			- L -										

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	Use separate schedule(s)	(check only one)											
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17										
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions										
NAME OF COMMITTEE (In Full)													
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)										
Full Name of Individual (Last, First, Middle ROSS, CHRISTY, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 211 JIM CANNON RD			M M / D D / Y Y Y Y Y 11 28 2022										
City VAN ALSTYNE	State TX	Zip Code 75495-2803	Transaction ID : PR2575873367043 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		115.50										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Ops	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 924.00	P/R Deduction (\$38.50 Bi-Weekly)										
Full Name of Individual (Last, First, Middle PEZHMAN, PAYMAN, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 2825 MAPLEWOOD CIRC			11 / D D / Y Y Y Y Y 28 2022										
City	State	Zip Code	Transaction ID : PR2575883567043										
WAYZATA	MN	55391-2633	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		576.90										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment Gen Counsel	Memo Item										
Receipt For:	Aggregate	Year-to-Date V											
Other (specify) ▼		4615.20	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle SCHMUKER, ERIN, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 2575 TALL TIMBER COUR	1		11 D D / Y Y Y Y 2022										
City GRAND RAPIDS	State MI	Zip Code 49546-6787	Transaction ID : PR2575906667043 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		57.69										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Gen Mgmt	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 461.52	P/R Deduction (\$19.23 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)			750.09										
TOTAL This Period (last page this line numb	er only)												

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			Use separate schedule(s)	(check only	/ one)								
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	11b	11c	12						
	y information copied from such Reports and Sta												
or	for commercial purposes, other than using the r	name and a	ddress of any political committee	to solicit cor	tributions fro	om such	committe	e.					
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	C)									
A.	Full Name of Individual (Last, First, Middle Initia ALT, ROBERT, , ,	al) or Full O	organization Name	Date of Receipt									
	Mailing Address 813 FERNWOOD ROAD			M M 11	/ D D 28	/ Y	2022	Y					
	City MOORESTOWN	State NJ	Zip Code 08057-1362	Transaction ID : PR2575907367043 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			- 7F	-9	42.1	2					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Prgms	Me	emo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.96	P/R Dedu	uction (\$14.0	4 Bi-We	ekly)						
в.	Full Name of Individual (Last, First, Middle Initia MARGHERIO, MICHAEL, , ,	al) or Full O	organization Name	Date of	Receipt								
	Mailing Address 6412 JEFFERSON STREET			11 28 2022 Transaction ID : PR2575916367043									
		State MO	Zip Code					<u> </u>					
			64113-1542	Amount	of Each Re	ceipt th	is Period						
	FEC ID number of contributing federal political committee.	C		115.38									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs Acct Mgt	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R Dedu	uction (\$38.46	6 Bi-We	ekly)						
C.	Full Name of Individual (Last, First, Middle Initia	al) or Full O	organization Name	Date of	Receipt								
	Mailing Address 8590 BIG MANGROVE DRIVE			M M 11	/ D D 28		y y 2022						
	City FORT MYERS	State FL	Zip Code 33908-7694		action ID : P of Each Re			3					
	FEC ID number of contributing federal political committee.	С			,	y	57.6	9					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual))ir People Team	Me	emo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 461.52	P/R Ded	uction (\$19.2	3 Bi-We	ekly)						
s	UBTOTAL of Receipts This Page (optional)		••••••			9	215.1	9					
т	OTAL This Period (last page this line number or	nly)	•			-							

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		for each category of the Detailed Summary Page	X 11a 11b 11c 12									
or for commercial purposes, other than usin			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Midd OLSON, TRUDY, , ,		rganization Name	Date of Receipt									
Mailing Address 7208 WOODDALE AVE	SOUTH	Zip Code	11 28 2022									
EDINA	MN	55435-4156	Transaction ID : PR2575918767043									
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) People Team	Memo Item									
Receipt For: Primary General Other (specify) ▼	Primary General General											
Full Name of Individual (Last, First, Midd MCGOLDRICK, CHRISTOPHEI	Date of Receipt											
Mailing Address 48 MOUNTAIN TERRAC	M M / D D / Y Y Y Y 11 28 2022											
City WEST HARTFORD	State CT	Zip Code 06107-1533	Transaction ID : PR2575930467043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		576.90									
Name of Employer (for Individual) United HealthCare Services Inc	Occ NA	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Midd C. MATTERA, RICHARD, , ,	le Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 640 LOCUST HILLS DR	IVE		11 28 2022									
City WAYZATA	State MN	Zip Code 55391-1973	Transaction ID : PR2575938467043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		576.90									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) G Chief Dev Officer	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optiona	al)		1269.18									
TOTAL This Period (last page this line num	nber only)	•										

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	-	Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12										
Any information copied from such Reports or for commercial purposes, other than usin	and Statements mang the name and a	l ay not be sold or used by any p ddress of any political committe	13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full)	-												
> UnitedHealth Group Incorpo	prated PAC (I	JnitedHealth Group P/	AC)										
Full Name of Individual (Last, First, Mide A. RILEY, FELICITY, , ,	dle Initial) or Full C	Prganization Name	Date of Receipt										
Mailing Address 3330 EDMUND BLVD			Date of Receipt										
City	State	Zip Code	Transaction ID : PR2575943367043										
MINNEAPOLIS	MN	55406-2348	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		588.45										
Name of Employer (for Individual) United HealthCare Services Inc	Memo Item												
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4607.60	P/R Deduction (\$196.15 Bi-Weekly)										
Full Name of Individual (Last, First, Mide DONAHUE, JEANINE, , ,	Date of Receipt												
Mailing Address 164 MORNINGSIDE DR	11 28 2022												
City MANDEVILLE	State LA	Zip Code 70448-7571	Transaction ID : PR2575959267043 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.		115.38											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Prgms	Memo Item										
Receipt For:		Year-to-Date V											
Primary General Other (specify) ▼		923.04	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Mide C. SALVO, GIANCARLO, , ,	dle Initial) or Full C	organization Name	Date of Receipt										
Mailing Address 1027 SW 149 LANE			11 / D D / Y Y Y Y 2022										
City SUNRISE	State FL	Zip Code 33326-1957	Transaction ID : PR2575964967043 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		115.38										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Reg Sales Dir	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)										
SUBTOTAL of Receipts This Page (option	al)		819.21										
TOTAL This Period (last page this line nu	mber only)												

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

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			for each catego Detailed Summ		✗ 11a 11b 11c 12 13 14 15 16 17									
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements ma ame and a	y not be sold or ddress of any pol	used by any per tical committee	son for the purpose of soliciting contributions									
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth	Group PA	C)									
Α.	Full Name of Individual (Last, First, Middle Initial) LEMKE, HEATHER, , ,) or Full O	rganization Name		Date of Receipt									
	Mailing Address 4135 TRILLIUM LANE EAST			11 28 2022										
	City	State MN	Zip Code		Transaction ID : PR2575965867043									
	MINNETRISTA		55364-7730		Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			144.21									
	Name of Employer (for Individual)	Оссі	pation (for Individ	ual)	Memo Item									
	United HealthCare Services Inc	VP I	People Team											
	Receipt For:	Aggregate	Year-to-Date 🔻											
	Other (specify) ▼	1153.68	P/R Deduction (\$48.07 Bi-Weekly)											
в.	Full Name of Individual (Last, First, Middle Initial) KISCH, DAVID, , ,	Date of Receipt												
	Mailing Address 7715 GIBRALTER TERRACE	11 28 2022												
	City APPLE VALLEY	State MN	Zip Code 55124-6124		Transaction ID : PR2575966067043 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		45.00										
	Name of Employer (for Individual) Optum Services, Inc	lual)	Memo Item											
	Receipt For: Primary General Other (specify) ▼	ot For: Primary General Aggregate Year-to-Date ▼												
с.	Full Name of Individual (Last, First, Middle Initial)) or Full O	rganization Name		Date of Receipt									
	Mailing Address 1373 PRAIRIE MEADOW RD				M M / D D / Y Y Y Y 11 28 2022									
	City	State	Zip Code		Transaction ID : PR2575970467043									
	MINNETRISTA	MN	55359-6701		Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			576.90									
	Name of Employer (for Individual) Optum Services, Inc		pation (for Indivic f Clin Off	ual)	Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼	4615.20	P/R Deduction (\$192.30 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)				766.11									
Т	OTAL This Period (last page this line number onl	y)		····· •										

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports and a or for commercial purposes, other than using the			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorporat	ed PAC (l	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle Ir A. DICELLO, MARK, , ,	nitial) or Full O	rganization Name	Date of Receipt								
Mailing Address 619 SAND CRANE CT			M M / D D / Y Y Y Y 11 28 2022								
City	State	Zip Code	Transaction ID : PR2575977967043								
BRADENTON	FL	34212-5226	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		42.00								
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item								
United HealthCare Services Inc		n Pres Ntwk Mgmt	-								
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General		000.00	P/R Deduction (\$14.00 Bi-Weekly)								
Other (specify) v		336.00									
Full Name of Individual (Last, First, Middle Ir B. SIEBERT, GREGORY, , ,	nitial) or Full O	rganization Name	Date of Receipt								
Mailing Address 46 VIA BELLEZA			11 28 2022								
City	State	Zip Code	Transaction ID : PR2575979667043								
SAN CLEMENTE	CA	92673-6910	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		300.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼	1								
Primary General			P/R Deduction (\$100.00 Bi-Weekly)								
Other (specify)		2400.00									
Full Name of Individual (Last, First, Middle Ir c. RICHARDS, ALISON, , ,	nitial) or Full O	rganization Name	Date of Receipt								
Mailing Address 257 WEST GRANTLEY			11 28 2022								
City	State	Zip Code	Transaction ID : PR2575987967043								
ELMHURST	IL	60126-2237	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		576.90								
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item								
United HealthCare Services Inc		sion CEO	_								
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General Other (specify)		4615.20	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			918.90								
TOTAL This Period (last page this line number	r only)										

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		Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17										
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions										
NAME OF COMMITTEE (In Full)													
UnitedHealth Group Incorpora	ted PAC (I	UnitedHealth Group P/	AC)										
Full Name of Individual (Last, First, Middle GOLD, PAMELA, , ,	Initial) or Full C	organization Name	Date of Receipt										
Mailing Address 2821 E SWISS OAKS DR			11 28 2022										
City SANDY	State UT	Zip Code 84093-6587	Transaction ID : PR2575988667043 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		42.00										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs Acct Mgt	Memo Item										
Receipt For: Primary General Other (specify) \mathbf{v}	Aggregate	Year-to-Date ▼ 336.00	P/R Deduction (\$14.00 Bi-Weekly)										
Full Name of Individual (Last, First, Middle B. SCHULTZ, STACY, , ,	Date of Receipt												
Mailing Address 4012 S XERXES AVENUE	11 28 / Y Y Y Y 2022												
City MINNEAPOLIS	State MN	Zip Code 55410-1146	Transaction ID : PR2575990967043 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		115.38										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) s Segment Gen Counsel	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Middle C. CHAMBUNDABONGSE, KUNJ		organization Name	Date of Receipt										
Mailing Address 9730 46TH STREET			M M / D D / Y Y Y Y 11 28 2022										
City WATERTOWN	State MN	Zip Code 55388-9333	Transaction ID : PR2576000267043 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		576.90										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Technology	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional).			734.28										
TOTAL This Period (last page this line number	er only)												

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
or for commercial purposes, other than usin			erson for the purpose of soliciting contributions to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (L	InitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Midd BRIGGS , MARC, , ,	le Initial) or Full Or	ganization Name	Date of Receipt									
Mailing Address 13534 TUSCALEE HILL			11 28 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y									
City DRAPER	State UT	Zip Code 84020-5653	Transaction ID : PR2576001667043									
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period									
Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Plan CEO	Memo Item									
Receipt For: Primary General Other (specify) ▼	Receipt For: Aggregate Year-to-Date ▼ Primary General											
Full Name of Individual (Last, First, Midd B. SCHOENER, SHAUN, , ,	le Initial) or Full Or	rganization Name	Date of Receipt									
Mailing Address 884 LAS PALOMAS DR	M M / D D / Y Y Y Y Y 11 28 2022											
City LAS VEGAS	State NV	Zip Code 89138-5001	Transaction ID : PR2576012767043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	49.02											
Name of Employer (for Individual) Health Plan of Nevada		ipation (for Individual) KA VP SIs Acct Mgt	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 392.16	P/R Deduction (\$16.34 Bi-Weekly)									
Full Name of Individual (Last, First, Midd C. SONERHOLM, KIMBERLY, ,		rganization Name	Date of Receipt									
Mailing Address 3380 SHELBORNE WO			11 / D D / Y Y Y Y Y 2022									
City CARMEL	State IN	Zip Code 46032-8101	Transaction ID : PR2576033267043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		576.90									
Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Plan CEO	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optiona	al)		1202.82									
TOTAL This Period (last page this line nur	nber only)	•										

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	y information copied from such Reports and Stater for commercial purposes, other than using the nan					for	the		pos	se of		oliciting	contribu	itions			
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (l	Un	itedHealth Group PA	C)												
Α.	Full Name of Individual (Last, First, Middle Initial) HOLZERSPARR, CYNTHIA, , ,	or Full O	Orga	nization Name	[Date of Receipt											
	Mailing Address 30 BRIDGHAM FARM ROAD		11 28 2022														
	3	State		Zip Code		Transaction ID : PR2576034867043											
	RUMFORD	RI		02916-1304	Amount of Each Receipt this Period												
	FEC ID number of contributing federal political committee.	0							-			-7-	42	.12			
	Name of Employer (for Individual) United HealthCare Services Inc																
	Receipt For:	-															
	Primary General Other (specify) ▼	P	/R [Dedu	uctio	on	(\$14	.04	Bi-We	ekly)							
в.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name BYRNES, CHRISTOPHER, , ,								Date of Receipt								
	Mailing Address 3920 GLENWOOD STREET							M M / D D / Y Y Y Y 11 28 2022									
	5	State MN					-				428670 4 s Period						
	FEC ID number of contributing federal political committee.	C							-			-	576	.90			
	Name of Employer (for Individual) United HealthCare Services Inc	tion (for Individual) gment COO			Me	emo) It	em									
	Receipt For: Ag Primary General Other (specify) ▼	gregate	Yea	ar-to-Date ▼ 4615.20	P/	/R [Dedu	uctic	on	(\$192	2.3	0 Bi-W	eekly)				
	Full Name of Individual (Last, First, Middle Initial) (KANDALAFT, KEVIN, , ,	or Full O	Orga	nization Name		Date	e of	Re	ece	ipt							
	Mailing Address 4189 WINDSOR POINT PLACE						11 [™]	/	ľ	28		/ Y	2022	Y			
	5	State		Zip Code		Tr	ans	acti	ior	ו ID :	PI	R25760	436670	43			
	EL DORADO HILLS	CA		95762-3797	/	Amo	ount	of	Ea	ach R	lec	eipt thi	s Period	1			
	FEC ID number of contributing federal political committee.	0							7			y	576	.90			
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) n CEO			Me	emo	b It	em							
	Receipt For: Ag Primary General Other (specify)	For: Aggregate rimary General					P/R Deduction (\$192.30 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			••••••							ļ		1195	92			
т	OTAL This Period (last page this line number only)			·····					-		ļ	-					

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	-	Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17										
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions										
NAME OF COMMITTEE (In Full)													
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)										
Full Name of Individual (Last, First, Middle A. STONE, LAURA, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 1485 COUNTY RD 286			11 28 2022										
City COLLINSVILLE	State TX	Zip Code 76233-2389	Transaction ID : PR2576045167043 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		115.38										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Middle B. GROENENDAAL, MICHAEL, , ,	Date of Receipt												
Mailing Address 620 FOREST AVENUE			11 / D D / Y Y Y Y Y 28 2022										
City RIVER FOREST	State	Zip Code 60305-1710	Transaction ID : PR2576046267043 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С												
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Executive Compensation	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P/R Deduction (\$14.00 Bi-Weekly)										
Full Name of Individual (Last, First, Middle C. NELSON, KRISTA, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 18202 SHAVERS LAKE D	1		11 / D D / Y Y Y Y 2022										
City WAYZATA	State MN	Zip Code 55391-3338	Transaction ID : PR2576047967043 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		576.90										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 UHC Operations	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional).			734.28										
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		Use separate schedule(s)	(check on	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	11b			12	<u> </u>				
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or for commercial purposes, other than using th	e name and a	lucress of any political committee	e io solicit co	UITIDUTIO	ns from s	SUCH CC	mmitte	ie.				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (I	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle Ir CARTER, JEREMY, , ,	nitial) or Full C	organization Name	Date o	of Receip	ot							
Mailing Address 1081 LAKE SUSAN DR			11 28 2022									
City CHANHASSEN	State MN	Zip Code 55317-9337			ID : PR25							
FEC ID number of contributing federal political committee.	С						34.5	9				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Tax		lemo Ite	m							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 276.72	P/R Dec	duction (\$11.53 Bi-	-Weekl	y)					
Full Name of Individual (Last, First, Middle Ir MONICAL, KENT, , ,	nitial) or Full C	Prganization Name	Date o	of Receip	ot							
Mailing Address 9795 E PIEDRA DRIVE			M 11	/ D	28 /)22	Y				
City SCOTTSDALE	State AZ	Zip Code 85255-9231			D : PR25							
FEC ID number of contributing federal political committee.	C		Amour	Amount of Each Receipt this Period								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) gn CEO		lemo Ite	m							
Receipt For:		Year-to-Date ▼										
Primary General Other (specify) ▼		4615.20	P/R Dec	luction (\$192.30 B	i-Week	dy)					
Full Name of Individual (Last, First, Middle Ir REED, BARTON, , ,	nitial) or Full C	organization Name	Date o	of Receip	ot							
Mailing Address 16716 MAYFIELD DRIVE	Otate	Zin Ood-	11 11	JL	28	20)22					
City EDEN PRAIRIE	State MN	Zip Code 55347-2242			ID:PR25			•				
FEC ID number of contributing federal political committee.	С				,		42.1	2				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		lemo Ite	m							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 336.96	P/R Dee	P/R Deduction (\$14.04 Bi-Weekly)								
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$\langle \rangle$	NAME OF COMMITTEE (In Full)															
	UnitedHealth Group Incorporate	ed PAC (l	Un	itedHealth Group PA	AC)											
۱.	Full Name of Individual (Last, First, Middle In HUANG, JAMES, , ,	itial) or Full C	Orga	nization Name		Date of Receipt										
	Mailing Address 6838 IDLEWOOD WAY					M M / D D / Y Y Y Y 11 28 2022										
	City	State	Zip Code		Trans	acti	ion	ID :	PR	25760	599	6704:	3			
	EDEN PRAIRIE	MN		55346-3519	_	Amount	of	Ea	ch R	ece	eipt thi	s P	eriod			
	FEC ID number of contributing federal political committee.	С						-		l	-7		115.3	38		
	Name of Employer (for Individual) Optum Services, Inc		•	tion (for Individual) Mgmt		M	emc	o Ite	em							
	Receipt For:	Agareaate	Yea	ar-to-Date ▼												
	Primary General Other (specify) ▼		-	923.04		P/R Ded	uctio	on	(\$38.	46	Bi-We	ekly)			
	Full Name of Individual (Last, First, Middle In REX, JOHN, , ,	itial) or Full C	Drga	nization Name		Date of Receipt										
	Mailing Address 503 HARRINGTON ROAD		M M / D D / Y Y Y Y 11 28 2022													
	City	State		Zip Code		Trans	acti	ion	ID :	PR	25760	600	67043	3		
	WAYZATA	MN		55391-1512		Amount	of	Ea	ch R	ece	eipt thi	s P	eriod			
	FEC ID number of contributing federal political committee.	ů – – – – – – – – – – – – – – – – – – –								576.90						
	Name of Employer (for Individual) Jnited HealthCare Services Inc		upa G C	tion (for Individual) FO		Memo Item										
	Receipt For:	Aggregate	Yea	ur-to-Date ▼												
	Primary General Other (specify) ▼		,	4615.20		P/R Ded	uctio	on	(\$192	2.30) Bi-W	eekl	y)			
	Full Name of Individual (Last, First, Middle In MCEWAN, JOSHUA, , ,	itial) or Full C	Drga	nization Name		Date of	Re	ecei	ipt							
	Mailing Address 4916 ALDRICH AVE SOUTH					11 ^M	1	E	28]	/ Y	ү 20	22 [°]	Y		
	City	State		Zip Code		Trans	act	ion	ID :	PR	25760	857	6704	3		
	MINNEAPOLIS	MN		55419-5353	_	Amount	of	Ea	ch R	ece	eipt thi	s P	eriod			
	FEC ID number of contributing federal political committee.	С						y			7		576.9	90		
	Name of Employer (for Individual)	Occ	upa	tion (for Individual)		M	emc	o It	em							
	United HealthCare Services Inc	VP -	•													
	Receipt For:			ur-to-Date ▼												
	Primary General Other (specify)			P/R Deduction (\$192.30 Bi-Weekly)												
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17				se separate schedule(s)	(ch	(check only one)										
	EMIZED RECEIPTS			r each category of the etailed Summary Page		X 11a		11b	11c	12						
	y information copied from such Reports and Sta															
or	for commercial purposes, other than using the n	ame and a	ddres	ss of any political committee	to s	olicit cor	itrid	utions fi	rom suc	n commit	tee.					
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	Jnit	edHealth Group PA	C)											
A.	Full Name of Individual (Last, First, Middle Initia DUDA, MICHAEL, , ,	l) or Full O	Irgani	ization Name		Date of	Re	ceipt								
	Mailing Address 5208 RICHWOOD DRIVE					11 28 2022										
	City EDINA	State MN		Zip Code 55436-2322	_					08996704 iis Perioc						
	FEC ID number of contributing federal political committee.	С						-		288	45					
United HealthCare Services Inc VF				on (for Individual) Dev		Me	emo	Item								
				-to-Date ▼ 2307.60		P/R Ded	uctio	on (\$96.)	15 Bi-We	eekly)						
в.	Full Name of Individual (Last, First, Middle Initia FREIBERG, BRIAN, , ,	l) or Full O	rgani	ization Name		Date of	Re	ceipt								
Mailing Address 9605 LEXINGTON CT						11 / D D / Y Y Y Y Y 128 2022										
	City WESTON	State WI		Zip Code 54476-6730		Transaction ID : PR2576093667043 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		230.76												
	Name of Employer (for Individual) United HealthCare Services Inc	Occi VP (Me	emo	Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year	-to-Date ▼ 1846.08	F	P/R Deduction (\$76.92 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initia OLUJIC, TAMMY, , ,	l) or Full O	rgani	ization Name		Date of	Re	ceipt								
	Mailing Address 36218 SE SAINT ANDREWS LA					M M	/	D D D 28		2022						
	City SNOQUALMIE	State WA		Zip Code 98065-9094						09736704 iis Perioc						
	FEC ID number of contributing federal political committee.	С				Ľ.		y =	. y	46	14					
	Name of Employer (for Individual) United HealthCare Services Inc		•	on (for Individual) Mgmt		Me	emo	Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year	-to-Date ▼ 369.12		P/R Deduction (\$15.38 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			•				, .		565.	35					
т	OTAL This Period (last page this line number or	ly)		•				,								

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17											
or for commercial purposes, other than using			erson for the purpose of soliciting contributions e to solicit contributions from such committee.											
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group PA	AC)											
Full Name of Individual (Last, First, Middle A. PALMER, BRYAN, , ,	e Initial) or Full C	rganization Name	Date of Receipt											
Mailing Address 346 COUNTRY CLUB DR			11 / D D / Y Y Y Y Y 2022											
City TEQUESTA	State FL	Zip Code 33469-1944	Transaction ID : PR2576097967043											
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period												
Name of Employer (for Individual) United HealthCare Services Inc	Memo Item													
Receipt For: Primary General Other (specify) ▼	Receipt For: Aggregate Year-to-Date ▼ Primary General													
Full Name of Individual (Last, First, Middle B. LESUEUR, REHN, , ,	e Initial) or Full C	rganization Name	Date of Receipt											
Mailing Address 254 JASPERS CIR S	M M / D D / Y Y Y Y 11 28 2022													
City CHASKA	State MN	Zip Code 55318-3210	Transaction ID : PR2576098967043 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.		115.38												
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev	Memo Item											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)											
Full Name of Individual (Last, First, Middle C. DAHL, KEVIN, , ,	e Initial) or Full C	rganization Name	Date of Receipt											
Mailing Address 21 HOEFER ST			11 28 2022											
City LATHAM	State NY	Zip Code 12110-4742	Transaction ID : PR2576100267043											
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period											
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Compli	Memo Item											
Receipt For: Primary General Other (specify)	I	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)											
SUBTOTAL of Receipts This Page (optional)		734.40											
TOTAL This Period (last page this line num	ber only)	· · · · · · · · · · · · · · · · · · ·												

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports or for commercial purposes, other than usi	and Statements mang the name and a	ay not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	prated PAC (l	JnitedHealth Group P/	łC)							
Full Name of Individual (Last, First, Mid DIAMOND, TIFFANY, , ,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1801 SPANISH TRAIL			M M / D D / Y Y Y Y 11 28 2022							
City DELRAY BEACH	State FL	Zip Code 33483-4958	Transaction ID : PR2576105567043 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		115.38							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ? Ops	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Mid B. KIEWEL, NATHAN, , ,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1137 PRAIRIE VIEW D		7th Oada	11 / D D / Y Y Y Y Y 2022							
City HUTCHINSON	State MN	Zip Code 55350-6725	Transaction ID : PR2576117567043 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		42.00							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) icipal Engineer, TLCP	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P/R Deduction (\$14.00 Bi-Weekly)							
Full Name of Individual (Last, First, Mid c. SANCHEZ, VINCENT, , ,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 5025 BRANFORD COL			11 28 / Y Y Y Y 2022							
City DUBLIN	State CA	Zip Code 94568-7241	Transaction ID : PR2576126967043 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		42.12							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)							
SUBTOTAL of Receipts This Page (option	nal)		199.50							
TOTAL This Period (last page this line nu	mber only)									

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
or for commercial purposes, other than usin			erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (l	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Mide A. LIRETTE, KARL, , ,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 9 WEST WOODLAWN I			11 / D D / Y Y Y Y 11 28 2022							
City DESTREHAN	State	Zip Code 70047-2535	Transaction ID : PR2576138967043							
FEC ID number of contributing federal political committee.	С	10041-2333	Amount of Each Receipt this Period							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Mide GROSSMAN, MICHAEL, , ,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 15725 56TH AVE N			11 28 2022							
City PLYMOUTH	State MN	Zip Code 55446-2984	Transaction ID : PR2576145867043 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		576.90							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) sion COO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Mide C. FRIDNER, JOHN, , ,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 782 PENFIELD DR			M M / D D / Y Y Y Y 11 28 2022							
City CAROL STREAM	State IL	Zip Code 60188-4738	Transaction ID : PR2576147567043 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		117.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) IA VP SIs/Gen	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 936.00	P/R Deduction (\$39.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (option	al)		809.28							
TOTAL This Period (last page this line nu	mber only)									

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
or for commercial purposes, other than			erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incol	porated PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, M A. KEPNER, SHELLY, , ,	<i>l</i> iddle Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 10165-222ND STRE			11 / D D / Y Y Y Y Y 128 / 2022						
City LAKEVILLE	State MN	Zip Code 55044-9752	Transaction ID : PR2576147867043						
FEC ID number of contributing	С	33044-9732	Amount of Each Receipt this Period 42.09						
federal political committee.									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Found/Social Resp	Memo Item						
Receipt For:		Year-to-Date ▼	—						
Primary General Other (specify) ▼	Aggregate	336.72	P/R Deduction (\$14.03 Bi-Weekly)						
Full Name of Individual (Last, First, N B. SCOTT, GARLAND, , ,	Aiddle Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 111 CASTLE POND	DRIVE		11 28 2022						
City	State	Zip Code	Transaction ID : PR2576151067043						
WINSTON SALEM	NC	27107	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		57.69						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 442.29	P/R Deduction (\$19.23 Bi-Weekly)						
Full Name of Individual (Last, First, M C. LENTZ, MICHEL, , ,	Aiddle Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 4004 FOREST GLEI	N DRIVE		M M / D D / Y Y Y Y 11 28 2022						
City GREENSBURG	State PA	Zip Code 15601-9062	Transaction ID : PR2576153567043						
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period						
Name of Employer (for Individual)	0.00	upation (for Individual)							
United HealthCare Services Inc		c Dir							
Receipt For:	Aggregate	Year-to-Date V							
Other (specify)		1384.56	P/R Deduction (\$57.69 Bi-Weekly)						
SUBTOTAL of Receipts This Page (op	tional)	••••••	272.85						
TOTAL This Period (last page this line	number only)	•							

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			Detailed Summary Page	×	11a		11t		11c		12	_					
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or	y information copied from such Reports and s for commercial purposes, other than using the																
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)													
١.	Full Name of Individual (Last, First, Middle In WARN, ROBERT, , ,	itial) or Full O	rganization Name	D	ate of	Re	ceip	ot									
	Mailing Address 2079 AUSTRIAN PINE LN							M M / D D / Y Y Y Y 11 28 2022									
	City MINNETONKA	State MN	Zip Code 55305-2429						R2576 ceipt t			3					
	FEC ID number of contributing federal political committee.	С			_		7		- 1		57.6	69					
	Name of Employer (for Individual) Optum Services, Inc	Occi VP I	upation (for Individual) Fin		Me	emo	Ite	m									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.52	P/f	R Dedu	uctio	on (\$19.2	3 Bi-W	eekl	y)						
3.	Full Name of Individual (Last, First, Middle In BENSON, JEAN, , ,	-	rganization Name	D	ate of	Re	ceip	ot									
	Mailing Address 14951 HIGHLAND COURT N				^M ^M	/	D	28	/ Y)22	Y					
	City PRIOR LAKE	State MN	Zip Code 55372-4109				-		R2576			3					
	FEC ID number of contributing federal political committee.	С		ļ			,		- 1		576.9	90					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n CEO	1	Me	emo	Ite	m									
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/F	P/R Deduction (\$192.30 Bi-Weekly)													
).	Full Name of Individual (Last, First, Middle In SAINATO, KRISTIN, , ,	itial) or Full O	rganization Name	D	ate of	Re	ceip	ot									
	Mailing Address 7 CARLTON TER				M M 11	/	L	28	/	20)22						
	City STEWART MANOR	State NY	Zip Code 11530-3821						R2578			3					
	FEC ID number of contributing federal political committee.	С					9				42.0)9					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clin Qlty		Me	emo	lte	m									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 336.72	P/I	R Dedi	uctio	on (\$14.C)3 Bi-W	eekl	у)						
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other	r than using the name and a		erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Fu		JnitedHealth Group PA	AC)
Full Name of Individual (Last, COMBSMORGAN, LAURI	First, Middle Initial) or Full O IE, , ,	rganization Name	Date of Receipt
Mailing Address 513 RIVERVI	EW DRIVE		11 28 / Y Y Y Y Y 2022
City FRANKLIN	State	Zip Code	Transaction ID : PR2578719867043
FRANKLIN		37064-5512	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		57.60
Name of Employer (for Individue United HealthCare Services Inc	,	upation (for Individual) Ntwk Contrctng	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Primary Genera Other (specify) ▼		460.80	P/R Deduction (\$19.20 Bi-Weekly)
Full Name of Individual (Last, B. EGELAND, DANIEL, , ,		rganization Name	Date of Receipt
Mailing Address 2659 E LAKE	OF THE ISLES PKWY		M M / D D / Y Y Y Y 11 28 2022
City	State	Zip Code	Transaction ID : PR2578741067043
MINNEAPOLIS	MN	55408-1052	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		576.90
Name of Employer (for Individ Optum Services, Inc	,	upation (for Individual) Bus Dev	Memo Item
Receipt For: Primary Genera Other (specify) ▼		Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, C. DUFFEY, KRISTY, , ,	First, Middle Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 42095 N 1097	TH PLACE		M M / D D / Y Y Y Y 11 28 2022
City	State	Zip Code	Transaction ID : PR2578823267043
SCOTTSDALE	AZ	85262-3293	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		576.90
Name of Employer (for Individu Optum Services, Inc		upation (for Individual) f Nursing Officer	Memo Item
Receipt For:	I	Year-to-Date V	—
Primary Genera Other (specify)		4615.20	P/R Deduction (\$192.30 Bi-Weekly)
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or fo	information copied from such Reports and Statem or commercial purposes, other than using the name												
	AME OF COMMITTEE (In Full) JnitedHealth Group Incorporated P	AC (Ui	nitedHealth Group PA	C)									
	ull Name of Individual (Last, First, Middle Initial) of CIAVOLA, LAURA, , ,	r Full Org	anization Name	C	Date of Receipt								
_	lailing Address 6958 DELOACH COURT				11 28 2022								
	,	tate X	Zip Code							8243670			
-	-RISCO	^	75034-7436	_ A	mount	of	Each	Rec	ceipt th	is Perio	d		
	EC ID number of contributing deral political committee.	;			_		-		-7	576	6.90		
	lame of Employer (for Individual) Optum Services, Inc	Occup SVP (ation (for Individual) Dps		M	emo	Item						
F	eceipt For: Agg	gregate Ye	ear-to-Date ▼		R Ded	uctio	n (\$1)	02 ·	30 Bi-W	(ookly)			
	Other (specify)		4615.20		I Dou	uone	ση (φη	52.0	50 Di W	cony)			
	ull Name of Individual (Last, First, Middle Initial) or BUSBEE, NATHANAEL, , ,	r Full Org	anization Name		Date of	Re	ceipt						
N	lailing Address 122 ROSEWOOD AVE			1	™ M 11	1	28		/ Y	y y 2022	Ŷ		
C	5	tate	Zip Code		Trans	acti	on ID	: PI	R25788	267670	43		
_	CATONSVILLE	ИD	21228-4938	A	mount	of	Each	Rec	ceipt th	is Perio	d		
	EC ID number of contributing deral political committee.	;			115.38 Memo Item								
	lame of Employer (for Individual) nited HealthCare Services Inc		pation (for Individual) us Process										
F	Agg Primary General Other (specify) ▼	gregate Ye	ear-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)									
	ull Name of Individual (Last, First, Middle Initial) or MILLER, TRACI, , ,	r Full Org	anization Name		ate of	Re	ceipt						
N	lailing Address 729 PINE TRAIL				^M 11	/	28		/ Y	2022	Y		
	,	tate	Zip Code		Trans	acti	ion ID	: P	R25788	3299670	43		
_	ARNOLD	MD	21012-1628	A	mount	of	Each	Rec	ceipt th	is Perio	d		
	EC ID number of contributing deral political committee.	;					,		9	173	3.07		
	ame of Employer (for Individual)	· · ·	ation (for Individual)		Μ	emo	Item						
	Optum Services, Inc	VP Me	ed Clin Ops	_									
Г	Primary General Age	gregate Ye	ear-to-Date 🔻				· · · / • -	7 0					
	Other (specify)		1384.56	P/	R Dea	uctio	on (\$5	7.6	9 Bi-We	екіу)			
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	y information copied from such Reports and Sta for commercial purposes, other than using the r											
$\overline{\ }$	NAME OF COMMITTEE (In Full)											
	UnitedHealth Group Incorporated	I PAC (L	InitedHealth Group PA	AC)								
A.	Full Name of Individual (Last, First, Middle Initia ELLIS, DENNIS, , ,	ll) or Full O	rganization Name		Date of	Re	ceipt					
	Mailing Address 6001 DRIPPING SPRINGS				M M	/	D D D 28	/ Y	y y 2022	Y		
	City FRISCO	State TX	Zip Code 75034-4039						20916704	3		
	FEC ID number of contributing		73034-4033	_	Amount	of	Each R	eceipt th	is Period	_		
	federal political committee.	C			<u> </u>		ap I	1	49.	14		
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) KA VP SIs Acct Mgt		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 393.12		P/R Ded	uctio	on (\$16.	38 Bi-We	ekly)			
в.	Full Name of Individual (Last, First, Middle Initia HAREWOOD, JUNIOR, , ,	ll) or Full Oi	rganization Name		Date of	Re	ceipt					
	Mailing Address 223 MOUNT VERNON COVE				M M 11	/	D D 28	/ Y	y y 2022	Y		
	City SANDY SPRINGS	State GA	Zip Code						3156704	3		
			30328-4130		Amount	of	Each R	eceipt th	is Period	_		
	FEC ID number of contributing federal political committee.	С			Ļ.		-	-	576.	90		
	Name of Employer (for Individual) United HealthCare Services Inc		ıpation (for Individual) Plan CEO		Me	emo	Item					
	Receipt For:	Aggregate	Year-to-Date 🔻									
	Other (specify) ▼		4615.20		P/R Dedu	uctic	on (\$192	2.30 Bi-W	eekly)			
с.	Full Name of Individual (Last, First, Middle Initia	ll) or Full Oi	rganization Name		Date of	Re	ceipt					
	Mailing Address 20039 E BRIGHTWAY				M M 11	/	D D D 28	/ Y	y y 2022	Y		
	City MOKENA	State IL	Zip Code 60448-1404						4766704 is Period	3		
	FEC ID number of contributing federal political committee.	С					,		28.	86		
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Reg Dir Brkr SIs		Me	emo	ltem					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.88		P/R Ded	uctio	on (\$9.6	2 Bi-Wee	ekly)			
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\setminus	NAME OF COMMITTEE (In Full)												
\geq	UnitedHealth Group Incorporate	ed PAC (l	Uni	tedHealth Group PA	(C)								
Α.	Full Name of Individual (Last, First, Middle Init MCBRIEN, ROBERT, , ,	ial) or Full O	Drgar	nization Name		Date c	of Re	eceipt	t				
	Mailing Address 305 HONEYBEE DRIVE					M N	/		28	/ Y		022	Y
	City	State		Zip Code		Tran	sact	ion II	D :	PR2601	1489	96704	3
	WEXFORD	PA		15090-8699	_	Amour	nt of	Each	۱R	eceipt th	nis F	^o eriod	
	FEC ID number of contributing federal political committee.	С						7	Ξ		_	42.1	12
	Name of Employer (for Individual) United HealthCare Services Inc			ion (for Individual) Cnslt		N	lemo	o Iten	n				
	Receipt For:		-	r-to-Date ▼									
	Primary General Other (specify) ▼		7	336.96		P/R Dec	ducti	ion (\$	14.0	04 Bi-W	eekl	y)	
В.	Full Name of Individual (Last, First, Middle Init LESTER, SHAUNA, , ,	ial) or Full O	Orgar	nization Name		Date c	of Re	eceipt	t				
	Mailing Address 20550 PARKVIEW LANE					1 <u>1</u>	/		28	/ Y) 22	Y
	City	State		Zip Code		Trans	sact	ion II) : I	PR2601	1547	76704:	3
	SHOREWOOD	MN		55331-4529		Amour	nt of	Each	ו R	eceipt th	nis F	Period	
	FEC ID number of contributing federal political committee.	С				<u> </u>		-	_	і	_	42.1	2
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) Mgmt		N	lemo	o Iten	n				
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$14.04 Bi-Weekly)										
<u></u>	Full Name of Individual (Last, First, Middle Init FRIAS, LORRAINE, , ,	ial) or Full O	Drgar	nization Name		Date c	of Re	eceipt					
	Mailing Address 2116 STANFORD AVENUE					M 11	/		28	/ Y		022 [°]	Y
	City	State		Zip Code		Tran	sact	tion I	D :	PR2601	159	06704	3
	SAINT PAUL	MN		55105-1219	_	Amour	nt of	Each	۱R	eceipt th	nis F	^v eriod	
	FEC ID number of contributing federal political committee.	С				<u> </u>		y	_	, <u>,</u>	_	115.3	38
	Name of Employer (for Individual)	Occi	upat	ion (for Individual)		N	lemo	o Iten	n				
	United HealthCare Services Inc	VP (Com	m									
	Receipt For:	Aggregate	Yea	r-to-Date ▼									
	Primary General Other (specify)		-	923.04	1	P/R Deo	ducti	ion (\$	38.	46 Bi-W	eekl	у)	
s	UBTOTAL of Receipts This Page (optional)			······	 		1	,		5	-	199.6	62
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements ma g the name and a	ay not be sold or used by any plates of any political committee	person for the purpose of soliciting contributions be to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middl A. KIMES, CARRIE, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1917 SW 27TH STREET			11 28 2022							
City TOPEKA	State KS	Zip Code 66611-1643	Transaction ID : PR2601162067043 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		57.69							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.52	P/R Deduction (\$19.23 Bi-Weekly)							
Full Name of Individual (Last, First, Middl B. PERERA, SUSAN, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1201 UNITY AVE N	Otata	Zin Oode	11 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
City GOLDEN VALLEY	State MN	Zip Code 55422-4735	Transaction ID : PR2601168867043 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		115.38							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) buty Gen Counsel	Memo Item							
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middl C. ESCHERJR, DELBERT, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 885 SUGAR HILL DRIVE			11 28 2022							
City MANCHESTER	State MO	Zip Code 63021-6665	Transaction ID : PR2601171067043 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		42.09							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) led Dir	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 336.72	P/R Deduction (\$14.03 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optiona			215.16							
TOTAL This Period (last page this line num	ber only)									

SCHEDULE A (FEC Form 3X) DEOEIDTO

Use separate schedule(s)

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		Use separate schedule(s)				(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12					
Any information copied from such Reports and													
or for commercial purposes, other than using t	the name and a	ddress of any political committee	e to sol	icit cor	ntrib	utions	from suc	h commit	tee.				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle HUDSON, JEFFREY, , ,	Initial) or Full C	organization Name		Date of	Re	ceipt							
Mailing Address 1536 BREWSTER DRIVE				м м 11	/	28		y y 2022	Y				
City CARROLLTON	State TX	Zip Code 75010-6444	A					70306704 nis Perioc					
FEC ID number of contributing federal political committee.	C						-	42	.00				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Health Plan Operations		Me	emo	Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P/	R Dedi	uctio	on (\$14	.00 Bi-W	eekly)					
Full Name of Individual (Last, First, Middle B. MCBEATH, ROBERT, , ,	Initial) or Full C	organization Name		Date of	Re	ceipt							
Mailing Address 2537 RED ARROW DRIVE				M M 11	1	28		2022	Y				
City LAS VEGAS	State NV	Zip Code 89135-1628						70896704 nis Perioc					
FEC ID number of contributing federal political committee.	С							576	_				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) s Seg Chief Med Off		Me	emo	Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	ggregate Year-to-Date ▼ 4615.20				P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. ANDERSONHUTCHINS, LEIGH		organization Name		Date of	Re	ceipt							
Mailing Address 16786 RAINY VALE AVE				^M 11	/	28		y y 2022	Y				
City RIVERSIDE	State CA	Zip Code 92503-6535	A					7178670					
FEC ID number of contributing federal political committee.	С					,	. ,	115	_				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual)) Med Grp Non Physn		Me	ema	ltem							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 923.04] P/	'R Ded	uctio	on (\$38	3.46 Bi-W	eekly)					
SUBTOTAL of Receipts This Page (optional).						, .	9	734.	28				
TOTAL This Period (last page this line number	er only)					, .							

Use separate schedule(s)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12							
			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)	prated PAC (I	JnitedHealth Group PA	NC)							
Full Name of Individual (Last, First, Mide DAVIS, KELLY, , ,	dle Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 2285 N POWHATAN ST			11 / 28 / Y Y Y Y Y 2022							
City ARLINGTON	State VA	Zip Code 22205-2113	Transaction ID : PR2605734267043							
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2307.60	P/R Deduction (\$96.15 Bi-Weekly)							
Full Name of Individual (Last, First, Mide LEIGHPITSTICK, EMILY, , ,	dle Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 17307 97TH DR SE			11 28 2022							
City SNOHOMISH	State WA	Zip Code 98296-8168	Transaction ID : PR2605735267043 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		115.38							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Ntwk Contrctng	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Mido C. MALONE, TRACY, , ,	dle Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 900 S 22ND ST			11 / D D / Y Y Y Y Y 28 2022							
City ARLINGTON	State VA	Zip Code 22202-2625	Transaction ID : PR2605736967043 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		576.90							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P External Affs	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (option	al)		980.73							
TOTAL This Period (last page this line nu	mber only)									

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IT.			Use separate schedule(s)				(check only one)							
11			for each category of the Detailed Summary Page	×			11b	11c	12					
Ar	y information copied from such Reports and SI for commercial purposes, other than using the	atements ma	ay not be sold or used by any p ddress of any political committe	erson for	the p the p	ourp trib	14 Dose of utions	15 f soliciting from sucl	d contribu	tions				
<u>.</u>	NAME OF COMMITTEE (In Full)													
\rangle	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group P	AC)										
A.	Full Name of Individual (Last, First, Middle Init PETERSON, ERIC, , ,	ial) or Full O	rganization Name	Da	ite of	Re	ceipt							
	Mailing Address 7757 BECK LN				11 ^M	/	D 28		Y Y 2022	Y				
	City ZIONSVILLE	State IN	Zip Code 46077-9060						75046704 his Period	3				
	FEC ID number of contributing federal political committee.	С					.	-	115.	38				
	Name of Employer (for Individual) Optum Services, Inc	Occi VP I	upation (for Individual) Mktg		Me	mo	Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R	Dedu	ictio	on (\$38	.46 Bi-We	eekly)					
в.	Full Name of Individual (Last, First, Middle Init SONSTEGARD, NATHAN, , ,	ial) or Full O	rganization Name	Da	ite of	Re	ceipt							
	Mailing Address 4216 ZENITH AVE S	State	Zip Code	- L	11	/	28		ү ү 2022					
	MINNEAPOLIS	MN	55410-1413						34446704 his Period	3				
	FEC ID number of contributing federal political committee.	С						42.	12					
	Name of Employer (for Individual) Optum Services, Inc	Occi VP		Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R	P/R Deduction (\$14.04 Bi-Weekly)										
C.	Full Name of Individual (Last, First, Middle Init RAWLINSON, DORIEN, , ,	ial) or Full O	rganization Name	Da	te of	Re	ceipt							
	Mailing Address 4795 W RED ROCK DRIVE		7.0.1	- L	11 ^M	1	28		y y 2022					
	City LARKSPUR	State CO	Zip Code 80118-8413				-		85466704 his Period	.3				
	FEC ID number of contributing federal political committee.	С			_		,	7	42.	12				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Nwk Contrctng		Me	emo	ltem							
	Receipt For: Primary General Other (specify)	Aggregate	regate Year-to-Date ▼ 336.96				P/R Deduction (\$14.04 Bi-Weekly)							
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number of						,	,	199.0	62				

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)

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			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
	y information copied from such Reports and Sta for commercial purposes, other than using the			erson for the purpose of soliciting contributions						
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (I	UnitedHealth Group PA	.C)						
Α.	Full Name of Individual (Last, First, Middle Initi FICKER, MARK, , ,	al) or Full C	Drganization Name	Date of Receipt						
	Mailing Address 945 MINERS RIDGE COURT			11 28 / Y Y Y Y 2022						
	City INCLINE VILLAGE	State NV	Zip Code 89451-8801	Transaction ID : PR2607806767043						
	FEC ID number of contributing federal political committee.	C	09401-0001	Amount of Each Receipt this Period						
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) Ops	Memo Item						
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)						
в.	Full Name of Individual (Last, First, Middle Initi WELDON, BRIAN, , ,	al) or Full C	Drganization Name	Date of Receipt						
	Mailing Address 1155 MOERS DRIVE			11 28 2022						
	City CHASKA	State MN	Zip Code 55318-4629	Transaction ID : PR2608055567043 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		115.38						
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) A VP	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Initi LANDO, LISA, , ,	al) or Full C	Drganization Name	Date of Receipt						
	Mailing Address 60 PINEAPPLE STREET APT 3J			11 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
	City BROOKLYN	State NY	Zip Code 11201-6839	Transaction ID : PR2608059567043						
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period						
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Gen Mgmt	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	923.04	P/R Deduction (\$38.46 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)		•••••	346.14						
т	OTAL This Period (last page this line number o	nly)								

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpor	ated PAC (UnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle SAVOIE, DANA, , ,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 8756 STONEFIELD LN			11 28 2022						
City CHANHASSEN	State MN	Zip Code 55317-4713	Transaction ID : PR2609809567043						
		00011 4110	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		230.76						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Ops	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1846.08	P/R Deduction (\$76.92 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. WRIGHT, NORMAN, , ,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 26335 N 104TH WAY			M M / D D / Y Y Y Y 11 28 2022						
City	State AZ	Zip Code	Transaction ID : PR2609812367043						
SCOTTSDALE	AZ	85255-8009	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		576.90						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) erprise Health Equity	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	1						
Other (specify)		4615.20	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. PATEL, KETAN, , ,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 1811 PITCAIRN DRIVE			11 28 2022						
City COSTA MESA	State CA	Zip Code 92626-4702	Transaction ID : PR2612523367043 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		115.38						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Pharm Ops	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional))		923.04						
TOTAL This Period (last page this line numb	per only)								

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	11b 11c	12				
Any information copied from such Reports ar or for commercial purposes, other than using									
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle STEVENS, J, , ,	e Initial) or Full C	rganization Name	Date of Re	ceipt					
Mailing Address 93 CONSERVATION RO	AD		M M /	28 / Y	y y 2022	Ŷ			
City SUFFIELD	State CT	Zip Code 06078-2442		ion ID : PR2612 Each Receipt th					
FEC ID number of contributing federal political committee.	С				115.3	3			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual))ir Tech Prod Mgmt	Memo) Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R Deducti	on (\$38.46 Bi-Wo	eekly)				
Full Name of Individual (Last, First, Middle B. BAKER, MICHAEL, , ,	e Initial) or Full C	rganization Name	Date of Re	eceipt					
Mailing Address 2383 HIGHOVER TRAIL			M M /	28 / Y	2022	Ý			
City CHANHASSEN	State MN	Zip Code 55317-4744		ion ID : PR2612					
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment COO	Memo) Item					
Receipt For:	Aggregate	Year-to-Date ▼	1						
Other (specify) ▼		4615.20	P/R Deduction	on (\$192.30 Bi-V	/eekly)				
Full Name of Individual (Last, First, Middle C. SHILTS, MATTHEW, , ,	e Initial) or Full C	rganization Name	Date of Re	eceipt					
Mailing Address 10 WOODLAND ROAD	01-1-		11 /	28	2022				
City EDINA	State MN	Zip Code 55424-1631		ion ID : PR2612 Each Receipt th					
FEC ID number of contributing federal political committee.	С			y y	138.4	5			
Optum Services, Inc C		upation (for Individual) If Tech Off	Memo	o Item					
Receipt For: Primary General Other (specify)	Year-to-Date ▼ 1107.60	P/R Deducti	on (\$46.15 Bi-W	eekly)					
SUBTOTAL of Receipts This Page (optional)			, <u>,</u>	830.73	3			
TOTAL This Period (last page this line num	ber only)								

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle RIVERS, CAROLINE, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 6368 TIMBER TRACE			M M / D D / Y Y Y Y 11 28 2022							
City BROWNSBURG	State IN	Zip Code 46112-8641	Transaction ID : PR2612533767043 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		42.03							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) c Dir	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.24	P/R Deduction (\$14.01 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. KIECKHAFER, REGINA, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 28 BINNACLE LANE			M M / D D / Y Y Y Y 11 28 2022							
City	State ME	Zip Code	Transaction ID : PR2612536267043							
KENNEBUNKPORT	IVIE	04046-5434	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		42.12							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. HANSEN, KIMBERLY, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 6227 UPLAND LN N			M M / D D / Y Y Y Y 11 28 2022							
City MAPLE GROVE	State MN	Zip Code 55311-4003	Transaction ID : PR2613383267043 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		42.12							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Ntwk Prgms	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			126.27							
TOTAL This Period (last page this line numb	er only)	······								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
or for	commercial purposes, other than using the			erson for the purpose of soliciting contributions to solicit contributions from such committee.						
	ME OF COMMITTEE (In Full) hitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	AC)						
	Name of Individual (Last, First, Middle Initia REJCI, ANDREW, , ,	rganization Name	Date of Receipt							
	ling Address 19880 LAKEVIEW AVENUE		11 28 2022							
City	CELSIOR	State MN	Zip Code 55331-9352	Transaction ID : PR2614310767043						
FEC	C ID number of contributing eral political committee.	С		Amount of Each Receipt this Period						
	ne of Employer (for Individual) um Services, Inc		upation (for Individual) Comm	Memo Item						
Rec	eeipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 673.92	P/R Deduction (\$28.08 Bi-Weekly)						
	Name of Individual (Last, First, Middle Initia JRKHOLDER, CHAD, , ,	Date of Receipt								
	ling Address 2423 DUBONNET DRIVE			11 28 2022						
City MA	CUNGIE	State PA	Zip Code 18062-8857	Transaction ID : PR2615073467043 Amount of Each Receipt this Period						
	C ID number of contributing eral political committee.	С		576.90						
	ne of Employer (for Individual) um Services, Inc		upation (for Individual) Ops	Memo Item						
Rec	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)						
	Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name	Date of Receipt						
	ling Address 12439 GLENLIVET LOWLAND			11 28 2022						
City	, S VEGAS	State NV	Zip Code 89138-6244	Transaction ID : PR2615075167043						
FEC	C ID number of contributing eral political committee.	С		Amount of Each Receipt this Period						
	ne of Employer (for Individual) tum Services, Inc		upation (for Individual) Med Dir/CMO	Memo Item						
•	Primary General Other (specify)		Year-to-Date ▼ 461.52	P/R Deduction (\$19.23 Bi-Weekly)						
SUBT	OTAL of Receipts This Page (optional)			718.83						
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			Use separate schedule(s)	(check only one)								
			for each category of the Detailed Summary Page		× 11a		11b	11c	12			
	y information copied from such Reports and Sta for commercial purposes, other than using the n											
$\overline{)}$	NAME OF COMMITTEE (In Full)											
	UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	NC)								
A.	Full Name of Individual (Last, First, Middle Initia SOLOMON, RANDALL, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt					
	Mailing Address 760 HAIGHT STREET				M M 11	/	28) / Y	y y 2022	Y		
		State CA	Zip Code					PR26156				
	SAN FRANCISCO		94117-3317	_	Amount	of	Each R	leceipt th	is Period			
	FEC ID number of contributing federal political committee.	С			Ľ.	_			115.	38		
	Name of Employer (for Individual) Optum Services, Inc		ıpation (for Individual) ehvrl Med Dir		Me	emc	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04		P/R Dedi	ucti	on (\$38.	.46 Bi-We	eekly)			
в.	Full Name of Individual (Last, First, Middle Initia BIRNBAUM, MICHAEL, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt					
	Mailing Address 55 DEAN STREET	-1			M M 11	1	28		ү ү 2022	Y		
	City	State NY	Zip Code 11201-6245					PR26156				
	BROOKLYN		_	Amount	of	Each R	leceipt th	is Period				
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) VP HIthcare Econ				576.90						
	Name of Employer (for Individual) United HealthCare Services Inc					emc	Item					
	Receipt For:	Aggregate	Year-to-Date 🔻		-							
	Other (specify) ▼		4615.20	F	P/R Dedu	uctio	on (\$192	2.30 Bi-W	(eekly)			
с.	Full Name of Individual (Last, First, Middle Initia SCALLY, MICHAEL, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt					
	Mailing Address 601 PLYMOUTH RD				м м 11	/	28		ү ү 2022	Y		
	City BALTIMORE	State MD	Zip Code 21229-2213					PR2615				
	FEC ID number of contributing federal political committee.	С					,		42.			
Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) Dir Bus Process				Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 336.96		P/R Ded	ucti	on (\$14.	.04 Bi-We	eekly)			
s	UBTOTAL of Receipts This Page (optional)		••••••				, .	. ,	734.	40		
т	OTAL This Period (last page this line number or	ıly)	••••••	-			-					

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	Use separate schedule(s)	(che	(check only one)						
I EWIZED RECEIPIS		for each category of the Detailed Summary Page	×	11a		11b	11c	12	
Any information copied from such Reports and									
or for commercial purposes, other than using t	he name and a	ddress of any political committee	e to soli	icit con	ntrib	utions	from suc	h committ	ee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle KIRBY, WESLEY, , ,	Initial) or Full C	organization Name	C	Date of	Re	ceipt			
Mailing Address 414616 E 1069 RD				м м 11	/	28	D / Y	y y 2022	Y
City COUNCIL HILL	State OK	Zip Code 74428-5000	A					95706704 his Period	3
FEC ID number of contributing federal political committee.	C			_				42.	12
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) nager, Advisory Svcs		Me	emo	Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.96	P/I	R Dedu	uctio	on (\$14	.04 Bi-We	eekly)	
Full Name of Individual (Last, First, Middle OSTRANDER, ROBERT, , ,	Initial) or Full C	organization Name		ate of	Re	ceipt			
Mailing Address 18 BARTON COURT				™ 11	/	28		2022	Y
City PLEASANT HILL	State CA	Zip Code 94523-2029						96066704	3
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period						
Name of Employer (for Individual) Optum Services, Inc	Occ VP		Me	emo	Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/I	R Dedu	uctic	on (\$38	.46 Bi-We	eekly)	
Full Name of Individual (Last, First, Middle C. LONGORIA, PATRICIA, , ,	Initial) or Full C	organization Name		ate of	Re	ceipt			
Mailing Address 906 BLUEBIRD				[™] 11	/	28		y y 2022	Y
City MANCHACA	State TX	Zip Code 78652-4154	A			-		36116704 nis Period	3
FEC ID number of contributing federal political committee.	С		1		_	y .	7	42.	12
Name of Employer (for Individual) United HealthCare Services Inc	Occ Dir (Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 336.96	P/	R Dedi	uctio	on (\$14	.04 Bi-W	eekly)	
SUBTOTAL of Receipts This Page (optional).			. [,		199.	62
TOTAL This Period (last page this line number	er only)								

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		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
			e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Inco	rporated PAC (l	JnitedHealth Group P	4C)						
Full Name of Individual (Last, First, TRAW, KEVIN, , ,	Middle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 518 13TH ST			11 / D D / Y Y Y Y 128 2022						
City HUNTINGTON BEACH	State CA	Zip Code 92648-4038	Transaction ID : PR2617365667043 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		115.38						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, B. BAUBLIT, MICHAEL, , ,	Middle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2201 RIDGEWIND			11 28 / Y Y Y Y Y 2022						
City	State FL	Zip Code	Transaction ID : PR2617927167043						
WINDERMERE		34786-5823	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		42.12						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Cust Strategy	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, C. MIKICH, MICHAEL, , ,	Middle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 10004 CHARLEMO	1		11 / D D / Y Y Y Y 2022						
City LAS VEGAS	State NV	Zip Code 89134-6703	Transaction ID : PR2617928767043 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		28.83						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.64	P/R Deduction (\$9.61 Bi-Weekly)						
SUBTOTAL of Receipts This Page (or	otional)		186.33						
TOTAL This Period (last page this line	e number only)								

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ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)						
			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 □						
	y information copied from such Reports and St for commercial purposes, other than using the									
$\left[\right]$	NAME OF COMMITTEE (In Full)									
	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group PA	NC)						
Α.	Full Name of Individual (Last, First, Middle Initi MISKELLCLOUTIER, DOMINIQUE, , ,	ial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 12101 STRETFORD FOREST	COURT		M M / D D / Y Y Y Y 11 28 2022						
	City BRISTOW	State VA	Zip Code 20136-2078	Transaction ID : PR2618984967043 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		42.12						
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Clin Ops	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)						
В.	Full Name of Individual (Last, First, Middle Initi DOMB, JULIET, , ,	ial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 116 CHURCH ST			11 28 / Y Y Y Y 2022						
	City	State	Zip Code	Transaction ID : PR2618988767043						
	WATERTOWN	MA	02472-4721	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		288.45						
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
	Receipt For:	Aggregate	Year-to-Date ▼	-						
	Primary General Other (specify) ▼		2307.60	P/R Deduction (\$96.15 Bi-Weekly)						
С.	Full Name of Individual (Last, First, Middle Initi CONNOR, MARSHA, , ,	ial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 3845 WEST 143RD TERRACE			11 D D / Y Y Y Y 128 2022						
	City LEAWOOD	State KS	Zip Code 66224-3911	Transaction ID : PR2618994367043						
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period						
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) n Exec Dir	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)						
⊢	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number of			372.69						

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PAGE 154 OF

ITEMIZED RECEIPTS			Use separate schedule(s)	(che	(check only one)						
11			for each category of the Detailed Summary Page	×	11a 13		11b	11c 15		12 16	17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any p ddress of any political committed	erson f e to so	or the	pur ntrib	pose of	soliciting	g cont	tributi	ons
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group PA	AC)							
A.	Full Name of Individual (Last, First, Middle Initi BROWN, ROGER, , ,	ial) or Full O	rganization Name		Date of	f Re	ceipt				
	Mailing Address 512 EAST STATE AVE				^M 11	/	28	/ Y	Y 202	22	Y
	City PHOENIX	State AZ	Zip Code 85020-4940					PR2622 eceipt th			\$
	FEC ID number of contributing federal political committee.	С							!	576.9	0
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev		Μ	emc	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20] P.	/R Ded	uctio	on (\$192	2.30 Bi-V	Veekly	y)	
в.	Full Name of Individual (Last, First, Middle Initi OLSON, MARK, , ,	ial) or Full O	rganization Name		Date of	f Re	ceipt				
	Mailing Address 848 S CORONA ST	01-1-	The Oak		M M 11	1	28	/ Y	202	22	Y
	City DENVER	State CO	Zip Code 80209-4410					PR2622			
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP SIs Acct Mgmt		М	emc	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P /	/R Ded	uctio	on (\$38.4	46 Bi-We	eekly))	
с.	Full Name of Individual (Last, First, Middle Initi TROCINSKI, CAROL, , ,	ial) or Full O	rganization Name		Date of	f Re	ceipt				
	Mailing Address 1030 ROBIN COURT				M M 11	/	D D D 28	/ Y	202	22 22	Y
	City WEST SALEM	State WI	Zip Code 54669-1919					PR2623 eceipt th			}
	FEC ID number of contributing federal political committee.	С					y .	. y		42.1	2
	Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Dir F	upation (for Individual) Regl Affs		M	emo	tem				
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 336.96	P	/R Ded	lucti	on (\$14.	04 Bi-W	eekly))	
s	UBTOTAL of Receipts This Page (optional)		······)				5	y		734.4(0
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PAGE 155 OF

	Use separate schedule(s)	(check o	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11b	11c	12	47		
Any information copied from such Reports and or for commercial purposes, other than using the										
NAME OF COMMITTEE (In Full)								-		
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle I MOURAS, DENNIS, , ,	nitial) or Full C	rganization Name	Date	of Re	eceipt					
Mailing Address 5942 BRIARWOOD COURT			M 11		D D D 28	/ Y	ү ү 2022	Y		
City CLARKSTON	State MI	Zip Code 48346-3176					0296704 is Period	3		
FEC ID number of contributing federal political committee.	С				-y 1		576.9	90		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Memo	o Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R De	educti	ion (\$192	2.30 Bi-W	′eekly)			
Full Name of Individual (Last, First, Middle I CAMP, MELISSA, , ,	nitial) or Full C	rganization Name	Date	of Re	eceipt					
Mailing Address 124 WOODFIELD BLVD			M 11		28	/ Y	y y 2022	Y		
	State NY	Zip Code			-		3686704:	3		
MECHANICVILLE		12118-3038	Amou	int of	Each R	eceipt th	is Period			
FEC ID number of contributing federal political committee.	C	42.12								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Ntwk Contrctng		Memo	o Item					
Receipt For:	Aggregate	Year-to-Date V								
Other (specify) ▼		336.96	P/R De	educti	on (\$14.)	04 Bi-We	ekly)			
Full Name of Individual (Last, First, Middle I MULES, REBECCA, , ,	nitial) or Full C	rganization Name	Date	of Re	eceipt					
Mailing Address 1136 BATTERY AVENUE			M 11		28		2022 Y			
City BALTIMORE	State MD	Zip Code 21230-4112					14266704 is Period	3		
FEC ID number of contributing federal political committee.	С				y	9	576.9	90		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs		Memo	o Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4615.20	P/R De	educti	ion (\$192	2.30 Bi-W	/eekly)			
SUBTOTAL of Receipts This Page (optional)					,	,	1195.9	92		
TOTAL This Period (last page this line number	er only)									

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	Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle A. SINGH, KANWAR, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 10422 VERDI COURT			M M / D D / Y Y Y Y Y 11 28 2022						
City ELLICOTT CITY	State MD	Zip Code 21042-2586	Transaction ID : PR2624445967043 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		42.12						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) e Practitioner 3	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. STALLWOOD, GREGG, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 4842 JUNIPER DR			11 / D D / Y Y Y Y Y 28 2022						
City PALM HARBOR	State FL	Zip Code 34685-2688	Transaction ID : PR2625499067043						
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Cust Svs	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle COLLETTE, CHRISTOPHER, ,		organization Name	Date of Receipt						
Mailing Address 4776 MANITOU ROAD			11 28 2022						
City EXCELSIOR	State MN	Zip Code 55331-9400	Transaction ID : PR2625499567043 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		576.90						
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	SVF	upation (for Individual) 9 UnitedHlth Grp	Memo Item						
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			1195.92						
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SCHEDULE A (FEC Form 3X) DEOEIDTO

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	y information copied from such Reports and Sta for commercial purposes, other than using the n													
	NAME OF COMMITTEE (In Full)		address of any political comm			libulions	nom suc							
\rangle	UnitedHealth Group Incorporated	I PAC (l	UnitedHealth Group	PAC)										
A.	Full Name of Individual (Last, First, Middle Initia SMITH, LISA, , ,	l) or Full O	Organization Name		Date of Receipt									
	Mailing Address 5040 INTERLACHEN BLUFF				11 28 2022									
	City EDINA	State MN	Zip Code 55436-1360		Transaction ID : PR2625503767043 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С				-		576.9	90					
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) P Gen Mgmt		Me	mo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20		P/R Dedu	uction (\$1	92.30 Bi-V	Veekly)						
в.	Full Name of Individual (Last, First, Middle Initia LIVERS, JEFFREY, , ,	l) or Full O	Drganization Name		Date of	Receipt								
	Mailing Address 402 DERBY COURT	1-			11 28 2022 Transaction ID : PR2626346067043									
	City MEBANE	State NC	Zip Code 27302-9452	_			: PR2626 Receipt th		3					
	FEC ID number of contributing federal political committee.	С				-	1 1	42.	12					
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) ec Dir		Me	mo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.96		P/R Deduction (\$14.04 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initia TERRAL, RECCA, , ,	l) or Full O	Drganization Name		Date of	Receipt								
	Mailing Address 6828 SIMMONS RD				M M 11	/ D 28		2022	Y					
	City NORTH RICHLAND HILLS	State TX	Zip Code 76182-4259				: PR2626 Receipt th	35966704 nis Period	3					
	FEC ID number of contributing federal political committee.	С				9	, ,	42.	12					
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 336.96		P/R Dedu	uction (\$1	4.04 Bi-W	eekly)						
s	UBTOTAL of Receipts This Page (optional)							661.′	4					
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SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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	y information copied from such Reports and Sta for commercial purposes, other than using the n											
$\overline{)}$	NAME OF COMMITTEE (In Full)											
$\Big\rangle$	UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	C)								
Α.	Full Name of Individual (Last, First, Middle Initia BONAR, BRUCE, , ,	l) or Full Or	rganization Name	Date of Receipt								
	Mailing Address 1362 DOS HERMANOS GLEN			11 28 2022								
	City ESCONDIDO	State CA	Zip Code 92027-1270		90686704 is Period							
	FEC ID number of contributing federal political committee.	С			<u> </u>				42.	12		
	Name of Employer (for Individual) Optum Services, Inc		ipation (for Individual) Software Engineering		Me	emc	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.96		P/R Dedu	uctio	on (\$14.	.04 Bi-We	ekly)			
в.	Full Name of Individual (Last, First, Middle Initia SCHENCK, ERIK, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt					
	Mailing Address 18236 DOE TRAIL		Zip Code		11 / 28 / 2022 Transaction ID : PR2627730467043							
	City BRAINERD	State MN	-				PR26277 leceipt th					
	FEC ID number of contributing federal political committee.	С	56401-7987						42.			
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Clin Ops	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$14.04 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initia SCOTT, NICOLE, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt					
	Mailing Address 29039 HOBBLEBUSH				M M 11	1	D D D 28		y y 2022	Y		
	City SAN ANTONIO	State TX	Zip Code 78260-2249					PR26277				
	FEC ID number of contributing federal political committee.	С			<u> </u>		, .	. ,	42.	12		
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) (A VP SIs	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)								
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т	OTAL This Period (last page this line number or	ly)	•••••••	-			-	- 41-				

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12							
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements ma	ay not be sold or used by any pe	13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee							
$\overline{\langle}$	NAME OF COMMITTEE (In Full)										
\rangle	UnitedHealth Group Incorporated	I PAC (l	UnitedHealth Group PA	AC)							
Α.	Full Name of Individual (Last, First, Middle Initia MORRIS, BARBARA, , ,	l) or Full O	Drganization Name	Date of Receipt							
	Mailing Address 1045 SWEET GUM WAY			11 28 2022							
	City MEBANE	State NC	Zip Code 27302-6511	Transaction ID : PR2627735567043 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		42.12							
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Clms	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)							
в.	Full Name of Individual (Last, First, Middle Initia LINDLEY, SHEILA, , ,	l) or Full O	Drganization Name	Date of Receipt							
	Mailing Address 3656 WINDING WOOD LANE			M M / D D / Y Y Y Y Y 11 28 2022							
	City LEXINGTON	State KY	Zip Code 40515-1283	Transaction ID : PR2627739867043 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		41.70							
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) d Dir	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 333.60	P/R Deduction (\$13.90 Bi-Weekly)							
C.	Full Name of Individual (Last, First, Middle Initia DUKART, JENNIFER, , ,	l) or Full O	Drganization Name	Date of Receipt							
	Mailing Address 2541 DRESDEN LANE	-		11 / D D / Y Y Y Y Y 28 2022							
	City GOLDEN VALLEY	State MN	Zip Code 55422-3617	Transaction ID : PR2627749167043 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		576.90							
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Segment Gen Counsel	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)			660.72							
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SCHEDULE A (FEC Form 3X) DEAEIDTA

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	y information copied from such Reports and Sta for commercial purposes, other than using the n												
<u> </u>	NAME OF COMMITTEE (In Full)												
\rangle	UnitedHealth Group Incorporated	I PAC (L	InitedHealth Group PA	ſC)									
A.	Full Name of Individual (Last, First, Middle Initia NAKAJIMA, KENICHI, , ,	l) or Full Or	ganization Name		Date of Receipt								
	Mailing Address 15822 BELFAST LANE				11 28 2022								
	City HUNTINGTON BEACH	State CA	Zip Code 92647-3104	_				PR26283 eceipt th					
	FEC ID number of contributing federal political committee.	С						-	10.	74			
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) ir Act Svs		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 242.82	F	P/R Dedu	uctio	on (\$3.5	8 Bi-Wee	ekly)				
B.	Full Name of Individual (Last, First, Middle Initia PARIS, KATHERINE, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt						
	Mailing Address 17365 62ND AVE N	1			11 / D D / Y Y Y Y Y 2022								
	City MAPLE GROVE	State MN	Zip Code 55311-6405	-			-	PR26283		-			
	FEC ID number of contributing federal political committee.	С			Amount	U		eceipt th	340.	_			
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Govt Affs	_	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ , 2273.04	P/R Deduction (\$113.46 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initia SHJERVE, NICHOLAS, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt						
	Mailing Address 12126 94TH AVE N				M M 11	/	28	/ Y	y y 2022	Y			
	City MAPLE GROVE	State MN	Zip Code 55369-7154	_				PR26283					
	FEC ID number of contributing federal political committee.	С			<u> </u>		y :	9	120.	18			
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) ssc Gen Counsel	Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 919.78	F	P/R Dedu	uctio	on (\$40.	.06 Bi-We	eekly)				
s	UBTOTAL of Receipts This Page (optional)						, ,		471.	30			
т	OTAL This Period (last page this line number on	ly)		-									

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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	EMIZED RECEIPTS	Detailed Summary Page	×	11a		111	b	11c		12				
An	y information copied from such Reports and Sta	tements ma	ay not be sold or used by any pe	erson	13 for the	purr	14 pos		15 solicitinc		16 htribut	17 ons		
	for commercial purposes, other than using the n													
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	C)										
A.	Full Name of Individual (Last, First, Middle Initia MANNING, KIM, , ,	l) or Full O	rganization Name		Date of Receipt									
	Mailing Address 12703 DEER CREEK DRIVE				11 28 / Y Y Y Y 11 28									
	City	State	Zip Code		Trans	acti	ion	ID : F	PR2628	3314	67043	3		
	ОМАНА	NE	68142-1762		Amoun	t of	Ead	ch Re	ceipt th	is Pe	eriod			
	FEC ID number of contributing federal political committee.	С					-		-	_	115.3	8		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg		M	emo) Ite	em						
	Receipt For:		Year-to-Date ▼											
	Primary General Other (specify) ▼		923.04	F	P/R Ded	uctio	on ((\$38.4	6 Bi-We	ekly)			
В.	Full Name of Individual (Last, First, Middle Initia VANDERWALDE, LAMBERT, , ,	l) or Full O	rganization Name		Date of	f Re	eceij	pt						
	Mailing Address 45 AUDUBON CAUSEWAY		11 28 2022											
	City	State	Zip Code		Trans	acti	ion	ID : P	R26283	323	67043			
	LANTANA	FL	33462-4756		Amoun	t of	Ead	ch Re	eceipt th	is Pe	eriod			
	FEC ID number of contributing federal political committee.	С			576.90									
	Name of Employer (for Individual) United HealthCare Services Inc	Occ SVF		Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P	P/R Deduction (\$192.30 Bi-Weekly)									
С.	Full Name of Individual (Last, First, Middle Initia PIAZZA, ELIZABETH, , ,	l) or Full O	rganization Name		Date of	f Re	ecei	pt						
	Mailing Address 117 HILLSIDE LN				M M 11	/		28	/ Y	y 202	22 [°]	Y		
	City	State	Zip Code		Trans	acti	ion	ID : F	PR2628	3341	6704	3		
	POTTSTOWN	PA	19465-8583	_	Amoun	t of	Ead	ch Re	ceipt th	is Pe	eriod			
	FEC ID number of contributing federal political committee.	С			<u> </u>		9		. y	_	115.3	8		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Clin Ops		М	emo	o Ite	əm						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 923.04	F	P/R Deduction (\$38.46 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)									_	807.6	6		
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116	EMIZED RECEIPTS											
			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions								
	NAME OF COMMITTEE (In Full)											
	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group PA	AC)								
Α.	Full Name of Individual (Last, First, Middle Initi KORNHAUSER, MICHAEL, , ,	ial) or Full O	rganization Name	Date of Receipt								
	Mailing Address 180 SUMMIT LANE			11 28 / Y Y Y Y Y								
	City BALA CYNWYD	State PA	Zip Code 19004-2931	Transaction ID : PR2628335767043 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		173.88								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 1ed Dir	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1391.04	P/R Deduction (\$57.96 Bi-Weekly)								
В.	Full Name of Individual (Last, First, Middle Initi MILLER, DEBRA, , ,	ial) or Full O	rganization Name	Date of Receipt								
	Mailing Address 443 FARLEY DR	01-1-		M M / D D / Y Y Y Y 11 28 2022								
	City INDIANAPOLIS	State IN	Zip Code 46214-3572	Transaction ID : PR2628791367043								
	FEC ID number of contributing federal political committee.	С	40214-3372	Amount of Each Receipt this Period								
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Dir Product	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)								
	Full Name of Individual (Last, First, Middle Initi ERICKSON, ALYSSA, , ,	ial) or Full O	rganization Name	Date of Receipt								
	Mailing Address 6430 POLARIS LANE N	01-1-	7.0.1	M M / D D / Y Y Y Y 11 28 2022								
	City MAPLE GROVE	State MN	Zip Code 55311-4320	Transaction ID : PR2628798967043 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		288.45								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Found/Social Resp	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2307.60	P/R Deduction (\$96.15 Bi-Weekly)								
	JBTOTAL of Receipts This Page (optional)			504.45								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

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			Use separate schedule(s)	(check only one)							
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12							
	y information copied from such Reports and Sta for commercial purposes, other than using the r										
	NAME OF COMMITTEE (In Full)		,,,								
	UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	AC)							
Α.	Full Name of Individual (Last, First, Middle Initia THOMPSON, BRUCE, , ,	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 2826 HEDGEROW DRIVE			11 / 28 / Y Y Y Y 2022							
	City DALLAS	State TX	Zip Code 75235-7590	Transaction ID : PR2628833667043 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		576.90							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)							
в.	Full Name of Individual (Last, First, Middle Initia BENJAMIN, GEORGANNE, , ,	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 3439 S MILLSPUR WAY			M M / D D / Y Y Y Y 11 28 2022							
	City BOISE	State ID	Zip Code 83716-8648	Transaction ID : PR2629554167043							
			03710-0040	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		45.00							
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 360.00	P/R Deduction (\$15.00 Bi-Weekly)							
C.	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 2239 HOLLISTON AVE	1		11 / D D / Y Y Y Y Y 2022							
	City ALTADENA	State CA	Zip Code 91001-3213	Transaction ID : PR2632078267043 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С									
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)			737.28							
т	OTAL This Period (last page this line number o	nly)									

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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	EMIZED RECEIPTS	for each category of the Detailed Summary Page	×	11a		11	lb	11c	12			
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	y information copied from such Reports and Stateme for commercial purposes, other than using the name											
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PA	AC (U	InitedHealth Group PA	C)								
A.	Full Name of Individual (Last, First, Middle Initial) or DREFAHL, JASON, , ,	Full Or	ganization Name		Date of Receipt							
	Mailing Address 6104 FOX MEADOW LN		- 1		M M / D D / Y Y Y Y 11 28 2022							
	,	tate	Zip Code							07896704		
	EDINA	1N	55436-1217	_ A	Amour	it of	Ea	ich Re	eceipt th	nis Perioc	l	
	FEC ID number of contributing federal political committee.	;			_		-		-9-	576	.90	
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) ion COO		N	lemo	o Ite	em				
	Receipt For: Agg Primary General Other (specify) ▼	gregate N	Year-to-Date ▼ 4615.20	P/	′R Deo	ducti	ion ((\$192	.30 Bi-V	Veekly)		
в.	Full Name of Individual (Last, First, Middle Initial) or NAPOLITANO, DIANE, , ,	Full Or	ganization Name		Date c	of Re	ecei	ipt				
	Mailing Address 9 CHESTNUT COURT			M M / D D / Y Y Y 11 28 2022							Ŷ	
	3	tate IJ				-			08776704 nis Perioc			
	FEC ID number of contributing federal political committee.				42.12 Memo Item							
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) ir Capability									
	Receipt For: Agg Primary General Other (specify) ▼	pregate N	Year-to-Date ▼ 336.96	P/	P/R Deduction (\$14.04 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initial) or GORSUCH, KIRSTEN, , ,	Full Or	ganization Name		Date c	of Re	ecei	ipt				
	Mailing Address 2780 COUNTRYSIDE DRIVE WES	Г			^M 11	/	Ľ	28	/ Y	2022 Y	Y	
	5	tate /IN	Zip Code							08786704		
		/11 N	55356-9676	A	Amour	it of	Ea	ich Re	eceipt th	nis Perioc		
	FEC ID number of contributing federal political committee.						9		- <u>-</u>	576	90	
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Comm		N	lemo	o Ite	em				
	Receipt For: Agg Primary General Other (specify)	gregate N	Year-to-Date ▼ 576.90	P/	/R Deo	ducti	ion	(\$192	.30 Bi-V	Veekly)		
s	UBTOTAL of Receipts This Page (optional)		····· •				1			1195.	92	
Т	OTAL This Period (last page this line number only)		····· •	ĺ			-		-			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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PAGE 165 OF

			Detailed Summary Page	×	11a	\square	11		_	11c	12				
Δn	y information copied from such Reports and State	ements ma	l av n	ot he sold or used by any pe	erson fr	13 or the i		14 005			15 icitina	16 contribu	17 tions		
	for commercial purposes, other than using the na														
\backslash	NAME OF COMMITTEE (In Full)				<u> </u>										
$\Big)$	UnitedHealth Group Incorporated			-	.C)										
Α.	Full Name of Individual (Last, First, Middle Initial) TUFFIN, MICHAEL, , ,	or Full O	rgan	ization Name		Date of	Re	ecei	pt						
	Mailing Address 5904 ASHBY MANOR PLACE					M M / D D / Y Y Y Y 11 28 2022									
	City	State		Zip Code		Trans	acti	ion	ID : F	PR2	26320	8796704	3		
	ALEXANDRIA	VA		22310-2267	A	mount	of	Ea	ch Re	ece	ipt thi	s Period			
	FEC ID number of contributing federal political committee.	С				576.90									
	Name of Employer (for Individual) United HealthCare Services Inc		•	on (for Individual) vt Affs		Me	emo) Ite	əm						
	Receipt For:	Aggregate	Yea	r-to-Date ▼	\neg										
	Primary General Other (specify) ▼		-	4615.20	P/	R Dedu	uctio	on ((\$192	.30	Bi-Wo	eekly)			
B.	Full Name of Individual (Last, First, Middle Initial) MEENTS, BENJAMIN, , ,	or Full O	rgan	ization Name		Date of	Re	ecei	pt						
	Mailing Address 6531 BIG WOODS DRIVE					M M / D D / Y Y Y Y 11 28 2022									
	City	State		Zip Code		Transaction ID : PR2632088167043									
	MINNETRISTA	MN		55331-2026	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С				115.38									
	Name of Employer (for Individual) Optum Services, Inc	Occi VP		Memo Item											
	Receipt For: µ Primary General Other (specify) ▼	Aggregate	P/1	P/R Deduction (\$38.46 Bi-Weekly)											
c.	Full Name of Individual (Last, First, Middle Initial) BARTEN, TIMOTHY, , ,	or Full O	rgan	ization Name		Date of	Re	ecei	pt						
	Mailing Address 2294 164TH AVE NW					M M	/		28	1	Y	y y 2022	Y		
		State MN		Zip Code								5496704	3		
	ANDOVER			55304-2156		mount	of	Ea	ch Re	ece	ipt thi	s Period			
	FEC ID number of contributing federal political committee.	С				_	_	9		_	9	28.	36		
	Name of Employer (for Individual) Optum Services, Inc			on (for Individual) is Systems Analysis		Me	emo	o Ite	əm						
	Receipt For:	1		r-to-Date ▼	_										
	Primary General Other (specify)	Aggregate	,	230.88	P/	R Ded	uctio	on	(\$9.62	2 Bi	i-Wee	kly)			
s	UBTOTAL of Receipts This Page (optional)											721.	4		
	OTAL This Period (last page this line number only			`	ĺ			,			-, -,-				

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a ☐ 11b ☐ 11c ☐ 12							
Any information copied from such Reports a	Ind Statements ma	ay not be sold or used by any p	13 14 15 16 17 erson for the purpose of soliciting contributions							
	g the name and a	ddress of any political committee	e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middl A. ORRICK, VERONICA, , ,	le Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 2960 CLAREMORE LAN	E		11 28 2022							
City LONG BEACH	State CA	Zip Code 90815-1642	Transaction ID : PR2632858567043 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		42.12							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Prov Data	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)							
Full Name of Individual (Last, First, Middl B. WALTHOUR, JOHN, , ,	le Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 5049 COLFAX AVE S			11 28 2022							
City MINNEAPOLIS	State MN	Zip Code 55419-1145	Transaction ID : PR2632877067043 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		576.90							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middl C. RADEL, TRAVIS, , ,	le Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1890 SANDBAR CIRCLE	·		11 / D D / Y Y Y Y Y 128 2022							
City WACONIA	State MN	Zip Code 55387-1072	Transaction ID : PR2632878867043 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		57.69							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 461.52	P/R Deduction (\$19.23 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optiona	al)		676.71							
TOTAL This Period (last page this line nun	nber only)									

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			Use separate schedule(s)	(ch	(check only one)								
			for each category of the Detailed Summary Page		K 11a		11b	11c	12				
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	commercial purposes, other than using the na	ame and a	ddress of any political committee	to s	olicit con	itrib	utions t	rom such	n committ	ee.			
	NE OF COMMITTEE (In Full) hitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)									
	Name of Individual (Last, First, Middle Initial RR, MICHAEL, , ,) or Full Oi	rganization Name		Date of	Re	ceipt						
Mai	ing Address 2625 LEROY LANE				11 28 2022								
City WE	ST BLOOMFIELD	State MI	Zip Code 48324-2237						38356704 is Period	3			
	D number of contributing political committee.	C			<u> </u>		-		42.7	12			
Unit	ne of Employer (for Individual) ed HealthCare Services Inc	Occu Exec	upation (for Individual) c Dir		Me	emo	Item						
	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.96	F	P/R Dedu	uctio	on (\$14.	.04 Bi-We	eekly)				
	Name of Individual (Last, First, Middle Initial ARGENT, GLORIA, , ,) or Full Oi	rganization Name		Date of	Re	ceipt						
	ing Address 3750 CANAL STREET				11 28 2022 Transaction ID : PR2634119367043								
City	NT CHARLES	State MO	Zip Code 63301-8510	-			-			3			
FEC	D number of contributing eral political committee.	C			Amount	or	Each H	eceipt th	is Period 42.	12			
	ne of Employer (for Individual) ed HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item									
Rec	eipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 336.96	 	P/R Deduction (\$14.04 Bi-Weekly)								
	Name of Individual (Last, First, Middle Initial) or Full Oi	rganization Name		Date of	Re	ceipt						
Mai	ing Address 330 NW 82ND				^M 11	/	28		2022	Y			
City TO	РЕКА	State KS	Zip Code 66617-2223						1 6706704 is Period	3			
	D number of contributing political committee.	С			Ē		y .	, <u>,</u>	173.0	07			
Unit	ne of Employer (for Individual) red HealthCare Services Inc		upation (for Individual) Govt Affs		Me	emo	Item						
	eipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1384.56		P/R Dedu	uctio	on (\$57	.69 Bi-We	ekly)				
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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	ED RECEIPTS	for each category of the Detailed Summary Page	×	11a] 11k		11c 15	12	17				
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	OF COMMITTEE (In Full) edHealth Group Incorporated	PAC (l	UnitedHealth Group F	PAC)										
A. ROA	ame of Individual (Last, First, Middle Initial LDI, MICHAEL, , ,) or Full O	Organization Name		Date o									
City	9 Address 4720 HARRIET AVENUE	State	Zip Code		11 28 2022 Transaction ID : PR2634169567043									
	EAPOLIS	MN	55419-5434								-			
	D number of contributing I political committee.	С			Amount of Each Receipt this Period									
	of Employer (for Individual) HealthCare Services Inc		upation (for Individual) P Prd		М	emc	o Ite	m						
	ot For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 924.00	P	/R Ded	luctio	on (\$	\$38.5	0 Bi-We	ekly)				
	ame of Individual (Last, First, Middle Initial KNEY, JOHN, , ,) or Full O	Organization Name		Date o	f Re	eceip	ot						
Mailing	Address 425 N 15TH ST				м м 11	/	D	28	/ Y	ү ү 2022	Y			
City NASH	VILLE	State TN	Zip Code 37206-2774							7036704 is Period				
	D number of contributing I political committee.	С			115.38									
	of Employer (for Individual) HealthCare Services Inc		cupation (for Individual) h Plan CEO		Memo Item									
	ot For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P	P/R Deduction (\$38.46 Bi-Weekly)									
	ame of Individual (Last, First, Middle Initial BLE, JOHN, , ,) or Full O	Organization Name		Date o	f Re	eceip	ot						
Mailing	Address 1923 SHIVER DR				^M ^M 11		L	28		ү ү 2022				
City ALEX	ANDRIA	State VA	Zip Code 22307-1629							5666704 is Period				
	D number of contributing I political committee.	С			Amoun		J		, sept th	576.				
	of Employer (for Individual) HealthCare Services Inc		upation (for Individual) Govt Affs		M	lemo	o Ite	m						
	ot For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4615.20		P/R Dec	lucti	ion (\$192.	.30 Bi-W	/eekly)				
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TOTAL	This Period (last page this line number on	ly)					-		-					

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	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements main the name and a	l ay not be sold or used by any p uddress of any political committe	13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group P/	4C)								
Full Name of Individual (Last, First, Middle A. WOJCIK, ADAM, , ,	e Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 11424 BOULDER DRIVE			M M / D D / Y Y Y Y Y 11 28 2022								
	State IL	Zip Code	Transaction ID : PR2634886567043								
ORLAND PARK	IL	60467-7419	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		42.09								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.72	P/R Deduction (\$14.03 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. PESCATELLO, SARA, , ,	e Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 1311 HAMLIN STREET N			11 28 2022								
	State DC	Zip Code	Transaction ID : PR2634888567043								
WASHINGTON	DC	20017-2451	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		288.45								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General Other (specify) ▼		2307.60	P/R Deduction (\$96.15 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. POWER, ROBERT, , ,	e Initial) or Full C	Prganization Name	Date of Receipt								
Mailing Address 20 SMITH LANE			11 / D D / Y Y Y Y 2022								
City SAINT JAMES	State NY	Zip Code 11780-3810	Transaction ID : PR2634892867043 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		115.38								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)		445.92								
TOTAL This Period (last page this line num	ber only)										

SCHEDULE A (FEC Form 3X) DEOEIDTO

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FOR LINE NUMBER:

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171			Use separate schedule(s)	(che	eck only	on	e)	L					
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12				
	y information copied from such Reports and Sta for commercial purposes, other than using the r												
$\left\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	InitedHealth Group PA	AC)									
A.	Full Name of Individual (Last, First, Middle Initia GILREATH, BRIAN, , ,	l) or Full Or	ganization Name		Date of	Ree	ceipt						
	Mailing Address 236 JERRY ROAD				M M / D D / Y Y Y Y 11 28 2022								
	City EAST HARTFORD	State CT	Zip Code 06118-3124						12686704 is Period	3			
	FEC ID number of contributing federal political committee.	С					<u>, , , , , , , , , , , , , , , , , , , </u>	-	28.	86			
	Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Bus	pation (for Individual) Dvlp Cons		Me	emo	Item						
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.88	P	/R Dedu	uctio	on (\$9.6	2 Bi-Wee	ekly)				
в.	Full Name of Individual (Last, First, Middle Initia PAYET, KEITH, , ,	l) or Full Or	ganization Name		Date of	Ree	ceipt						
	Mailing Address 415 CHURCH STREET #2410	Chata	Zin Onde		11 28 2022 Transaction ID : PR2635440067043								
	City NASHVILLE	StateZip CodeTN37219-1859					-		4006704 is Period	3			
	FEC ID number of contributing federal political committee.	С			576.90								
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Hlth		Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)									
C.	Full Name of Individual (Last, First, Middle Initia	l) or Full Or	ganization Name		Date of	Ree	ceipt						
	Mailing Address 15526 ELM RD				11 ^M	/	28	L	2022 Y				
	City MAPLE GROVE	State MN	Zip Code 55311-3941				-		14216704 is Period	.3			
	FEC ID number of contributing federal political committee.	С					,	, ,	57.	69			
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) eople Team		Me	emo	ltem						
	Receipt For:	Aggregate Y	Year-to-Date ▼ 461.52	P/R Deduction (\$19.23 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)			•			, . ,	. ,	663.4	45			
т	OTAL This Period (last page this line number or	nly)		•			,						

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		Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
	for each category of the Detailed Summary Page Image: Summary Page Image: Summary Page: Summary Page Image: Summary Page Image: Summary Page:	erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpora	ted PAC (JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle MIRAU, ANTHONY, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 770 HAWKCREST CIR											
City CHANHASSEN		· ·	Transaction ID : PR2635444267043 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		288.45								
Name of Employer (for Individual) United HealthCare Services Inc		, ,	Memo Item								
Receipt For: Primary General Other (specify) $ earrow$	Aggregate		P/R Deduction (\$96.15 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. ELLER, JESSE, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 28108 N 17TH DR			11 28 2022								
City PHOENIX			Transaction ID : PR2635445167043								
FEC ID number of contributing federal political committee.	_		42.12								
Name of Employer (for Individual) United HealthCare Services Inc			Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate		P/R Deduction (\$14.04 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. ROOS, THOMAS, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 3199 KAGEN AVE NE											
City SAINT MICHAEL			Transaction ID : PR2635451267043 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		576.90								
Name of Employer (for Individual) United HealthCare Services Inc		1 ()	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	4615.20	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional).			907.47								
TOTAL This Period (last page this line number	er only)										

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17			Use separate schedule(s)	(check only one)								
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page									
	y information copied from such Reports and Sta for commercial purposes, other than using the r											
$\overline{)}$	NAME OF COMMITTEE (In Full)											
\rangle	UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	.C)								
Α.	Full Name of Individual (Last, First, Middle Initia NELSON, MICHAEL, , ,	al) or Full O	rganization Name	Date of Receipt								
	Mailing Address 2048 STAGHORN DRIVE			M M / D D / Y Y Y Y 11 28 2022								
	City SHAKOPEE	State MN	Zip Code 55379-5412	Transaction ID : PR2636719367043 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		42.12								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ple Business Partner	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Initia MADONDO, JOHN, , ,	al) or Full O	rganization Name	Date of Receipt								
	Mailing Address 147 BLUEBELL WAY	11 28 / Y Y Y Y 2022										
	City FRANKLIN	State TN	Zip Code 37064-6784	Transaction ID : PR2636726167043 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.38								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initia DEMPSEY, MICHAEL, , ,	al) or Full O	rganization Name	Date of Receipt								
	Mailing Address 6614 PARKWOOD LANE			M M / D D / Y Y Y Y 11 28 2022								
	City EDINA	State MN	Zip Code 55436-1734	Transaction ID : PR2636726367043 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		115.38								
	Name of Employer (for Individual) Optum Services, Inc	Occu VP F	upation (for Individual) Fin	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)			272.88								
т	OTAL This Period (last page this line number or	nly)										

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12									
			aach category of the alled Summary Page Iting Iting Iting ach category of the Iting Iting									
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle A. HILL, DAVID, , ,	e Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 1800 RIDGE AVENUE UN	NT 303											
City EVANSTON	State IL	Zip Code 60201-5980										
FEC ID number of contributing federal political committee.	С		115.38									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) uty Gen Counsel Mgr	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. LUSIC, TANYA, , ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 20840 SAWMILL ROAD			M = M / D = D / Y = Y = Y									
City JORDAN	State MN	Zip Code 55352-9633										
FEC ID number of contributing federal political committee.	С											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2307.60	P/R Deduction (\$96.15 Bi-Weekly)									
Full Name of Individual (Last, First, Middle CQUICK, JAMES, , ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 114 MOUNTAIN RIDGE D			11 28 2022									
City JONESBOROUGH	State TN	37659-6382										
FEC ID number of contributing federal political committee.	С		42.12									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Cust Service	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate		P/R Deduction (\$14.04 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)		445.95									
TOTAL This Period (last page this line num	per only)											

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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			Detailed Summary Page	×	11a 13		11b		11c	12	17			
	y information copied from such Reports and State for commercial purposes, other than using the na				or the p		pose			contribut	tions			
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated													
Α.	Full Name of Individual (Last, First, Middle Initial PEDERSEN, NICHOLAS, , ,) or Full O	Organization Name		Date of	Re	ceip	ot						
	Mailing Address 1862 CLOVER MEADOW DR				11 28 2022									
	City CHASKA	State MN	Zip Code 55318-5400	A	Transaction ID : PR2637684767043 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			42.12									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Dir Comp		Me	emo	lter	m						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.96	P /	'R Dedu	uctio	on (\$	\$14.0	4 Bi-We	ekly)				
B.	Full Name of Individual (Last, First, Middle Initial LARSON, CHRISTINE, , ,) or Full O	Organization Name	[Date of Receipt									
	Mailing Address 3360 VISTA COURT				11 / D D / Y Y Y Y 11 28 2022									
	City HASTINGS	State MN	Zip Code 55033-3347				-			8876704 is Period	3			
	FEC ID number of contributing federal political committee.	С			42.12 Memo Item									
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) Gen Mgmt											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 336.96	P/	P/R Deduction (\$14.04 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial SIVLEYIII, HARRY, , ,) or Full O	Organization Name		Date of	Re	ceip	ot						
	Mailing Address 7218 AVALON BLVD				M M 11	/	_	28	/ Y	2022				
	City ALPHARETTA	State GA	Zip Code 30009-2500	A						10666704 iis Period	3			
	FEC ID number of contributing federal political committee.	С					y		y	57.0	69			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Gen Counsel		Me	emo	lter	m						
	Receipt For: Primary General Other (specify)	Year-to-Date ▼ 461.52	P	P/R Deduction (\$19.23 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			•			9		y	141.9	93			
т	OTAL This Period (last page this line number onl	y)		•					-9-					

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	-	Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12									
			a category of the Summary Page Image: Summary Page: Summary Page <									
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle CALABRESE, DAVID, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 85 LITTLE POND RD												
City NORTHBOROUGH	State MA	Zip Code 01532-1686										
FEC ID number of contributing federal political committee.	С		576.90									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P CInt Relationship	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle MESSING, KEITH, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 9 BUTTERFIELD DR												
	State NY	Zip Code										
GREENLAWN	_	11740-2001	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C											
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Software Engineering	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)									
Full Name of Individual (Last, First, Middle C. SMITH, ANTHONY, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 1 ROCKAWAY AVE			11 28 2022									
City MARBLEHEAD	State MA	Zip Code 01945-1726										
FEC ID number of contributing federal political committee.	С		115.38									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) CInt Svc Acct Mgt	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate		P/R Deduction (\$38.46 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			734.40									
TOTAL This Period (last page this line numb	per only)											

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
or for commercial purposes, other than using			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle MIGGIN, MATTHEW, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 6 MIDDLEBROOK RD			M M / D D / Y Y Y Y 11 28 2022								
City WEST HARTFORD	State CT	Zip Code 06119-1014	Transaction ID : PR2639759367043 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		173.07								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1384.56	P/R Deduction (\$57.69 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. ZUCCO, BETHANY, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 2608 CROMWELL COURT	г		11 / 28 / 2022								
City MINNEAPOLIS	State MN	Zip Code 55410-2519	Transaction ID : PR2639760067043 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		576.90								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle DUTTA, SUMIT, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 1112 W WRIGHTWOOD A	1		11 28 / Y Y Y Y Y 2022								
City CHICAGO	State IL	Zip Code 60614-1315	Transaction ID : PR2639773867043 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		576.90								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Seg Chief Med Off	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional))		1326.87								
TOTAL This Period (last page this line numb	per only)	·····									

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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		X 11a		11b	11c	1	Г	17		
	y information copied from such Reports and Sta for commercial purposes, other than using the				for the		pose of	soliciting	g contr	ributic	ons		
	NAME OF COMMITTEE (In Full)												
	UnitedHealth Group Incorporate	d PAC (l	UnitedHealth Group F	PAC)									
Α.	Full Name of Individual (Last, First, Middle Initi SMITH, DELYLE, , ,	al) or Full O	Organization Name		Date of Receipt								
	Mailing Address PO BOX 447				11 28 / Y Y Y Y 2022								
	City MT PROSPECT	State IL	Zip Code 60056-0447		Transaction ID : PR2639801567043 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С							1	15.38	;		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Director Technology		M	emc	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04		P/R Ded	lucti	on (\$38.	46 Bi-We	eekly)				
B.	Full Name of Individual (Last, First, Middle Initi GALLOWAY, MERCEDEIS, , ,	al) or Full O	organization Name		Date of	f Re	eceipt						
	Mailing Address 6737 LANCER DRIVE	Chata	Zin Oode		M M	/	28	/ Y	2022				
	City CHARLOTTE	State NC	Zip Code 28226-7729	-				PR26404					
	FEC ID number of contributing federal political committee.	C			Amoun			eceipt th		42.12	2		
	Name of Employer (for Individual) Optum Services, Inc	Occi Sr S		Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.96		P/R Deduction (\$14.04 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initi WEBER, ALISSA, , ,	al) or Full O	Organization Name		Date of	f Re	eceipt						
	Mailing Address 10633 NW 74TH PLACE				M M 11		28	JL	2022	2]		
	City JOHNSTON	State IA	Zip Code 50131-2342					PR2640 eceipt th					
	FEC ID number of contributing federal political committee.	С			<u> </u>		, ,	,	1	73.07	,		
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP F	upation (for Individual) Fin		M	emo	o Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1384.56		P/R Deduction (\$57.69 Bi-Weekly)								
\vdash	UBTOTAL of Receipts This Page (optional)			► ►			9 I		3	30.57			

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		Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle STOW, CHRISTINA, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 5505 30TH ST NW			M M / D D / Y Y Y Y 11 28 2022							
City WASHINGTON	State DC	Zip Code 20015-1249	Transaction ID : PR2640466467043 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		576.90							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Public Affairs	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. WILJANENHATHAWAY, AMY, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 369 135TH AVE			11 / 28 / 2022							
City WAYLAND	State MI	Zip Code 49348-9402	Transaction ID : PR2640835267043 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		42.12							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Dvlp Cons	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. SHARKEY, S PAUL, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 8607 ELLISTON DRIVE			11 28 2022							
City WYNDMOOR	State PA	Zip Code 19038-7957	Transaction ID : PR2640845467043 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		86.55							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 692.40	P/R Deduction (\$28.85 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			705.57							
TOTAL This Period (last page this line number	er only)									

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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				Detailed Summary Page	×	11a 13	\square] 11 14	- F		11c 15	12	17	
	y information copied from such Reports and State for commercial purposes, other than using the na					or the		pos	se of		liciting	contribu	tions	
<u> </u>	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated													
A.	Full Name of Individual (Last, First, Middle Initial) BRISSON, SAMUEL, , , Mailing Address 2454 GETTYSBURG AVE S) or Full O	Organ	nization Name		Date of Receipt								
	City	State		Zip Code	-									
	ST LOUIS PARK	MN	_	55426-2345	A							s Period		
	FEC ID number of contributing federal political committee.	С					-	-	-		- JF	42.	00	
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) tor Technology		Me	emo	o Ite	em					
	Receipt For: µ Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 336.00	P/	R Ded	uctio	on	(\$14.	00	Bi-We	ekly)		
B.	Full Name of Individual (Last, First, Middle Initial) PIERCEHARRIS, PHELISHA, , ,) or Full O	Organ	nization Name		Date of	Re	ecei	ipt					
	Mailing Address 3041 DEE ANN DRIVE	State		11 28 2022 Transaction ID : PR2640866367043							Y			
	City MEMPHIS	State TN		Zip Code 38119-9132				-				6636704 s Period		
	FEC ID number of contributing federal political committee.	С				42.12							12	
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Dir Clin Pract Perf		Memo Item								
	Receipt For: µ Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)									
	Full Name of Individual (Last, First, Middle Initial) WITT, JULIE, , ,) or Full O	Organ	nization Name		Date of	Re	ecei	ipt					
	Mailing Address 155 TALBERT TOWN LOOP	Otete	1	Zin Code		м м 11	1	L	28	J		2022		
	City MOORESVILLE	State NC		Zip Code 28117-8069	A							760670 4 s Period		
	FEC ID number of contributing federal political committee.	С						9			y	42.	12	
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) tor, Actuarial		Me	emo	o It	em					
	Receipt For: Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)			•••••	[9			y	126.	24	
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	y information copied from such Reports and Sta for commercial purposes, other than using the n												
	NAME OF COMMITTEE (In Full)												
$\Big\rangle$	UnitedHealth Group Incorporated	I PAC (l	UnitedHealth Group	p PAC))								
Α.	Full Name of Individual (Last, First, Middle Initia ESTESS, SHARON, , ,	l) or Full O	Drganization Name		Date of	Receipt							
	Mailing Address 128 ASHBROOKE TRAIL	_			M M / D D / Y Y Y Y 11 28 2022								
	City MADISON	State MS	Zip Code 39110-6855			: PR26408 Receipt th		3					
	FEC ID number of contributing federal political committee.	С						115.3	18				
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Gen Mgmt		Me	emo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	4	P/R Ded	uction (\$3	8.46 Bi-We	eekly)					
в.	Full Name of Individual (Last, First, Middle Initia METKO, SARA, , ,	l) or Full O	Drganization Name	Date of	Receipt								
	Mailing Address 23665 HIGHVIEW LANE	- 1		11 28 2022									
	City LAKEVILLE	State MN	Zip Code 55044-6025	-			: PR26408 Receipt th		<u> </u>				
	FEC ID number of contributing federal political committee.	С			115.38								
	Name of Employer (for Individual) United HealthCare Services Inc	Occi VP		Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	4	P/R Deduction (\$38.46 Bi-Weekly)								
C.	Full Name of Individual (Last, First, Middle Initia ADVANI, PROTIMA, , ,	l) or Full O	Drganization Name		Date of	Receipt							
	Mailing Address 7618 BRITTANY PARC CT				M M 11	/ D	3	2022					
	City FALLS CHURCH	State VA	Zip Code 22043-2907				: PR26420 Receipt th		3				
	FEC ID number of contributing federal political committee.	С				y	9	576.9	90				
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Rsch		Me	emo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)			►		.,	. ,	807.6	6				
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	y information copied from such Reports and State for commercial purposes, other than using the na								solici	ting	contribut	ions				
$\left\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)		_	_									
Α.	Full Name of Individual (Last, First, Middle Initial) STRAND, UTE, , ,	or Full O	rganization Name		Date of	Re	ceip	pt								
	Mailing Address 2323 SPRINGDALE DRIVE][м м 11	/		28	/	Y	y y 2022	Y				
	City NASHVILLE	State TN	Zip Code 37215-1134				-		-	-	2556704 s Period	3				
	FEC ID number of contributing federal political committee.	С		57.69												
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Me	emo) Ite	əm								
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.52	P/R Deduction (\$19.23 Bi-Weekly)												
B.	Full Name of Individual (Last, First, Middle Initial) BRUECKMAN, BRIAN, , , Mailing Address 6445 HAWKS POINTE LANE	or Full O	organization Name	_	Date of	Re				V	V	v				
	City	State	Zip Code	41	11 Transa		L	28	PR 26	4203	2022 2946704:	3				
	EXCELSIOR	MN	55331-2612	Transaction ID : PR2642029467043 Amount of Each Receipt this Period												
	FEC ID number of contributing federal political committee.	С		[7				576.9	90				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Ops		Me	emo	b Ite	əm								
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)												
C.	Full Name of Individual (Last, First, Middle Initial) JENSEN, GINA, , ,	or Full O	rganization Name		Date of	Re	ceip	pt								
	Mailing Address 6287 JUNEAU LANE N	<u> </u>			11 ^M	1	L	28	/		y y 2022					
	City MAPLE GROVE	State MN	Zip Code 55311-4166				-		-		3146704	3				
	FEC ID number of contributing federal political committee.					⊏a(,ceip		s Period 57.6	39					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) uty Gen Counsel		Me	emo	o Ite	əm								
	Receipt For: A Primary General Other (specify)	Aggregate	Year-to-Date ▼ 461.52	P/	R Dedu	uctio	on ((\$19.2	23 Bi	-Wee	ekly)					
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	other than using the name and	d address	of any political committee	to soli	cit con	tribu	tions f	rom such	n commit	tee.					
NAME OF COMMITTEE	oup Incorporated PAC	(United	dHealth Group PA	C)											
Full Name of Individual (A. MARTIN, STEPHANI	Last, First, Middle Initial) or Ful E, , ,	II Organiza	tion Name	D	ate of	Rec	eipt								
Mailing Address 7002 N	VIA DE MANANA				11 28 / Y Y Y Y 2022										
City SCOTTSDALE	State AZ		Code 5258-3951						31806704 is Period						
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Name of Employer (for I United HealthCare Servic	,	Occupation PS Market V	(for Individual) /P SIs AM		Me	emo	ltem								
Receipt For: Primary 0 Other (specify) ▼	General Aggrega	ate Year-to	Date ▼ 1846.08	P/f	R Dedu	uctior	n (\$76.	92 Bi-We	eekly)						
Full Name of Individual (B. KIRK, ARETHUSA	Last, First, Middle Initial) or Ful	II Organiza	tion Name	D	ate of	Rec	eipt								
Mailing Address 16 OTH	ORIDGE ROAD				м м 11	1	D D 28	/ Y	y y 2022	Y					
City LUTHERVILLE	State MD		0 Code 1093-5413		Transaction ID : PR2642830267043 Amount of Each Receipt this Period										
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Name of Employer (for I United HealthCare Servic	l '	Occupation VP Med Cli	(for Individual) n Ops		Memo Item										
Receipt For: Primary C Other (specify) ▼	Seneral Aggrega	ate Year-to	Date ▼ 336.72	P/F	R Dedu	ictior	n (\$14.0	03 Bi-We	ekly)						
Full Name of Individual (C. LONG, RICHARD	Last, First, Middle Initial) or Ful	II Organiza	tion Name	D	ate of	Rec	eipt								
Mailing Address 4825 Pl					^M 11	1	D D D 28	/ Y	2022 Y	Y					
City MINNEAPOLIS	State MN		0 Code 5419-5258						33126704 is Period						
FEC ID number of contri federal political committe	ů.			ļļ	_			y	115.	38					
Name of Employer (for I United HealthCare Servic		Occupation /P Gen Mg	(for Individual) mt		Me	emo	ltem								
Receipt For: Primary 0 Other (specify)	Aggrega	ate Year-to	Date ▼ 923.04	P/I	R Dedu	uctio	n (\$38.	46 Bi-We	eekly)						
SUBTOTAL of Receipts Th	is Page (optional)		•••••						388.	23					
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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and State for commercial purposes, other than using the na			erson for the purpose of soliciting contributions
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	AC)
Α.	Full Name of Individual (Last, First, Middle Initial) FOX, ELIZABETH, , ,) or Full O	rganization Name	Date of Receipt
	Mailing Address 611 SECOND STREET			11 28 2022
	City	State VA	Zip Code	Transaction ID : PR2642832067043
	ALEXANDRIA	VA	22314-1416	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		576.90
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item
	Receipt For:	Aggregate	Year-to-Date V	
	Primary General Other (specify) ▼		4615.20	P/R Deduction (\$192.30 Bi-Weekly)
в.	Full Name of Individual (Last, First, Middle Initial) KEISERJENKINS, KAREN, , ,) or Full O	rganization Name	Date of Receipt
	Mailing Address 9325 MARTINS LAKE DRIVE			11 28 2022
	City	State	Zip Code	Transaction ID : PR2642834467043
	ROSWELL	GA	30076-2865	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		42.12
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)
с.	Full Name of Individual (Last, First, Middle Initial)) or Full O	rganization Name	Date of Receipt
	Mailing Address 8445 NE NEW BROOKLYN ROA	٨D		M M / D D / Y Y Y Y 11 28 2022
	City	State	Zip Code	Transaction ID : PR2642838867043
	BAINBRIDGE ISLAND	WA	98110-3611	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		57.69
	Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item
	United HealthCare Services Inc		/P SIs Acct Mgmt	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Other (specify)		461.52	P/R Deduction (\$19.23 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)		••••••	676.71
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	y information copied from such Reports and State for commercial purposes, other than using the na					or the		rpo	ose of	so	liciting	contribu	tions		
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Jni	tedHealth Group PA	C)										
Α.	Full Name of Individual (Last, First, Middle Initial) RUDOLPH, CLAYTON, , ,	or Full O	rgan	ization Name		Date c	f Re	ece	eipt						
	Mailing Address 4937 RUSSELL AVENUE SOUT					M N 11	/	'	D D 28)	/ Y	y 2022	Y		
		State MN		Zip Code								9936704			
	MINNEAPOLIS	IVIIN		55410-1916	A	mour	t of	E	ach R	lece	eipt thi	s Period			
	FEC ID number of contributing federal political committee.	С					-9	288.	45						
	Name of Employer (for Individual) Optum Services, Inc	Occi VP I	•	on (for Individual)		N	lemo	οI	ltem						
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 2307.60	P/	'R Deo	ducti	ion	n (\$96.	.15	Bi-We	ekly)			
в.	Full Name of Individual (Last, First, Middle Initial) CRAGLE, STEVE, , ,	or Full O	rgan	ization Name		Date c	of Re	ece	eipt						
	Mailing Address 6604 MOHAWK TRAIL					M N	/	[D D 28		/ Y	y y 2022	Y		
	City	State		Zip Code								0066704			
	EDINA	MN		55439-1030	A	Mour	t of	E	ach R	lece	eipt thi	s Period			
	FEC ID number of contributing federal political committee.	С				_		,		_	-	576.	90		
	Name of Employer (for Individual) Optum Services, Inc			ion (for Individual) gment CMO		N	lemo	οI	ltem						
	Receipt For: µ Primary General Other (specify) ▼	Aggregate	Year	r-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)										
С.	Full Name of Individual (Last, First, Middle Initial) NEELY, MARC, , ,	or Full O	rgan	ization Name		Date c	of Re	ece	eipt						
	Mailing Address 1159 BUFFALO RIDGE RD					^M 11	/	′	D D D 28		/ Y	2022 Y	Y		
	City	State		Zip Code		Tran	sact	tio	n ID :	PR	26432	0316704	13		
	CASTLE PINES	CO		80108-8190	A	Mour	it of	E	ach R	lece	eipt thi	s Period			
	FEC ID number of contributing federal political committee.	С						9			y	576	90		
	Name of Employer (for Individual) United HealthCare Services Inc		•	on (for Individual) a CEO		N	lemo	οl	ltem						
	Receipt For:	1		r-to-Date ▼	\neg										
	Primary General Other (specify)	4615.20	P/	/R De	ducti	ior	n (\$192	2.30	0 Bi-W	eekly)					
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12										
			13 14 15 16 17 berson for the purpose of soliciting contributions a to collicit contributions										
NAME OF COMMITTEE (In Full)	g the name and a	doress of any political committe	e to solicit contributions from such committee.										
UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P	AC)										
Full Name of Individual (Last, First, Middl WINNEROSKI, KEVIN, , ,	e Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 5100 ABBOTT AVE S			11 28 2022										
City MINNEAPOLIS	State MN	Zip Code 55410-2143	Transaction ID : PR2644647167043 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		42.12										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Mktg	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)										
Full Name of Individual (Last, First, Middl B. MCKOY, PHILIP, , ,	e Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 927 LINCOLN AVE		- 1	11 / 28 / Y Y Y Y 2022										
City	State MN	Zip Code	Transaction ID : PR2644651667043										
SAINT PAUL		55105-3149	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		576.90										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Grp CIO	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middl C. JEZARIAN, WENDY, , ,	e Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 5251 HUMBOLDT AVE S			11 / 28 / Y Y Y Y 2022										
City MINNEAPOLIS	State MN	Zip Code 55419-1121	Transaction ID : PR2644659667043 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		57.69										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Iktg Rsch Cnslt	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 461.52	P/R Deduction (\$19.23 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optiona	l)		676.71										
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\mathbf{i}	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate		(I In	itedHealth Group PA	(\mathbf{C})													
/			(0)		(0)													
١.	Full Name of Individual (Last, First, Middle Init CHAPMAN, GREGORY, , ,	tial) or Full	Orga	nization Name		Date of	Re	ceip	ot									
	Mailing Address 1724 SECOND STREET					M M 11	/	D	28	/ Y	Y 2) 022	Y					
		State LA		Zip Code	Transaction ID : PR2645103067043 Amount of Each Receipt this Period													
	NEW ORLEANS			70113-1632	_	Amount	of	Eac	h Re	ceipt tl	nis F	Period						
	FEC ID number of contributing federal political committee.	С			150.00													
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) t Mgmt SB KA		Me	emo	Ite	m									
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	Primary General Other (specify) ▼			1200.00		P/R Dedu	uctio	on (S	\$50.0	0 Bi-W	eekl	y)						
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	Mailing Address 117 VIA DI MELLO					11 Date of	/		28	/ Y	20)22	Y					
	City	State		Zip Code		Transa	acti	on l		R2645			2					
	HENDERSON	NV		89011-0110		Amount		-										
	FEC ID number of contributing federal political committee.	С			576.90													
	Name of Employer (for Individual) Optum Services, Inc			ation (for Individual) egment COO		Me	emo	Ite	m									
	Receipt For: Primary General Other (specify) ▼	Aggrega	P/R Deduction (\$192.30 Bi-Weekly)															
	Full Name of Individual (Last, First, Middle Init PRICE, CASSANDRA, , ,	tial) or Full	Orga	nization Name		Date of	Re	ceir	ot									
	Mailing Address 7903 S 193 AVENUE					M M 11	/		28	/ Y)22	Y					
	City	State		Zip Code		Trans	acti	ion	ID : F	PR2646	263	66704	3					
	GRETNA	NE		68028-5017		Amount	of	Eac	h Re	ceipt tl	nis F	Period						
	FEC ID number of contributing federal political committee.	С						,		y		115.3	38					
	Name of Employer (for Individual)	00	ccupa	tion (for Individual)		Me	emo) Ite	m									
	United HealthCare Services Inc	Di	ir, Health Plan Operations															
	Receipt For:	Aggrega	te Ye	ar-to-Date 🔻														
	Other (specify)		-,-	923.04		P/R Ded	uctio	on (\$38.4	·6 Bi-W	eekl	y)						
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	y information copied from such Reports and State for commercial purposes, other than using the na					for	the		oos	se of	soli	iciting	contrib	utions				
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Uni	itedHealth Group PA	C)													
A.	Full Name of Individual (Last, First, Middle Initial) KELLNER, KYLE, , ,	or Full O)rgar	nization Name		Da	te of	Re	cei	pt								
	Mailing Address 1641 WHITE PINE WAY	State		Zip Code		L	11 [™]	/	L	28			2022					
	CARVER	MN		55315-4563	Transaction ID : PR2646268367043 Amount of Each Receipt this Period													
	FEC ID number of contributing federal political committee.	С					iount		1					6.14				
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) Mgmt	Memo Item													
	Receipt For: A Primary General Other (specify) ▼	ar-to-Date ▼ 369.12	P/R Deduction (\$15.38 Bi-Weekly)															
B.	Full Name of Individual (Last, First, Middle Initial) HOFFMAN, SHERRI, , ,	or Full O	rgar	nization Name		Da	te of	Re	cei	pt								
	Mailing Address 3409 DEEP WILLOW AVENUE			1			11 [™]	1		28	/	Y	y y 2022	Y				
	City PIKESVILLE	State MD		Zip Code 21208-3116	Transaction ID : PR2646294667043 Amount of Each Receipt this Period													
	FEC ID number of contributing federal political committee.	С			115.38													
	Name of Employer (for Individual) Optum Services, Inc		•	tion (for Individual) Svc Acct Mgt			Me	emo	lte	əm								
	Receipt For: A Primary General Other (specify) ▼	vggregate	Yea	ar-to-Date ▼ 923.04	F	P/R	Dedu	uctic	on ((\$38.4	46 E	Bi-Wee	ekly)					
с.	Full Name of Individual (Last, First, Middle Initial)	or Full O)rgar	nization Name		Da	te of	Re	cei	pt								
	Mailing Address 17761 WEAVER LAKE DRIVE			1		L	11 [™]	1	L	28	J.		2022 Y	_				
	City MAPLE GROVE	State MN		Zip Code 55311-1328	-				-				040670 s Perio	-				
	FFO ID number of contribution	С					iount	oi	La		ece	npt trik		6.90				
	Name of Employer (for Individual) United HealthCare Services Inc	tion (for Individual) Auditor	Memo Item															
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	y information copied from such Reports and Stater for commercial purposes, other than using the nam						the			se of				
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (l	Jni	tedHealth Group PA	.C)									
Α.	Full Name of Individual (Last, First, Middle Initial) WELSH, MARY, , ,	or Full O	rgar	nization Name		Dat	e of	Re	ece	eipt				
	Mailing Address 140 BROWN ROAD SOUTH						[™]	1	[D 28		/ Y	ү ү 2022	Y
	5	State		Zip Code		Tr	ans	acti	ior	ו ID :	Ρ	R26463	0696704	13
	ORONO	MN		55356-9134	_ /	Am	ount	of	Ea	ach F	Rec	ceipt thi	is Period	
	FEC ID number of contributing federal political committee.	C					_		,			-gr-	57	69
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) porate Security			Me	emo	o It	em				
	Pagaint For:			•	\neg									
	Primary General Other (specify) ▼	Jgregate	rea	r-to-Date ▼ 461.52	P/	/R	Ded	uctio	on	(\$19	.23	3 Bi-We	ekly)	
в.	Full Name of Individual (Last, First, Middle Initial)	or Full O	rgar	nization Name		Dat	e of	Re	ece	eipt				
	Mailing Address 6312 MERRIMAC LANE NORTH						11 [™]	/	ſ	28	- 1	/ Y	y y 2022	Y
	City SAPLE GROVE	State MN		Zip Code 55311-3835									0396704 is Perioc	
	FEC ID number of contributing federal political committee.	0							-			-y	576	.90
	Name of Employer (for Individual) Optum Services, Inc			tion (for Individual) gment CMO			Me	emo	o It	em				
	Receipt For: Ag Primary General Other (specify) ▼	ggregate	Yea	r-to-Date ▼ 4615.20	P/	/R [Dedu	uctio	on	(\$19	2.3	30 Bi-W	eekly)	
с.	Full Name of Individual (Last, First, Middle Initial)	or Full O	rgar	nization Name		Dat	e of	Re	ece	eipt				
	Mailing Address 724 FARRAGUT STREET NW						11 [™]	/		28		/ Y	2022	Y
	City SASHINGTON	State DC		Zip Code 20011-4012					-				1098670 is Period	-
	FEC ID number of contributing federal political committee.	C					_		,			y	173	07
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) nd/Social Resp			Me	emo	o It	tem				
	Receipt For: Ag Primary General Other (specify)	ggregate	Yea	r-to-Date ▼ 1384.56	P	/R	Ded	uctio	on	(\$57	'.6 <u>9</u>	9 Bi-We	ekly)	
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		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports and or for commercial purposes, other than using th			person for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (l	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle Ir A. ZENICK, GEOFFREY, , ,	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 7714 TWISTED OAKS CIRC	LE		M M / D D / Y Y Y Y 11 28 2022									
City DALLAS	State TX	Zip Code 75231-4711	Transaction ID : PR2698410867043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		115.38									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Sales	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middle Ir B. RODDIS, SARAH ELIZABETH, , ,	hitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 4512 BRUCE AVENUE			11 28 2022									
City EDINA	State MN	Zip Code 55424-1121	Transaction ID : PR2698413567043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		28.83									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Dir Product	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.64	P/R Deduction (\$9.61 Bi-Weekly)									
Full Name of Individual (Last, First, Middle Ir c. TAYLOR, JOSHUA, , ,	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 7 CARRIAGE HILL RD			11 / D D / Y Y Y Y Y 28 2022									
City WOODBRIDGE	State CT	Zip Code 06525-1037	Transaction ID : PR2698416767043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		57.69									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Proj-Prgm Mgmt	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 461.52	P/R Deduction (\$19.23 Bi-Weekly)									
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	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (l	JnitedHealth Group PA	AC)													
Α.	Full Name of Individual (Last, First, Middle Ir DOWLING, MELODY, , ,	nitial) or Full C	rganization Name		Date of	Re	eceipt										
	Mailing Address 14205 INDEPENDENCE CO				M M 11	1	D D D 28	/ Y	y 2022	Y 2							
	City BASEHOR	State KS	Zip Code 66007-5203					PR26991 eceipt th									
	FEC ID number of contributing federal political committee.	С					-y		1	15.3	3						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Memo Item													
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)													
B.	Full Name of Individual (Last, First, Middle Ir AHLSTROM, ALEXIS, , ,		rganization Name	Date of Receipt													
	Mailing Address 3421 OAKWOOD TERRACE																
	City WASHINGTON	State DC	Zip Code 20010-1819	Transaction ID : PR2699187167043 Amount of Each Receipt this Period													
	FEC ID number of contributing federal political committee.	С			<u> </u>				5	76.9	5						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs		M	emc	ltem										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P	P/R Deduction (\$192.30 Bi-Weekly)												
С.	Full Name of Individual (Last, First, Middle Ir ZHOU, JINGXIN, , ,	iitial) or Full C	rganization Name		Date of	Re	eceipt										
	Mailing Address 12011 FAIRVIEW CT				^M 11	1	D D 28	/ Y	2022		ŕ						
	City MINNETONKA	State MN	Zip Code 55343-4516					PR2699									
	FEC ID number of contributing federal political committee.			<u> </u>		,		1.	15.3	3							
	Name of Employer (for Individual) Optum Services, Inc	Occ VP I	upation (for Individual) Fin		M	emo	tem										
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 923.04	I F	P/R Ded	ucti	on (\$38.	46 Bi-We	eekly)								
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	RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12	<i>,</i>					
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	lealth Group Incorporate	d PAC (l	JnitedHealth Group PA	AC)											
	of Individual (Last, First, Middle Initi ARRYL, , ,	al) or Full O	rganization Name		Date of	Re	ceipt								
Mailing Add	ress 9801 DORSET LANE				M M	/	D D D 28	/ Y	y y 2022	Y					
City EDEN PRA	IRIE	State MN	Zip Code 55347-3139	A	Transaction ID : PR2700831967043 Amount of Each Receipt this Period										
	nber of contributing iical committee.	С		42.12											
United Heal	nployer (for Individual) thCare Services Inc		upation (for Individual) Bus Anlys Cnslt	Memo Item											
Receipt For Prima Other		Aggregate	Year-to-Date ▼ 336.96	P/	/R Dedu	uctic	on (\$14.	04 Bi-We	ekly)						
	of Individual (Last, First, Middle Initi , REYNALDO, , ,	al) or Full O	rganization Name		Date of	Re	ceipt								
Mailing Add	iress 2633 SOUTH WEST 31 AVEN			11 28 2022											
City COCONUT	GROVE	State FL	Zip Code 33133-2905		Transaction ID : PR2700833967043 Amount of Each Receipt this Period										
FEC ID nur	nber of contributing ical committee.	С		42.09											
	mployer (for Individual) thCare Services Inc		upation (for Individual) Mkt SIs Mgr Field		Memo Item										
Receipt For Prima Other		Aggregate	Year-to-Date ▼ 336.72	P/	P/R Deduction (\$14.03 Bi-Weekly)										
	of Individual (Last, First, Middle Initi D, MIRANDA, , ,	al) or Full O	rganization Name		Date of	Re	ceipt								
	Iress 1906 N MEYERS RD				M M 11	/	D D D 28	JL	2022 Y						
City LIBERTY L	AKE	State WA	Zip Code 99016-5049	A			-		35756704 is Period	3					
	nber of contributing tical committee.	С			_		y		46.	14					
United Heal	nployer (for Individual) IthCare Services Inc		upation (for Individual) lanager Data Analytics		Me	əmo	Item								
Receipt For Prima Other		Year-to-Date ▼ 369.12	P/	/R Dedu	uctio	on (\$15.	38 Bi-We	ekly)							
SUBTOTAL of	f Receipts This Page (optional)		.					130.3	35						
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\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PA	4C (I	UnitedHealth Group PA	C)								
Α.	Full Name of Individual (Last, First, Middle Initial) or STEARNS, SALLIE, , ,		Drganization Name		ate of	Re	ecei	pt				
	Mailing Address 211 COLONIAL HOMES DRIVE NW #1505 City Sta	ate	Zip Code	_ [M M 11 Trans:	/ acti	L	28 10 · F	/ Y PR2700	202		
	ATLANTA GA	A	30309-1293						eceipt t			
	FEC ID number of contributing federal political committee.						-				42.1	2
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) ot Mgt Cons Clnt Svc		Me	emo	o Ite	əm				
	Bosoint For:	regate	Year-to-Date ▼ 336.96	P/	R Dedu	uctio	on ((\$14.0)4 Bi-W	'eekly))	
В.	Full Name of Individual (Last, First, Middle Initial) or FULBRIGHT, JOHN, , ,	Full C	Drganization Name		ate of	Re	ecei	pt				
	Mailing Address 47-645 UAKEA PLACE				™ 11	1		28	/ Y	202	22	Y
	City Sta KANEOHE HI	ate I	Zip Code 96744-5427				-		PR2700 eceipt t			
	FEC ID number of contributing federal political committee.				_		-				36.8	4
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) 9 Mkt SIs Mgr Field		Me	emo	o Ite	əm				
	Receipt For: Aggr Primary General Other (specify) ▼	regate	Year-to-Date ▼ 294.72	P/I	R Dedu	uctic	on ((\$12.2	8 Bi-W	eekly)		
с.	Full Name of Individual (Last, First, Middle Initial) or WARNER, JONATHAN, , ,	Full C	Drganization Name		Date of	Re	ecei	pt				
	Mailing Address 258 CAMBRIDGE DRIVE				[™] 11	/	L	28	/ Y	202	22	
	City Sta RAMSEY N		Zip Code 07446-1260	Δ					PR2700			
	FEC ID number of contributing federal political committee.						"		, sooipt t		42.1	2
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) Clnt Svc Acct Mgt		Me	emo	o Ite	em				
	Receipt For: Aggr Primary General Other (specify)	regate	Year-to-Date ▼ 336.96	P/	R Dedı	uctio	on	(\$14.0)4 Bi-W	′eekly))	
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1						
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NAME OF COMMITTEE (In Full)		_							
ight angle UnitedHealth Group Incorporat	ted PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle In	nitial) or Full O	rganization Name							
A. WAYLAND, CHARLES, , ,			Date of Receipt						
Mailing Address 5601 MATOAKA RD			11 28 2022						
City	State	Zip Code	Transaction ID : PR2700924667043						
RICHMOND	VA	23226-2329	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		576.90						
Name of Employer (for Individual)	000	upation (for Individual)	Memo Item						
Optum Services, Inc		P Transformation							
Receipt For:	Aggregate	Year-to-Date ▼	-						
Other (specify)		4615.20	P/R Deduction (\$192.30 Bi-Weekly)						
			1						
Full Name of Individual (Last, First, Middle In	nitial) or Full O	rganization Name							
B. MCSWEENEY, ERIN, , , Mailing Address 1128 EDINGTON PLACE			Date of Receipt						
			11 28 2022						
	State FL	Zip Code	Transaction ID : PR2701818067043						
MARCO ISLAND FEC ID number of contributing		34145-2006	Amount of Each Receipt this Period						
federal political committee.	С		576.90						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Chief People Officer	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		4615.20	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle In C. OCONNELL, DANIEL, , ,	nitial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3325 W 18TH AVENUE			11 28 2022						
City	State	Zip Code	Transaction ID : PR2701819667043						
DENVER	СО	80204-1681	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		230.76						
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item						
United HealthCare Services Inc Receipt For:		Govt Affs							
Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$115.38 Bi-Weekly)						
Other (specify)		2653.74							
SUBTOTAL of Receipts This Page (optional)			1384.56						
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	edHealth Group Incorporated	PAC (L	JnitedHealth Group	PAC)							
	ame of Individual (Last, First, Middle Initial CE, JAMIE, , ,) or Full Or	rganization Name		Date of	Rece	eipt				
Mailing	Address 1433 POWDER DRIVE				M M / D D / Y Y Y Y 11 28 2022						
City State O FALLON MO FEC ID number of contributing C federal political committee. C			Zip Code 63366-1398		Transaction ID : PR2701823067043 Amount of Each Receipt this Period						
						-,-		-	576.9	90	
	of Employer (for Individual) HealthCare Services Inc		upation (for Individual) Plan CEO		Me	mo It	tem				
	ot For: Primary General Dther (specify) ▼	Aggregate		P/R Deduction (\$192.30 Bi-Weekly)							
	ame of Individual (Last, First, Middle Initial RKS, KEVIN, , ,) or Full Or	rganization Name		Date of	Rece	eipt				
	Address 10681 S CEDAR NILES BLVD	State Zip Code			11 28 2022 Transaction ID : PR2701825567043						
City OLATH	HE	KS							3		
FEC IE	D number of contributing political committee.	Occupation (for Individual) HIth Plan CEO			Amount of Each Receipt this Period						
	of Employer (for Individual) HealthCare Services Inc				Memo Item						
	t For: Primary General Dther (specify) ▼	Aggregate		P/R Deduction (\$96.15 Bi-Weekly)							
	ame of Individual (Last, First, Middle Initial) or Full Or	rganization Name		Date of	Rece	eipt				
	Address 4672 BITTERN LANE				M M M	L	D D D 28		y y 2022		
City LEBAI	NON	State OH	Zip Code 45036-7562	-					0146704 s Period	3	
	D number of contributing political committee.	С				,		J	115.3	38	
Optum	of Employer (for Individual) Services, Inc		upation (for Individual) Clin Ops		Me	emo It	tem				
	ot For: Primary General Dther (specify)	Aggregate		P/R Deduction (\$38.46 Bi-Weekly)							
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	IMITTEE (In Full)										
> UnitedHea	Ith Group Incorporated	PAC (U	nitedHealth Group PA	C)							
Full Name of Ind A. MERZLICKE	dividual (Last, First, Middle Initia R, CAREY, , ,) or Full Org	ganization Name	Dat	e of F	Receipt					
Mailing Address	950 BENTLEY PARK CIRCLE				M M / D D / Y Y Y Y 11 28 2022						
City State O FALLON MO FEC ID number of contributing C federal political committee. C			Zip Code 63368-8022				PR2703 Receipt th	24696704 iis Period	3		
								115.3	38		
United HealthCa	yer (for Individual) ire Services Inc	Occup Dir Fi	pation (for Individual) in		Merr	no Item					
Receipt For: Primary Other (spe	General	Aggregate Y	/ear-to-Date ▼ 923.04	P/R I	Deduc	tion (\$38	8.46 Bi-We	eekly)			
Full Name of Ind B. BROWN, DI	dividual (Last, First, Middle Initia ANE, , ,) or Full Or	ganization Name	Dat	e of F	Receipt					
	502 BERRYMANS LANE	1-		[™] 11	/ D 28		y y 2022	Y			
City REISTERSTOW	/N	State MD	Zip Code 21136-6003					25086704	3		
FEC ID number federal political	of contributing	Occupation (for Individual) Dir Clin Pract Perf			Amount of Each Receipt this Period						
Name of Employ United HealthCa	yer (for Individual) re Services Inc				Mem	no Item					
Receipt For:		Aggregate Y	∕ear-to-Date ▼		1						
Other (spe	General ecify) ▼		336,96	P/R Deduction (\$14.04 Bi-Weekly)							
Full Name of Ind	dividual (Last, First, Middle Initia FODD, , ,) or Full Org	ganization Name	Dat	e of F	Receipt					
_	11328 W 142ND STREET				м 11	/ D 28	3	2022 Y			
City OVERLAND PA	RK	State KS	Zip Code 66221-8060					63956704 iis Period	3		
FEC ID number federal political	0	С			_	y .	,	42.7	12		
United HealthCa	yer (for Individual) are Services Inc		pation (for Individual) wk Prgms		Men	no Item					
Receipt For: Primary Other (spe	General	/ear-to-Date ▼ 336.96	P/R	Deduc	tion (\$14	4.04 Bi-W	eekly)				
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NAME OF COMMI	, e	ame and a	ddress of any political committee	to solicit	contri	butions	from sucr	n committe) e.		
		I PAC (L	JnitedHealth Group PA	C)							
Full Name of Indivi WESTRA, ROB	dual (Last, First, Middle Initia ERT, , ,	l) or Full Oi	rganization Name	Date	of R	eceipt					
Mailing Address 4(042 E ROBIN LANE				M M / D D / Y Y Y Y 11 28 2022						
City PHOENIX		State AZ	Zip Code 85050-6875		Transaction ID : PR2704143467043 Amount of Each Receipt this Period						
FEC ID number of federal political cor	0	С			т. і - ур. і		42.0)9			
Name of Employer United HealthCare	. ,		upation (for Individual) 5 VP SIs Acct Mgmt		Mem	o Item					
Receipt For: Primary Other (specif	General y) ▼	Aggregate	Year-to-Date ▼ 336.72	P/R Deduction (\$14.03 Bi-Weekly)							
Full Name of Indivi B. HOROHO, PA	dual (Last, First, Middle Initia TRICIA, , ,	l) or Full Oi	rganization Name	Date	of R	eceipt					
	Mailing Address 7808 PALMILLA COURT					28		2022	Y		
City REUNION		FL 34747-6417						94667043	i		
FEC ID number of federal political con	0	C Occupation (for Individual) Bus Segment CEO			Amount of Each Receipt this Period						
Name of Employer Optum Services, Inc					Mem	o Item					
Receipt For: Primary Other (specif	General		Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Indivi c. DELANY, AN	dual (Last, First, Middle Initia DREW, , ,	l) or Full Oi	rganization Name	Date	of R	eceipt					
Mailing Address 20	99 GARLAND AVENUE			1	^M	28		2022	Y		
City DECATUR		State GA	Zip Code 30030-4940				PR2704	19636704 is Period	3		
FEC ID number of federal political con	0	С				, .	. ,	576.9	90		
Name of Employer United HealthCare	,	Occu VP C	upation (for Individual) Dps		Mem	o Item					
Receipt For: Primary Other (specif	General	Aggregate	Year-to-Date ▼ 4615.20	P/R I)educt	tion (\$19	2.30 Bi-W	/eekly)			
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NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle A. JOHAR, RAVI, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 405 ARGUS MANOR CT			11 28 2022						
City CHESTERFIELD	State MO	Zip Code 63017-2469	Transaction ID : PR2705065167043 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		42.12						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ned Dir	Memo Item						
Receipt For: Primary General Other (specify) $ earrow$	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. DAUN, JESSICA , , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address W273N6194 BASHAM LAN			11 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
City SUSSEX	State WI	Zip Code 53089-4702	Transaction ID : PR2705966267043 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		42.12						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) I VP, Key Accts-Spec Ben	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Middle ZELLER, TRISHA, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 290 PRESERVE CT			M M / D D / Y Y Y Y Y 11 28 2022						
City CHANHASSEN	State MN	Zip Code 55317-8716	Transaction ID : PR2705971467043 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		42.12						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef of Staff	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			126.36						
TOTAL This Period (last page this line number	er only)								

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorp	orated PAC (l	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Mic A. SPADE, NATHAN, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1060 ELLIOTT LANE			11 / D D / Y Y Y Y 28 / 2022						
City YORK	State PA	Zip Code 17403-3421	Transaction ID : PR2705987067043						
FEC ID number of contributing federal political committee.	C	17403-3421	Amount of Each Receipt this Period						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1846.08	P/R Deduction (\$76.92 Bi-Weekly)						
Full Name of Individual (Last, First, Mic BARBARO, PHILIP, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 670 ARBUTUS STREE			11 28 2022						
City MIDDLETOWN	State CT	Zip Code 06457-7106	Transaction ID : PR2705988267043 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		576.90						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) National Sales	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Mic C. KMIEC, ADAM, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 4736 PRAIRIE DUNES	SWAY		11 28 / Y Y Y Y Y 11 28						
City EAGAN	State MN	Zip Code 55123-2352	Transaction ID : PR2705989267043 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		576.90						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optio	nal)		1384.56						
TOTAL This Period (last page this line n	umber only)	•••••							

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171			Use separate schedule(s)	(ch	(check only one)						
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page		K 11a		11b	11c	12		
	y information copied from such Reports and Sta										
or	for commercial purposes, other than using the n	ame and a	ddress of any political committee	to s	olicit con	trib	utions f	from such	h committ	ee.	
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	C)							
Α.	Full Name of Individual (Last, First, Middle Initia PETRONE, DAMIAN, , ,	l) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 703 DEAN CT				M M / D D / Y Y Y Y 11 28 2022						
	City WEST CHESTER	State PA	Zip Code 19382-2100						41896704 nis Period	3	
	FEC ID number of contributing federal political committee.	С					7		57.	69	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mgt Cons Clnt Svc		Me	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate		P/R Dedu	uctio	on (\$19.	.23 Bi-We	eekly)			
в.	Full Name of Individual (Last, First, Middle Initia BARTHOLET, DANIEL, , ,	l) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 5918 VALEWOOD DRIVE					/	D D D 28		2022	Y	
	MINNETONKA	MN	55345-6545	-					45116704	3	
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period						
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP	upation (for Individual) Tax		Me	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initia MULDOON, ALLISON, , ,	l) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 519 E LURAY AVENUE				M M 11	/	28		y y 2022	Y	
	City ALEXANDRIA	State VA	Zip Code 22301-1605						45276704 his Period	3	
	FEC ID number of contributing federal political committee.	С					y .		288.	45	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) : Affs Dir		Me	emo	Item				
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 2307.60				P/R Deduction (\$96.15 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)						,	,	923.	04	
Т	OTAL This Period (last page this line number or	ly)	•••••••	-				-			

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		Detailed Summary Page	≭ 11a 11b 11c 12						
			13 14 15 16 1						
or for commercial purposes, other than usin	nd Statements mag the name and a	ay not be sold or used by any penderess of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group PA	NC)						
Full Name of Individual (Last, First, Midd MOORE, KEVIN, , ,	le Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 9405 EAGLE NEST LAN			11 28 / Y Y Y Y 2022						
City MIDDLETON	State WI	Zip Code 53562-5647	Transaction ID : PR2706453567043 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		576.90						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) I Plan CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Primary General General								
Full Name of Individual (Last, First, Midd MCMAHON, ANDREW, , ,	le Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 4125 DREW AVENUE S	HTUC		11 28 2022						
City MINNEAPOLIS	State MN	Zip Code 55410-1018	Transaction ID : PR2740509067043 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	42.09								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.72	P/R Deduction (\$14.03 Bi-Weekly)						
Full Name of Individual (Last, First, Midd C. HUNT, TIMOTHY, , ,	le Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 5594 MARSHALL HOUS	ECT		M M / D D / Y Y Y Y 11 28 2022						
City BURKE	State VA	Zip Code 22015-2141	Transaction ID : PR2740514067043 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		115.38						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional TOTAL This Period (last page this line nur	,	<u>+ + + + + + + + + + </u>	734.37						

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	for each category of the Detailed Summary Page	×	11a 13		11b 14		11c	12	17				
Any information copied from such Reports and s or for commercial purposes, other than using th				r the p		oose c		oliciting	contribu	tions			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (I	JnitedHealth Group PA	C)										
Full Name of Individual (Last, First, Middle In WEINBERG, EDWARD, , ,	itial) or Full C	rganization Name	D	Date of Receipt									
Mailing Address 8625 APPLETON COURT			м м 11	/	D 28		/ Y	ү ү 2022	Y				
	State VA	Zip Code		Transaction ID : PR2740514867043									
ANNANDALE	VA	22003-3806	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		115.38										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) sion CEO	Memo Item										
Receipt For:	Anareaste	Year-to-Date ▼	\neg										
Primary General Other (specify) ▼		923.04	P/F	R Dedu	uctic	on (\$38	8.46	6 Bi-We	ekly)				
Full Name of Individual (Last, First, Middle In B. ERICKSON, ELIZABETH, , ,	itial) or Full C	rganization Name	Date of Receipt										
Mailing Address 5301 CLINTON AVENUE							11 28 / Y Y Y Y 2022						
City	State	Zip Code		Transa	actio	on ID	: Pl	R27405	1616704	3			
MINNEAPOLIS	MN	A	mount	of	Each	Red	ceipt th	is Period					
FEC ID number of contributing federal political committee.	C					,		-11-	576.	90			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P, Industry & Ntwk Rel	10	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle In C. DELANEY, KEVIN, , ,	itial) or Full C	rganization Name	D	ate of	Re	ceipt							
Mailing Address 2876 GENEVA ST				^M 11	/	D 28		/ Y	ү 2022	Y			
City	State	Zip Code		Trans	acti	on ID	: P	R27407	75926704	3			
DENVER	CO	80238-3035	A	mount	of	Each	Red	ceipt th	is Period				
FEC ID number of contributing federal political committee.	С			_		y .		g	115.	38			
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP I	upation (for Individual) ≂in		Me	emo	Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)		•	Γ						807.	66			
TOTAL This Period (last page this line number			Ē			,		, 					

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11b	11c	12	,		
Any information copied from such Reports a or for commercial purposes, other than using										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middl A. PONS, NATALIE, , ,	e Initial) or Full O	rganization Name	Date	of Re	eceipt					
Mailing Address 3209 GALLERIA UNIT 803				M - M / D - D / Y - Y - Y - Y Y 11 28 2022 2022 Transaction ID : PR2740761967043 Amount of Each Receipt this Period						
City EDINA	State MN	Zip Code 55435-2547								
FEC ID number of contributing federal political committee.	С			_		-	576.9	90		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef Compli Off/SD Gen Cnsl		Memo	o Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middl B. ALTIERI, DOMINIQUE, , ,	e Initial) or Full O	rganization Name	Date	of Re	eceipt					
Mailing Address 6611 HIGHWAY 100	State	Zip Code	1 í	1	28		y y 2022			
City NASHVILLE	TN	37205-4226					762567043 is Period	\$		
FEC ID number of contributing federal political committee.	С					42.0)9			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		Memo	o Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.72	P/R De	∋ducti	on (\$14.	03 Bi-We	eekly)			
Full Name of Individual (Last, First, Middl C. FEHR, STEPHANIE, , ,	e Initial) or Full O	rganization Name	Date	of Re	eceipt					
Mailing Address 6601 BLACKFOOT PASS			M 11	1	28		2022			
City EDINA	State MN	Zip Code 55439-1103					02056704 is Period	3		
FEC ID number of contributing federal political committee.	С			_	, .	, y	576.9	90		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 Mkt Grp Chief People Off		Mem	o Item					
Receipt For: Primary General Other (specify)	Aggregate	Aggregate Year-to-Date ▼ 4615.20				P/R Deduction (\$192.30 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optiona					, .	. ,	1195.8	9		
TOTAL This Period (last page this line num	ber only)				41-1	40-				

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)							
11			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1 ¹						
	y information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions						
\setminus	NAME OF COMMITTEE (In Full)									
	UnitedHealth Group Incorporate	ed PAC (UnitedHealth Group P	AC)						
Α.	Full Name of Individual (Last, First, Middle Init PROCHNO, MICHAEL, , ,	ial) or Full C	Drganization Name	Date of Receipt						
	Mailing Address 4640 ST JAMES GATE			11 28 2022						
	City EXCELSIOR	State MN	Zip Code 55331-9397	Transaction ID : PR2748021967043 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		115.38						
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) KA VP SIs Acct Mgt	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)						
в.	Full Name of Individual (Last, First, Middle Init WARD, BRIAN, , ,	ial) or Full C	Drganization Name	Date of Receipt						
	Mailing Address 22461 ARCADIA BLUFFS			11 28 2022						
	City	State	Zip Code	Transaction ID : PR2749724167043						
	SOUTH LYON FEC ID number of contributing	С	48178-8735	Amount of Each Receipt this Period 42.09						
	federal political committee.									
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Ntwk Contrctng	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.72	P/R Deduction (\$14.03 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Init CHECKA, SREENIVAS, , ,	ial) or Full C	Drganization Name	Date of Receipt						
	Mailing Address 8751 BIG WOODS LN			11 / 28 / Y Y Y Y 2022						
	City EDEN PRAIRIE	State MN	Zip Code 55347-5348	Transaction ID : PR2750285567043 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		42.12						
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) Product	P/R Deduction (\$14.04 Bi-Weekly)						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 336.96							
s	UBTOTAL of Receipts This Page (optional))	199.59						
Т	OTAL This Period (last page this line number of	only)	•••••••••••••••••••••••••••••••••••••••	•						

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
or for commercial purposes, other than using			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	4C)							
Full Name of Individual (Last, First, Middle SEVERANCE, DAVID, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 2160 N MARION ST			11 28 2022							
City DENVER	State CO	Zip Code 80205-5245	Transaction ID : PR2750288167043							
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) d Dir	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. TAIT, ROBYN, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 31 LIPTON LANE			11 28 2022							
City LANGHORNE	State PA	Zip Code 19047-5782	Transaction ID : PR2754215967043 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		42.12							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Product	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.96	P/R Deduction (\$14.04 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. ORIE, TIMOTHY, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 23 BISHOP LANE			11 28 2022							
City SUDBURY	State MA	Zip Code 01776-1701	Transaction ID : PR2754244167043							
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P People Team	Memo Item							
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			734.40							
TOTAL This Period (last page this line numb	per only)	·····								

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		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
			person for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)	ated PAC (I	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle PAGET, JAMIE, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 15268 LOUISIANA AVE			11 28 2022									
City SAVAGE	State MN	Zip Code 55378-5654	Transaction ID : PR2754246067043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		115.38									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Gen Mgmt	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. KONTOR, JOHN, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 123A SPA VIEW AVE			11 28 2022									
City ANNAPOLIS	State MD	Zip Code 21401-3542	Transaction ID : PR2754673667043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		288.45 Memo Item									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Advisory Svc										
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 2307,60	P/R Deduction (\$96.15 Bi-Weekly)									
Full Name of Individual (Last, First, Middle C. BOTHRA, SIDDHARTH, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 17200 SE 45TH STREET			M M / D D / Y Y Y Y 11 28 2022									
City BELLEVUE	State WA	Zip Code 98006-6510	Transaction ID : PR2754720767043 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		576.90									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment COO	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			980.73									
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ITE			Use separate schedule(s)	(check only one)										
			for each category of the Detailed Summary Page	X 11a 11b 11c 12										
	y information copied from such Reports and Sta for commercial purposes, other than using the n													
$\overline{)}$	NAME OF COMMITTEE (In Full)													
	UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	(C)										
	Full Name of Individual (Last, First, Middle Initia SEVILLE, KATHERINE, , ,	l) or Full O	rganization Name	Date of Receipt										
	Mailing Address 333 ADAMS ST			11 28 2022										
	City DECATUR	State GA	Zip Code 30030-5205	Transaction ID : PR2755317267043 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		57.69										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) roduct Manager	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.52	P/R Deduction (\$19.23 Bi-Weekly)										
	Full Name of Individual (Last, First, Middle Initia WEILER, KATHY, , ,	l) or Full O	rganization Name	Date of Receipt										
	Mailing Address 1250 CANTON AVENUE	1		11 / 28 / Y Y Y Y Y 2022										
	City MILTON	State MA	Zip Code 02186-2414	Transaction ID : PR2755347667043 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		576.90										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef Customer Officer	Memo Item										
	Receipt For:	Aggregate	Year-to-Date V											
	Other (specify) ▼		4615.20	P/R Deduction (\$192.30 Bi-Weekly)										
C.	Full Name of Individual (Last, First, Middle Initia WILSON, DANIEL, , ,	l) or Full O	rganization Name	Date of Receipt										
	Mailing Address 15619 SWANSCOMBE LOOP			11 28 2022										
	City UPPER MARLBORO	State MD	Zip Code 20774-8412	Transaction ID : PR2755347867043										
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period										
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Dir N	upation (for Individual) /Iktg	Memo Item										
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 460.80	P/R Deduction (\$19.20 Bi-Weekly)										
SI	JBTOTAL of Receipts This Page (optional)			692.19										
т	OTAL This Period (last page this line number on	ly)	••••••											

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17			Use separate schedule(s)	(check only one)								
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
	y information copied from such Reports and Sta for commercial purposes, other than using the r											
$\overline{\ }$	NAME OF COMMITTEE (In Full)											
	UnitedHealth Group Incorporated	d PAC (l	UnitedHealth Group PA	C)								
A.	Full Name of Individual (Last, First, Middle Initia ABRAHAM, SANTIAGO, , ,	al) or Full O	Organization Name	Date of Receipt								
	Mailing Address 4320 COTTONWOOD LN			M M / D D / Y Y Y 11 28 2022	Y							
	City EXCELSIOR	State MN	Zip Code 55331-9328	Transaction ID : PR275565216704 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		576.								
	Name of Employer (for Individual) Optum Services, Inc		eupation (for Individual) s Seg CIO	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Initia KRAUTKRAMER, MITCHELL, , ,	al) or Full O	Organization Name	Date of Receipt								
	Mailing Address 8729 COTTONWOOD LANE			11 28 2022	Y							
	City EDEN PRAIRIE	State MN	Zip Code 55347-2216	Transaction ID : PR275599576704 Amount of Each Receipt this Period	-							
	FEC ID number of contributing federal political committee.	С		115.38								
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) A VP	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)								
C.	Full Name of Individual (Last, First, Middle Initia ASHENHURST, KARLA, , ,	al) or Full O	Organization Name	Date of Receipt								
	Mailing Address 295 N ELM GROVE ROAD UNIT C	01-11-	7. 0.1	11 / D D / Y Y Y 11 28 2022								
	City BROOKFIELD	State WI	Zip Code 53005-6212	Transaction ID : PR275617366704 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		173.	07							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) rt Affs Dir	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1384.56	P/R Deduction (\$57.69 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)			865.	35							
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\setminus	NAME OF COMMITTEE (In Full)			_										
\rangle	UnitedHealth Group Incorporate	d PAC (l	JnitedHea	th Group PA	AC)									
٩.	Full Name of Individual (Last, First, Middle Initi MASONER, AUDREY, , ,	al) or Full O	rganization Nai		Date of Receipt									
	Mailing Address 15400 MAPLE STREET					^M 11	/		28	/ Y)22	Y	
	City	State	Zip Code			Trans	acti	ion I	D : P	R2756	3598	6704	3	
	OVERLAND PARK	KS	66223-32	262	_	Amount	of	Eac	h Re	ceipt th	nis P	eriod		
	FEC ID number of contributing federal political committee.	С						-	_	-9-		115.3	88	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Ind Health Plan Op	,		Me	emo	lter	n					
	Receipt For:		Year-to-Date ▼											
	Primary General Other (specify) ▼			923.04		P/R Ded	uctio	on (\$	38.4	6 Bi-W	eekly	()		
3.	Full Name of Individual (Last, First, Middle Initi HERMELINGIII, THEODORE, , ,	al) or Full O	rganization Nai	ne		Date of	Re	ceip	,t					
	Mailing Address 117 5TH STREET					M M	1		28	/ Y		22	Y	
	City	State	Zip Code			Trans	acti	on I	D : P	R2756	5216	6704	3	
	WILMETTE	IL	60091-34	05		Amount	of	Eac	h Re	ceipt th	nis P	eriod		
	FEC ID number of contributing federal political committee.	С		<u> </u>		-		-		576.9	90			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Ind Mktg Bus Dev		Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$192.30 Bi-Weekly)											
<u> </u>	Full Name of Individual (Last, First, Middle Initi SATTERWHITE, ERIN, , ,	al) or Full O	rganization Nai	ne		Date of	Re	ceip						
	Mailing Address 1722 MONUMENT STREET					M M 11	/	D	28	/ Y		22	Y	
	City	State	Zip Code			Trans	acti	ion l	D : P	PR2757	4357	6704	3	
	CONCORD	MA	01742-53	10		Amount	of	Eac	h Re	ceipt th	nis P	eriod		
	FEC ID number of contributing federal political committee.	С						y		y		115.3	38	
	Name of Employer (for Individual)	Occi	upation (for Ind	ividual)		M	emo	lter	m					
	Optum Services, Inc		Gen Mgmt	,										
	Receipt For:		Year-to-Date ▼	,										
	Primary General Other (specify)			923.04		P/R Ded	uctio	on (\$	\$38.4	6 Bi-W	eekly	/)		
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	NAME OF COMMITTEE (In Full)														
	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group PA	AC)											
Α.	Full Name of Individual (Last, First, Middle Init MALLEY, KENNETH, , ,	ial) or Full O	rganization Name	Date	Date of Receipt										
	Mailing Address 764 WEST SADDLE RIVER R			1·		/ D D 28	/ Y	y 2022	Y Y 2	1					
	City HO HO KUS	State NJ	Zip Code 07423-1645			tion ID : FEach R									
	FEC ID number of contributing federal political committee.	С				7		57	76.90						
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Gen Mgmt		Mem	o Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)											
	Full Name of Individual (Last, First, Middle Init BARTLES, SARA, , ,	ial) or Full O	rganization Name	Date	of R	eceipt									
	Mailing Address 25263 RODEO LANE			11 28 / Y Y Y Y Y 2022											
	City	State	Zip Code		Transaction ID : PR2759243367043										
	PARMA	ID	83660-7107	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С		42.09											
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) c Dir Gen Mgmt		Mem	o Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 294.63	P/R Deduction (\$14.03 Bi-Weekly)											
	Full Name of Individual (Last, First, Middle Init AZAM, MISHAEL, , ,	ial) or Full O	rganization Name	Date	of R	eceipt									
	Mailing Address 629 JEFFERSON AVENUE			M 1	1	28		y 2022	2						
	City CHERRY HILL	State NJ	Zip Code 08002-3704			tion ID : Each R									
	FEC ID number of contributing federal political committee.	С				y	9	11	15.50						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs		Mem	o Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 924.00	P/R D	educ	tion (\$38.	50 Bi-We	eekly)							
s	JBTOTAL of Receipts This Page (optional)					y 1	9	7:	34.49						
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)											
Full Name of Individual (Last, First, Middle A. HUNT, BRITTNEY, , ,	Initial) or Full C	rganization Name	C	Date of Receipt										
Mailing Address 7287 WINTERCREEK LAN	NE		M M / D D / Y Y Y Y 11 28 2022 Transaction ID : PR2759756467043											
City TALLAHASSEE	State FL	Zip Code 32309-7401	A							3				
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/	R Dedi	uctio	on (\$	38.4	6 Bi-We	eekly)					
Full Name of Individual (Last, First, Middle SCHLAIFER, MARISSA, , ,	Initial) or Full C	rganization Name		ate of	Re	ceipt	t							
Mailing Address 1050 N STUART ST #400	1			™M 11	/		D 28	/ Y	2022	Y				
City ARLINGTON	State VA	Zip Code 22201-5727							75686704 nis Period	3				
FEC ID number of contributing federal political committee.	C		576.90											
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Regl Affs		Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)											
Full Name of Individual (Last, First, Middle DIFRONZO, CHRISTINE, , ,	Initial) or Full C	rganization Name		Date of	Re	eceipt	t							
Mailing Address 6 CRAIG LN				^M 11	/		28		y y 2022					
City HINGHAM	State MA	Zip Code 02043-3411	A						97816704 nis Period	3				
FEC ID number of contributing federal political committee.	С			_		y			115.	38				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Analytics		Me	emo	b Iten	n							
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	y information copied from such Reports and State for commercial purposes, other than using the na												
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	UnitedHealth Group PA	C)									
A.	Full Name of Individual (Last, First, Middle Initial) KELLOGG, PETER, , ,	or Full O	Organization Name	Date of Receipt									
	Mailing Address 1515 JEFFERSON AVENUE			M M / D D / Y Y Y Y 11 28 2022									
	City NEW ORLEANS	State LA	Zip Code 70115-4120	Transaction ID : PR2759984167043									
			10110-4120	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		115.38									
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item									
	United HealthCare Services Inc	Sr A	Assc Gen Counsel										
		Aggregate	Year-to-Date ▼										
	Primary General Other (specify) ▼		923.04	P/R Deduction (\$38.46 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initial) ROBERT, MICHAEL, , ,	or Full O	Organization Name	Date of Receipt									
	Mailing Address 79373 FITZGERALD CHURCH ROAD	1		11 28 2022									
	City COVINGTON	State LA	Zip Code 70435-7809	Transaction ID : PR2759986067043 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		P/R Deduction (\$38.46 Bi-Weekly)									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Compli										
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04										
с.	Full Name of Individual (Last, First, Middle Initial) DECKER, WYATT, , ,	or Full O	Organization Name	Date of Receipt									
	Mailing Address 1482 HUNTER DRIVE			11 28 2022									
	City	State	Zip Code	Transaction ID : PR2760134067043									
	WAYZATA	MN	55391-9658	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		576.90									
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CEO	Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)									
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17											
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.											
NAME OF COMMITTEE (In Full)														
UnitedHealth Group Incorpo	orated PAC (I	JnitedHealth Group P/	AC)											
Full Name of Individual (Last, First, Midd GRUHN, GINA, , ,	lle Initial) or Full O	rganization Name	Date of Receipt											
Mailing Address 13 WEATHER VANE DF	RIVE		M M / D D / Y Y Y Y 11 28 2022											
City MORRISTOWN	State NJ	Zip Code 07960-4758	Transaction ID : PR2760769467043 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	C		576.90											
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) CInt Svc Acct Mgmt	Memo Item											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)											
Full Name of Individual (Last, First, Midd B. MASTEN, DALE, , ,	lle Initial) or Full O	rganization Name	Date of Receipt											
Mailing Address 9845 BENNINGTON DR	IVE		11 / 28 / 2022											
City	State OH	Zip Code	Transaction ID : PR2760775867043											
SHARONVILLE		45241-3619	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	C		576.90											
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Regl Affs	Memo Item											
Receipt For:	Aggregate	Year-to-Date 🔻												
Other (specify) ▼		4615.20	P/R Deduction (\$192.30 Bi-Weekly)											
Full Name of Individual (Last, First, Midd DELMONICO, SUSAN, , ,	lle Initial) or Full O	rganization Name	Date of Receipt											
Mailing Address 12 MULBERRY CIRCLE	1		11 / D D / Y Y Y Y Y 2022											
City JOHNSTON	State RI	Zip Code 02919-2519	Transaction ID : PR2760781767043 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		346.14											
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) c Gen Counsel	Memo Item											
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2769.12	P/R Deduction (\$115.38 Bi-Weekly)											
SUBTOTAL of Receipts This Page (optional	al)		1499.94											
TOTAL This Period (last page this line nur	nber only)													

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	y information copied from such Reports and State for commercial purposes, other than using the na															
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	C)												
Α.	Full Name of Individual (Last, First, Middle Initial) BARR, CHRISTY M, , ,	or Full O	rganization Name		Date of Receipt											
	Mailing Address 6348 CARRIAGE OAK WAY				11 28 2022											
	City LIBERTY TWP	State OH	Zip Code 45011-2763	Transaction ID : PR2760819667043 Amount of Each Receipt this Period												
	FEC ID number of contributing federal political committee.	С		115.38												
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Pharm Ops		Me	emo	lter	m								
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/	R Dedu	uctic	on (\$	\$38.4	6 Bi-We	eekly)						
B.	Full Name of Individual (Last, First, Middle Initial) CRAWFORD, KEVIN, , ,	or Full O	rganization Name		Date of	Re	ceip	ot								
	Mailing Address 744 SHELLEY LANE	0	7.0.1		11 / D D / Y Y Y Y 11 28 2022											
	City FRANKLIN	State TN	Zip Code 37064-1621	Transaction ID : PR2760825167043 Amount of Each Receipt this Period												
	FEC ID number of contributing federal political committee.	С		Memo Item												
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs													
	Receipt For: µ Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2769.12	P/R Deduction (\$115.38 Bi-Weekly)												
C.	Full Name of Individual (Last, First, Middle Initial) VELASCO, JOEL, , ,	or Full O	rganization Name		Date of	Re	eceip	ot								
	Mailing Address 6352 31 PLACE NW ST	0			11 	/		28 ^D	/ Y	2022						
	City WASHINGTON	State DC	Zip Code 20015-2358	A						93856704 nis Period	3					
	FEC ID number of contributing federal political committee.	С				_	y		y	576.	90					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Intl Relations		Me	emo	b Itei	m								
	Receipt For: A Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4615.20	P/	'R Dedi	uctio	on (\$	\$192.	30 Bi-V	Veekly)						
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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17										
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	NAME OF COMMITTEE (In Full)		···· ··· · · · · · · · · · · · · · · ·											
\rangle	UnitedHealth Group Incorporate	d PAC (I	UnitedHealth Group P	AC)										
А.	Full Name of Individual (Last, First, Middle Initi WINN, JOSEPH, , ,	al) or Full C	Organization Name	Date of Receipt										
	Mailing Address 4401 GREGG ROAD			11 28 2022										
	City BROOKEVILLE	State MD	Zip Code 20833-1033	Transaction ID : PR2760940267043 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		576.90										
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Govt Affs	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)										
в.	Full Name of Individual (Last, First, Middle Initi MILLER, CORINNA, , ,	al) or Full C	Organization Name	Date of Receipt										
	Mailing Address 6083 OLD BRICKSTORE ROA			11 / 28 / Y Y Y Y 2022										
	City	State NC	Zip Code	Transaction ID : PR2761090067043										
	GREENSBORO		27455-8335	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		57.69										
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) r Gen Mgmt	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 461.52	P/R Deduction (\$19.23 Bi-Weekly)										
<u> </u>	Full Name of Individual (Last, First, Middle Initi OBRIEN, MICHAEL, , ,	al) or Full C	Organization Name	Date of Receipt										
	Mailing Address 11017 CAVELL CIR			11 / D D / Y Y Y Y 2022										
	City BLOOMINGTON	State MN	Zip Code 55438-2284	Transaction ID : PR2761138267043 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		144.21										
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Tax	Memo Item										
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1153.68	P/R Deduction (\$48.07 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			778.80										
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	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (l	JnitedHealth Group PA	AC)										
	Full Name of Individual (Last, First, Middle ZITO, MOLLIE, , ,	Initial) or Full O	rganization Name	Date of Receipt										
	Aailing Address 2445 WEST LOGAN BLVD UNIT 3E			11 28 2022										
	City CHICAGO	State IL	Zip Code 60647-2043	Transaction ID : PR2762092867043 Amount of Each Receipt this Period										
	EC ID number of contributing ederal political committee.	С		28.83										
	Name of Employer (for Individual) Jnited HealthCare Services Inc		upation (for Individual) Regl Affs	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.64	P/R Deduction (\$9.61 Bi-Weekly)										
	Full Name of Individual (Last, First, Middle ARYA, RAJIV, , ,	Initial) or Full O	rganization Name	Date of Receipt										
	Mailing Address 4 GALWAY ROAD			M M / D D / Y Y Y Y 11 28 2022										
	City SKILLMAN	State NJ	Zip Code 08558-1731	Transaction ID : PR2762648767043 Amount of Each Receipt this Period										
	EC ID number of contributing ederal political committee.	С		115.38 Memo Item										
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Director, Advisory Svcs											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)										
	Full Name of Individual (Last, First, Middle SONNIER, SUSAN, , ,	Initial) or Full O	rganization Name	Date of Receipt										
	Aailing Address 301 DEMONBREUN ST UN	NIT 1805		11 28 2022										
	Dity NASHVILLE	State TN	Zip Code 37201-2248	Transaction ID : PR2762649967043 Amount of Each Receipt this Period										
	EC ID number of contributing ederal political committee.	С		346.14										
	Name of Employer (for Individual) Jnited HealthCare Services Inc		upation (for Individual) /ktg Bus Dev	Memo Item										
Ì	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2769.12	P/R Deduction (\$115.38 Bi-Weekly)										
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	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated											Sommit			
A.	Full Name of Individual (Last, First, Middle Initial) CLAYTON, JUSTIN, , ,) or Full O	rgar	nization Name		Date of	Re	_	·						
	Mailing Address 163 BRIER RIDGE DRIVE	State		Zip Code		11 28 2022									
	DURHAM	NC		27703-0339	Transaction ID : PR2762749967043 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С						7			-gr-	230.			
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) t Affs		Me	emo	o It∉	em						
	Receipt For: // Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 1846.08	P/	R Dedu	uctio	on	(\$76.9	92 8	Bi-We	ekly)			
В.	Full Name of Individual (Last, First, Middle Initial) TARVESTAD, KATHERINE, , ,) or Full O	rgar	nization Name	C	Date of	Re	ecei	ipt						
	Mailing Address 5095 KELSEY TERR	Otata		Zin Code		^M ^M 11	/	ľ	28	/	Y	2022	Y		
	City EDINA	State MN		Zip Code 55436-2717	A							5 596704 s Period	3		
	FEC ID number of contributing federal political committee.	С			576.90										
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP		ion (for Individual) npli		Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	r-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)											
C.	Full Name of Individual (Last, First, Middle Initial) BIDINGER, DANIEL, , ,) or Full O	rgar	nization Name		Date of	Re	ecei	ipt						
	Mailing Address 3757 INDEPENDENCE RD	01-1-		7:- 0- 4-		11 _	/	L	28	1		2022 Y			
	City MAPLE PLAIN	State MN		Zip Code 55359-9759	A							5756704 s Period	3		
	FEC ID number of contributing federal political committee.	С						y			y	60.0	00		
	Name of Employer (for Individual) Optum Services, Inc			ion (for Individual) Staff		Me	emo	o Ite	em						
	Receipt For: // Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 480.00	P/	'R Ded	uctio	on	(\$20.0	1 00	Bi-We	ekly)			
s	UBTOTAL of Receipts This Page (optional)			•	[,		1	9	867.6	6		
т	OTAL This Period (last page this line number onl	y)						-			-9				

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		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, Middle DAVIS, JENNIFER, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 4330 CROWN POINT DR			M M / D D / Y Y Y Y 11 28 2022					
City COLUMBUS	State OH	Zip Code 43220-4424	Transaction ID : PR2763180367043 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		144.21					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item					
Receipt For: Primary General Other (specify) ▼	Primary General General							
Full Name of Individual (Last, First, Middle LAUSCH, KERSTEN, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 236 E NEWELL STREET			11 / D D / Y Y Y Y Y 2022					
City WINTER GARDEN	State FL	Zip Code 34787-2800	Transaction ID : PR2767047767043 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		42.09					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.72	P/R Deduction (\$14.03 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. LEFF, ERIN, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 2633 WEST VIEWMONT W			11 / 28 / Y Y Y Y 2022					
City SEATTLE	State WA	Zip Code 98199-3018	Transaction ID : PR2767366867043 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	J I I I I I I I I I I I I I I I I I I I							
Name of Employer (for Individual) Optum Services, Inc	Occ SVF	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional).			763.20					
TOTAL This Period (last page this line number	er only)							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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PAGE 218 OF

		Detailed Summary Page	×			11b	11c	12				
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	y information copied from such Reports and St for commercial purposes, other than using the											
\setminus	NAME OF COMMITTEE (In Full)											
$\langle \rangle$	UnitedHealth Group Incorporate		•	AC)								
^	Full Name of Individual (Last, First, Middle Initi FOLEY, BARBARA, , ,	ial) or Full C	Drganization Name		Deta d	f D -						
А.	Mailing Address 6260 BLACK FOX WAY			\neg	Date of	_	·	1	V	V		
	Manager BERGICTON WAT				11 ^M	'	28	/ Y	2022	T		
	City	State	Zip Code		Trans	act	ion ID :	PR27692	23926704	3		
	TALLAHASSEE	FL	32312-4504	_	Amount	t of	Each R	eceipt th	is Period			
	FEC ID number of contributing federal political committee.	С			<u> </u>		-	-	138.			
	Name of Employer (for Individual)	Occ	cupation (for Individual)	\neg	M	emo	b Item					
	United HealthCare Services Inc	Dir	Mktg Bus Dev									
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼				/ *					
	Other (specify) ▼		1107.60	^F	י∕R Ded	ucti	on (\$46.	15 Bi-We	ekly)			
	Full Name of Individual (Last, First, Middle Initi	ial) or Full C	Drganization Name									
В.	OBARSKI, DANIEL, , ,				Date of Receipt							
	Mailing Address 2035 S CLARKSON ST				11 28 2022							
	City	State CO	Zip Code	-	Transaction ID : PR2769243967043							
			80210-4105	\neg	Amount	τOf	Each R	eceipt th	is Period			
	FEC ID number of contributing federal political committee.	С			46.14 Memo Item							
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Ntwk Contrctng									
	Receipt For:	Aggregate	e Year-to-Date ▼									
	Primary General Other (specify) ▼		369.12	P	VR Ded	ucti	on (\$15.:	38 Bi-We	ekly)			
	Full Manage of leads the distance of the Addition			_								
C.	Full Name of Individual (Last, First, Middle Initi KEDZUF, LINDSAY, , ,	iai) or Full C	organization Name		Date of	f Re	eceipt					
	Mailing Address 15540 56TH AVE N				M M 11		28		y y 2022			
	City PLYMOUTH	State MN	Zip Code 55446-2982	-				PR27692		3		
			JJ440-Z30Z	\neg	Amount	t of	Each R	eceipt thi	is Period			
	FEC ID number of contributing federal political committee.	С			Ľ.		,		57.	69		
	Name of Employer (for Individual)		cupation (for Individual)		М	emo	o Item					
	United HealthCare Services Inc		Found/Social Resp									
	Receipt For: Primary General	Aggregate	Year-to-Date ▼			luoti	on (¢10	22 B: 14/2	okhy)			
	Other (specify)		461.52		-/R Dea	lucti	UII (\$19.	23 Bi-We	eny)			
s	UBTOTAL of Receipts This Page (optional)			•					242.	28		
	OTAL This Period (last page this line number of			•	Γ.			,				

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		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports and or for commercial purposes, other than using the	Statements mane and a	L ay not be sold or used by any p Iddress of any political committe	erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, Middle I MOORE, MALVIN, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 4520 SUNSET RIDGE			11 28 2022					
City MINNEAPOLIS	State MN	Zip Code 55416-3333	Transaction ID : PR2769866467043 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		42.09					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Found/Social Resp	Memo Item					
Receipt For: Primary General Other (specify) ▼	P/R Deduction (\$14.03 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I HAUSMAN, ERIC, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 1617 WEST 25TH STREET	Aailing Address 1617 WEST 25TH STREET							
City MINNEAPOLIS	State MN	Zip Code 55405-2466	Transaction ID : PR2778612767043 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		576.90					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼	P/R Deduction (\$192.30 Bi-Weekly)					
Other (specify) ▼		4615.20						
Full Name of Individual (Last, First, Middle I BAKER, OMAR, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 8100 SPRING HILL FARM I			11 / D D / Y Y Y Y 11 28 2022					
City MCLEAN	State VA	Zip Code 22102-2330	Transaction ID : PR2778986667043 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.		576.90						
Name of Employer (for Individual) United HealthCare Services Inc	upation (for Individual) D/SVP Strat Intv	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			1195.89					
TOTAL This Period (last page this line numbe	r only)							

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full)							
UnitedHealth Group Incorporat	ed PAC (l	JnitedHealth Group P	AC)				
Full Name of Individual (Last, First, Middle Ir A. PIERINI, RYAN, , ,	nitial) or Full C	rganization Name	Date of Receipt				
Mailing Address 3761 SAN YSIDRO WAY			M = M / D = D / Y = Y = Y				
City	State	Zip Code	11 28 2022 Transaction ID : PR2778987367043				
SACRAMENTO	CA	95864-2866	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		115.38				
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item				
United HealthCare Services Inc	Dir	Govt Affs					
Receipt For:	Aggregate	Year-to-Date ▼					
Other (specify) ▼		923.04	P/R Deduction (\$38.46 Bi-Weekly)				
Full Name of Individual (Last, First, Middle Ir	itial) or Full O	roanization Name					
B. TROTTI, MEGAN, , ,			Date of Receipt				
Mailing Address 4900 CEDAR LAKE ROAD APT 605			11 / 28 2022				
	State MN	Zip Code	Transaction ID : PR2779272967043				
		55416-5328	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		42.09				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Found/Social Resp	Memo Item				
Receipt For:	Aggregate	Year-to-Date ▼	-				
Primary General Other (specify) ▼		, 336.72	P/R Deduction (\$14.03 Bi-Weekly)				
Full Name of Individual (Last, First, Middle Ir C. GHAZANFARIANTALEGHANI, A		rganization Name	Date of Receipt				
Mailing Address 1039 MOUNTAIN AVE			11 28 2022				
City	State	Zip Code	Transaction ID : PR2782602167043				
BERKELEY HEIGHTS	NJ	07922-2343	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	115.38					
Name of Employer (for Individual)	upation (for Individual)	Memo Item					
Optum Care, Inc. Receipt For:		Gen Mgmt					
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional)			272.85				
TOTAL This Period (last page this line number	r only)						

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 221 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
Any information copied from such Reports and or for commercial purposes, other than using th							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ted PAC (I	UnitedHealth Group PA	NC)				
Full Name of Individual (Last, First, Middle In ROMANOW, KATHLEEN, , ,	nitial) or Full C	Organization Name	Date of Receipt				
Mailing Address 6804 MARBURY ROAD			11 28 Y Y Y Y Y 2022				
City BETHESDA	State MD	Zip Code 20817-6052	Transaction ID : PR2782733067043 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item				
Receipt For: Primary General Other (specify) ▼	eipt For: Primary General Aggregate Year-to-Date ▼						
Full Name of Individual (Last, First, Middle II B. SABAL, PETER, , ,	Date of Receipt						
Mailing Address 6151 WILLOW ROCK ST			11 28 2022				
City LAS VEGAS	State NV	Zip Code 89135-1482	Transaction ID : PR2783559967043 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		115.38				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)				
Full Name of Individual (Last, First, Middle In c. MOYER, CASEY, , ,	nitial) or Full C	Organization Name	Date of Receipt				
Mailing Address 7568 W SNOWBERRY			11 28 / Y Y Y Y 2022				
City BOISE	State ID	Zip Code 83709-1674	Transaction ID : PR2783746867043 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	FEC ID number of contributing						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Software Engineering	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 369.12	P/R Deduction (\$15.38 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional)			449.97				
TOTAL This Period (last page this line numbe							

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ITEMIZED RECEIPTS			Use separate schedule(s)	(che	(check only one)						
	-13		for each category of the Detailed Summary Page	×	11a		11b	11c	12		
			not be sold or used by any pe			ourp					
		ne and add	dress of any political committee	to sol	icit con	tribu	itions fi	rom such	n committ	ee.	
NAME OF COMMITTEI		PAC (U	nitedHealth Group PA	C)							
Full Name of Individual BRADY, NICOLE, ,	(Last, First, Middle Initial)	or Full Org	ganization Name		Date of	Rec	ceipt				
Mailing Address N7623	OLSON RD				м м 11	/	D D D 28	/ Y	y y 2022	Y	
City ONEIDA		State WI	Zip Code 54155-9619	A					5 7126704 is Period	3	
FEC ID number of cont federal political committ	Ű	C					,		42.0	09	
Name of Employer (for United HealthCare Serv	,	Occup Sr Me	pation (for Individual) ed Dir		Me	mo	Item				
Receipt For: Primary Other (specify) ▼	Primary General Aggregate Teal-to-Date V					ıctio	n (\$14.0	03 Bi-We	ekly)		
Full Name of Individual B. OWEN, CHRISTO	(Last, First, Middle Initial)	or Full Org	ganization Name	0	Date of	Rec	ceipt				
	Mailing Address 9011 LESLIES GATE						11 / D D / Y Y Y Y Y 2022				
	City State BOERNE TX FEC ID number of contributing federal political committee								0866704	3	
					Amount of Each Receipt this Period				90		
Name of Employer (for United HealthCare Servi	Individual)		pation (for Individual)	1	Me	mo	Item				
Receipt For:		SVP	™кtg ′ear-to-Date ▼	-	P/R Deduction (\$192.30 Bi-Weekly)						
Other (specify) ▼	General	ggregate i	4615.20	P/							
Full Name of Individual C. CONWAY, PATE	(Last, First, Middle Initial)	or Full Org	ganization Name		Date of	Rec	ceipt				
Mailing Address 190 W			- 1		M 11	/	D D D 28	/ Y	y y 2022	Y	
City WELLESLEY		State MA	Zip Code 02482-7320	A					37556704 is Period	3	
	FEC ID number of contributing federal political committee.						, .	, ,	576.9	90	
Optum Services, Inc Bus			pation (for Individual) Init CEO		Me	emo	ltem				
Receipt For: Primary Other (specify)	General A	Aggregate Year-to-Date ▼ 4615.20					n (\$192	2.30 Bi-W	/eekly)		
SUBTOTAL of Receipts	his Page (optional)						,	. ,	1195.8	39	
TOTAL This Period (last	page this line number only)	••••••				,				

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			Use separate schedule(s)	(check only one)				
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17				
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	statements ma name and a	ay not be sold or used by any p ddress of any political committe	person for the purpose of soliciting contributions				
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group P	AC)				
Α.	Full Name of Individual (Last, First, Middle Ini CLARKE, LACEY, , ,	tial) or Full O	rganization Name	Date of Receipt				
	Mailing Address 15 MILO STREET			11 28 2022				
	City HUDSON	State NY	Zip Code 12534-2722	Transaction ID : PR2789668267043 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		230.76				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1846.08	P/R Deduction (\$76.92 Bi-Weekly)				
в.	Full Name of Individual (Last, First, Middle Ini BILLS, MATTHEW, , ,	tial) or Full O	rganization Name	Date of Receipt				
	Mailing Address 18961 DEVONSHIRE ST	04-4-	7. 0.4	11 / D D / Y Y Y Y Y 2022				
	City BEVERLY HILLS	State MI	Zip Code 48025-4031	Transaction ID : PR2790558767043 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		138.45				
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) CInt Svc Acct Mgt	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1107.60	P/R Deduction (\$46.15 Bi-Weekly)				
<u>с</u> .	Full Name of Individual (Last, First, Middle Ini SEGERMAN, ANDREW, , ,	tial) or Full O	rganization Name	Date of Receipt				
	Mailing Address 7306 REDBRIDGE CT			M M / D D / Y Y Y Y 11 28 2022				
	City SPRINGFIELD	State VA	Zip Code 22153-1511	Transaction ID : PR2791475867043 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		57.69				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) t Affs Dir	Memo Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 461.52	P/R Deduction (\$19.23 Bi-Weekly)				
⊢	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number			426.90				

FOR LINE NUMBER:

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			Use separate schedule(s)	(check only one)				
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	l ay not be sold or used by any p ddress of any political committee	erson for the purpose of soliciting contributions				
	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , ,					
$\left \right\rangle$	UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	AC)				
Α.	Full Name of Individual (Last, First, Middle Initia SMITH, TAMEEKA, , ,	al) or Full O	rganization Name	Date of Receipt				
	Mailing Address 1605 PARK AVE			11 28 2022				
	City RICHMOND	State VA	Zip Code 23220-2908	Transaction ID : PR2791832967043 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		576.90				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)				
в.	Full Name of Individual (Last, First, Middle Initial SMITH, CHRISTOPHER, , ,	al) or Full O	rganization Name	Date of Receipt				
Mailing Address 2915 E MIGRATORY DR				11 28 Y Y Y Y 2022				
	City	State ID	Zip Code	Transaction ID : PR2793353467043				
	BOISE FEC ID number of contributing federal political committee.		83706-6935	Amount of Each Receipt this Period 42.09				
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) c Dir Comm	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.72	P/R Deduction (\$14.03 Bi-Weekly)				
<u></u> с.	Full Name of Individual (Last, First, Middle Initia MORSE, SARA, , ,	al) or Full O	rganization Name	Date of Receipt				
	Mailing Address 6398 VALE STREET			11 / D D / Y Y Y Y 2022				
	City ALEXANDRIA	State VA	Zip Code 22312-1435	Transaction ID : PR2794473467043 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee. C Name of Employer (for Individual) O United HealthCare Services Inc V				576.90				
			upation (for Individual) Govt Affs	Memo Item				
	Receipt For: Primary General Other (specify)	P/R Deduction (\$192.30 Bi-Weekly)						
⊢	UBTOTAL of Receipts This Page (optional)			1195.89				

S	CHEDULE B (FEC Form 3X)			FC	DR LI	INE NUMBER: PAGE 225 OF 247
IT	EMIZED DISBURSEMENTS	Use separate schedule(s for each category of the		(cł		
			Summary Page			21b 22 X 23 26 27 28a 28b 28c 29 30b
	y information copied from such Reports and State for commercial purposes, other than using the na				any p	person for the purpose of soliciting contributions
$\left \right\rangle$	NAME OF COMMITTEE (In Full)			_	_	
	UnitedHealth Group Incorporated	PAC (Un	itedHealth (Grou	рΡ	
Α.	Full Name (Last, First, Middle Initial) Troy Carter For Congress Mailing Address PO Box 50730					Date of Disbursement
						10 20 2022
	City New Orleans	State LA	Zip Code 70150			FEC Identification Number
	Purpose of Disbursement Contribution		70130	0	11	C C00763649
	Candidate Name			Cate	gory/	Transaction ID : 48089669 Amount of Each Disbursement this Period
	Carter, Troy, , Rep.,				/pe	
	Office Sought: House Disburse Senate President State: LA District: 02	ement For: 2 Primary Other (spe	x General			Contribution Memo Item
	Full Name (Last, First, Middle Initial)					
B.	Schneider For Congress					Date of Disbursement
	Mailing Address PO Box 1318	318				10 25 2022
	City Deerfield	State IL	Zip Code 60015			FEC Identification Number
	Purpose of Disbursement Contribution					C C00495952 Transaction ID : 48089786
	Candidate Name Schneider, Bradley, , Rep.,				gory/	
		ement For:	2022	Ty	/pe	2500.00
	Senate	Primary	X General			Contribution
	State: IL District: 10	Other (spec	cify)			Memo Item
с.	Full Name (Last, First, Middle Initial) Wyden for Senate					Date of Disbursement
	Mailing Address 1220 SW Morrison St					10 / Y Y Y Y 25 2022
	City	State	Zip Code			FEC Identification Number
	Portland Purpose of Disbursement	OR	97205	_	_	C C00308676
	Contribution Candidate Name					Transaction ID : 48089787
	Wyden, Ronald, L., Sen., Office Sought: House Disburse	ement For: 2	2022		egory/ /pe	2500.00
	X Senate	Primary	X General			Contribution
	State: OR District:	Other (spe	cify) 🔻			Memo Item
Γ	-					6500.00
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SCHEDULE B (FEC Form 3X)		oroto ophodula(s)	FOR LINE I			
ITEMIZED DISBURSEMENTS	for each Detailed	arate schedule(s) category of the Summary Page	(check only 21b 28a	22 X 23 26 27 28b 28c 29 30b		
Any information copied from such Reports and State or for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full)						
UnitedHealth Group Incorporated	PAC (Ur	nitedHealth G	Group PAC)		
Full Name (Last, First, Middle Initial) A. Jobs, Education, & Families First	JEFF PA	AC		Date of Disbursement		
Mailing Address 910 17th Street NW Suite 925				10 27 2022		
City	State	Zip Code		FEC Identification Number		
Washington Purpose of Disbursement	DC	20006		C 000017002		
Contribution			011	C C00617803		
Candidate Name			Category/ Type	Transaction ID : 48110395 Amount of Each Disbursement this Period		
Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General Gerify) ▼		5000.00 Contribution		
State: District:		<i>,</i> , ,		Memo Item		
Full Name (Last, First, Middle Initial) B. Josh Gottheimer For Congress Mailing Address PO Box 584						
City Ridgewood	State NJ	Zip Code 07451		FEC Identification Number		
Purpose of Disbursement Contribution			011	C C00573949 Transaction ID : 48113334		
Candidate Name			Category/	Amount of Each Disbursement this Period		
Gottheimer, Josh, , Rep.,			Туре	3000.00		
Office Sought: X House Disburse	ement For: Primary					
State: NJ District: 05	Other (spe	ecify)		Contribution Memo Item		
Full Name (Last, First, Middle Initial)						
C. Sean Patrick Maloney For Congre	ess			Date of Disbursement		
Mailing Address PO Box 578				11 01 Y Y Y Y Y 2022		
City New City	State NY	Zip Code 10956		FEC Identification Number		
Purpose of Disbursement Contribution			011	C C00512426		
Candidate Name			Category/	Transaction ID : 48113335 Amount of Each Disbursement this Period		
Maloney, Sean, Patrick, Rep.,	. =		Туре	5000.00		
Office Sought: X House Disburse Senate President	ement For: Primary Other (spe	x General		Contribution Memo Item		
State: NY District: 17				<u> </u>		
SUBTOTAL of Disbursements This Page (optional)				13000.00		
TOTAL This Period (last page this line number onl	y)		•••••• •			

SCHEDULE B (FEC Form 3X)			FOR LINE I	NUMBER: PAGE 227 OF 247		
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a			
Any information copied from such Reports and State or for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (Ur	nitedHealth G	Group PAC)		
Full Name (Last, First, Middle Initial) A. Schmitt For Senate				Date of Disbursement		
Mailing Address 101 W Argonne Dr, #24				11 01 2022		
City Saint Louis	State MO	Zip Code 63122		FEC Identification Number		
Purpose of Disbursement Contribution			011	C C00775015 Transaction ID : 48113336		
Candidate Name Schmitt, Eric, , ,			Category/ Type	Amount of Each Disbursement this Period		
Office Sought: House Disburse X Senate President State: MO District:	ement For: Primary Other (spe	X General		Contribution Memo Item		
Full Name (Last, First, Middle Initial) B. Britt For Alabama Inc Mailing Address PO Box 3759		Date of Disbursement				
City Montgomery Purpose of Disbursement Contribution	Montgomery AL 36109 Purpose of Disbursement					
Candidate Name Britt, Katie, , , Office Sought: K Senate President State: AL District:	ement For: Primary Other (spe	Category/ Type	Amount of Each Disbursement this Period 5000.00 Contribution Memo Item			
Full Name (Last, First, Middle Initial) C. Mullin for America				Date of Disbursement		
Mailing Address PO Box 3681				11 01 2022		
City Muskogee Purpose of Disbursement Contribution	State OK	Zip Code 74402	011	FEC Identification Number		
Candidate Name Mullin, Markwayne, , , Office Sought: House Disburse	ement For:	2022	Category/ Type	Transaction ID : 48113341 Amount of Each Disbursement this Period 5000.00		
State: OK District:	Primary Other (spe	General	022	Contribution Memo Item		
SUBTOTAL of Disbursements This Page (optional).				15000.00		
TOTAL This Period (last page this line number only	/)		•••••	34500.00		

SCHEDULE B (FEC Form 3X)			FOR LINE N	NUMBER: PAGE 228 OF 247
ITEMIZED DISBURSEMENTS	for each o	rate schedule(s) category of the Summary Page	(check only 21b 28a	one) 22 23 26 27 28b 28c x 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (Uni	itedHealth G	roup PAC)	
Full Name (Last, First, Middle Initial) A. Tom Takubo for Senate Mailing Address 101 Bowling Lane				Date of Disbursement
5	State WV	Zip Code 25314		FEC Identification Number
Purpose of Disbursement Contribution		[011	C Transaction ID : 48083859 Amount of Each Disbursement this Period
	nent For: Primary Other (spec	General ify) ▼	Category/ Type	Contribution Memo Item
Full Name (Last, First, Middle Initial) B. Sergio Munoz Jr. Campaign Mailing Address PO Box 1257				Date of Disbursement
Mission Purpose of Disbursement Contribution Candidate Name Munoz, Sergio, , TX Rep., Jr.	State TX	Zip Code 78573	011 Category/ Type	FEC Identification Number C Transaction ID : 48089675 Amount of Each Disbursement this Period
	nent For: Primary Other (spec	General ify)		Contribution Memo Item
Full Name (Last, First, Middle Initial)				Date of Disbursement
Mailing Address 1427 W Homestead Ct	24-4-	Zie Oste		10 25 2022
Chandler Purpose of Disbursement Contribution	State AZ	Zip Code 85286	011	FEC Identification Number C Transaction ID : 48089677
	nent For: Primary Other (spec	General ify) ▼	Category/ Type	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)			F	3200.00

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ITI	EMIZED DISBURSEMENTS	for each	rate schedule(s) category of the Summary Page	(C	2	only one) 21b 22 23 26 27 28a 28b 28c x 29 30b
	y information copied from such Reports and State for commercial purposes, other than using the nar					
\backslash	NAME OF COMMITTEE (In Full)	_				
	UnitedHealth Group Incorporated	PAC (Un	itedHealth G	rou	р Р <i>і</i>	AC)
	Full Name (Last, First, Middle Initial) GAIL GRIFFIN for State Represen	Date of Disbursement				
	Mailing Address PO Box 628					10 25 2022
	City Hereford	State AZ	Zip Code 85615			FEC Identification Number
	Purpose of Disbursement Contribution		1	0	11	C
	Candidate Name		L		egory/	/ Transaction ID : 48089723 / Amount of Each Disbursement this Period
	Griffin, Gail, , ,				ype	
	Office Sought: House Disburse Senate President	ment For: Primary Other (spec	General cify) ▼			Contribution Memo Item
	State: District:					
	Full Name (Last, First, Middle Initial) Brian Fernandez for State Senate	Date of Disbursement				
	Mailing Address PO Box 545	10 25 2022				
	Yuma	State AZ	Zip Code 85366			FEC Identification Number
	Purpose of Disbursement Contribution					C Transaction ID : 48089725
	Candidate Name	Brian AZ Ren			egory/	
	Fernandez, Brian, , AZ Rep., Office Sought: House Disburse Senate President Image: Comparison of the senate of the senat of the senate of the senate of the senate of	ment For: Primary Other (spec	General	Ту	ype	500.00 Contribution
	State: District:	· · ·	-			Memo Item
C.	Full Name (Last, First, Middle Initial) Judy for AZ					Date of Disbursement
	Mailing Address 420 E Campo Bello Dr		10 / D D / Y Y Y Y 2022			
	-	State AZ	Zip Code			FEC Identification Number
	Phoenix Purpose of Disbursement Contribution	~L	85022	0	11	C
	Candidate Name	egory/	Transaction ID : 48089734 Amount of Each Disbursement this Period			
	Schwiebert, Judy, , AZ Rep., Office Sought: House Disburse	ment For:		- 13	ype	500.00
	Senate President	Primary Other (spec	General Cify) ▼			Contribution Memo Item
_	State: District:					
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SCHEDULE B (FEC Form 3X)			FOR LINE I		
ITEMIZED DISBURSEMENTS	for each o	rate schedule(s) category of the Summary Page	(check only 21b 28a	one) 22 23 26 27 28b 28c x 29 30b	
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (Un	itedHealth G	roup PAC)	
Full Name (Last, First, Middle Initial) A. Jen Longdon for House				Date of Disbursement	
Mailing Address PO Box 7295				10 25 2022	
City Phoenix Purpose of Disbursement	State AZ	Zip Code 85011		FEC Identification Number	
Contribution Candidate Name			011 Category/	Transaction ID : 48089736 Amount of Each Disbursement this Period	
	nent For: Primary Other (spec	General Gify) ▼	Туре	500.00 Contribution Memo Item	
Full Name (Last, First, Middle Initial) B. Gowan for Senate Mailing Address PO Box 1985				Date of Disbursement	
City Sierra Vista Purpose of Disbursement Contribution Candidate Name	State AZ	Zip Code 85636	011 Category/	FEC Identification Number C Transaction ID : 48089739 Amount of Each Disbursement this Period	
	nent For: Primary Other (spec	General	Туре	Contribution Memo Item	
Full Name (Last, First, Middle Initial) C. Arizonans for Matt Gress					
Mailing Address 1677 E. Maryland Avenue				10 / D D / Y Y Y Y 25 2022	
City S Phoenix Purpose of Disbursement Contribution Candidate Name	State AZ	Zip Code 85016	011	FEC Identification Number C Transaction ID : 48089741	
Gress, Matt, , AZ Rep., Office Sought: House Disbursen Senate	nent For: Primary Other (spec	General cify) ▼	Category/ Type	Amount of Each Disbursement this Period 500.00 Contribution Memo Item	
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)			F	2000.00	

	CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS	Use sepa	arate schedule(s)	FOR LINE (check only	
			category of the Summary Page	21b 28a	22 23 26 27 28b 28c X 29 30b
	y information copied from such Reports and State for commercial purposes, other than using the nar				
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (Un	itedHealth G	Group PAC	;)
Α.	Full Name (Last, First, Middle Initial) Friends of Warren Petersen Mailing Address 3425 E. Augusta Ct.				Date of Disbursement
	Queen Creek	State AZ	Zip Code 85142		FEC Identification Number
	Purpose of Disbursement Contribution Candidate Name			011	Transaction ID : 48089742 Amount of Each Disbursement this Period
	Petersen, Warren, , AZ Sen., Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spec	General Cify) ▼	Category/ Type	Contribution Memo Item
В.	Full Name (Last, First, Middle Initial) Vote Kerr Mailing Address 8400 S. Dean Road				Date of Disbursement
	City Buckeye Purpose of Disbursement Contribution Candidate Name Kerr, Sine, , AZ Sen.,	011 Category/ Type	FEC Identification Number C Transaction ID : 48089747 Amount of Each Disbursement this Period		
	Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spec	General cify)		Contribution Memo Item
C.	Full Name (Last, First, Middle Initial) Steve Kaiser for Arizona				Date of Disbursement
	Mailing Address 1620 E Runion Dr	State	Zip Code		10 25 2022
	Phoenix Purpose of Disbursement Contribution Candidate Name Kaiser, Steve, , AZ Rep.,	011 Category/ Type	FEC Identification Number C Transaction ID : 48089749 Amount of Each Disbursement this Period		
		ment For: Primary Other (spec	General cify) ▼		1500.00 Contribution Memo Item
s	UBTOTAL of Disbursements This Page (optional).			····· •	3000.00
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S	CHEDULE B (FEC Form 3X)			FC	DR L	INE N	UMBER: PA	GE 232 OF 247	
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			Summary Page			21b 28a	22 23 26 28b 28c x 29	27 30b	
	y information copied from such Reports and State for commercial purposes, other than using the na				any	persoi	n for the purpose of solicitin	g contributions	
$ \rangle$	NAME OF COMMITTEE (In Full)				_				
	UnitedHealth Group Incorporated	PAC (Un	itedHealth G	Brou	pР	AC)			
Α.	Full Name (Last, First, Middle Initial) Chris4Arizona						Date of Disbursement		
			M M / D D / Y	YYYY					
	Mailing Address 4117 E Charter Oak Rd		10 25	2022					
	City	State AZ	Zip Code				FEC Identification Number		
	Phoenix Purpose of Disbursement	AZ	85032				$\mathbf{\hat{\mathbf{C}}}$		
	Contribution			0	11	11	C		
	Candidate Name			Cate	aorv	/	Transaction ID : 4808 Amount of Each Disburser		
	Marsh, Christine, Porter, AZ Sen.,				/pe				
		ement For:						1000.00	
	Senate President	Primary Other (spec	General				Contributio	on	
	State: District:		Sily) V				Memo Item		
	Full Name (Last, First, Middle Initial)		Date of Disbursement						
Β.	Jennifer Pawlik for AZ House								
	Mailing Address PO Box 2405		10 25 2022						
	City	State Zip Code					FEC Identification Number		
	Chandler Purpose of Disbursement						<u> </u>		
	Contribution					11	C		
	Candidate Name			011 Category/			Transaction ID: 48089753 Amount of Each Disbursement this Period		
	Pawlik, Jennifer, , AZ Rep.,			Туре					
		ement For:						500.00	
	Senate President	Primary Other (spec	General				Contribution		
	State: District:		Siry)				Memo Item		
_	Full Name (Last, First, Middle Initial)								
C.	Bennett for Senate						Date of Disbursement		
	Mailing Address 2150 Ewin Dr.						10 / D D / Y Y Y Y 2022		
	City	State	Zip Code			+	FEC Identification Number		
	Prescott Purpose of Disbursement	AZ	86305						
	Contribution			0	11		С		
	Candidate Name					1	Transaction ID : 4808 Amount of Each Disburser		
							Amount of Each Disbursement this Period		
		ement For:		Туре				500.00	
	Senate	Primary Other (anal	General				Contributi	on	
	State: District:	Other (spec	city) 🔻				Memo Item		
	Bibliot.						-		
s	UBTOTAL of Disbursements This Page (optional).							2000.00	
т	OTAL This Period (last page this line number only	/)					,		

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SCHEDULE B (FEC Form 3X)				NUMBER: PAGE 233 OF 247		
ITEMIZED DISBURSEMENTS	MENTS Use separate schedule(s) for each category of the			y one)		
	Detailed	Summary Page	21b 28a	28b 28c x 29 30b		
Any information copied from such Reports and State or for commercial purposes, other than using the na	ments may me and add	not be sold or used ress of any politica	d by any pers al committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)						
UnitedHealth Group Incorporated	PAC (Ur	itedHealth G	roup PAC	C)		
Full Name (Last, First, Middle Initial) A. Shope for State Senator - District	No. 16			Date of Disbursement		
Mailing Address PO Box 1230				10 25 2022		
City	State	Zip Code		FEC Identification Number		
Coolidge Purpose of Disbursement	AZ	85128		С		
Contribution			011			
Candidate Name		I	Category/	Transaction ID : 48089758 Amount of Each Disbursement this Period		
Shope, Thomas, , AZ Sen., Jr.			Туре	1000.00		
Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General cify) ▼		Contribution		
State: District:				Memo Item		
 Full Name (Last, First, Middle Initial) B. Committee to Elect Stuart Adams Mailing Address 3271 E 1875 N 	Date of Disbursement					
City Layton	State UT	Zip Code 84040		FEC Identification Number		
Purpose of Disbursement				С		
Contribution			011	Transaction ID : 48089761		
Candidate Name			Category/	Amount of Each Disbursement this Period		
Adams, J. Stuart, , UT Sen., Office Sought: House Disburse	ment For:		Туре	500.00		
Senate	Primary	General		Contribution		
President	Other (spe	cify)				
State: District:						
Full Name (Last, First, Middle Initial) C. Committee to Elect Evan Vickers						
Mailing Address 2166 North Cobble Creek Drive	Mailing Address 2166 North Cobble Creek Drive					
City	State	Zip Code		FEC Identification Number		
Purpose of Disbursement						
	Contribution					
Vickers, Evan, , UT Sen.,	Candidate Name Vickers Evan UT Sen					
	ment For:		Туре	400.00		
Senate President	Primary Other (spe	General cify) ▼		Contribution Memo Item		
State: District:						
SUBTOTAL of Disbursements This Page (optional).			····· •	1900.00		
TOTAL This Period (last page this line number only	/)		••••••			

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	FOR LINE (check onl 21b 28a	
Any information copied from such Reports and State or for commercial purposes, other than using the nar			ed by any pers	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I	PAC (Un	itedHealth (Group PAC	C)
Full Name (Last, First, Middle Initial) A. Friends of Lonnie Paxton Mailing Address 1408 State Highway 37				Date of Disbursement
City Tuttle Purpose of Disbursement	State OK	Zip Code 73089		FEC Identification Number
Contribution Candidate Name Paxton, Lonnie, , OK Sen.,	ment For: Primary Other (spec	General cify) ▼	011 Category/ Type	C Transaction ID : 48089781 Amount of Each Disbursement this Period 1000.00 Contribution Memo Item
Full Name (Last, First, Middle Initial) B. Friends of Julie Daniels Mailing Address 2191 Kyle Road				Date of Disbursement
Bartlesville Purpose of Disbursement Contribution Candidate Name Daniels, Julie, , OK Sen.,	State OK ment For: Primary Other (spec	Zip Code 74006	011 Category/ Type	FEC Identification Number C Transaction ID : 48089782 Amount of Each Disbursement this Period 1000.00 Contribution Memo Item
State: District: Full Name (Last, First, Middle Initial) C. Friends of Dean Davis 2022 Mailing Address 4730 S. 194th E Ave				Date of Disbursement
City Broken Arrow Purpose of Disbursement Contribution	State OK	Zip Code 74014	011 Category/ Type	FEC Identification Number C Transaction ID : 48089784 Amount of Each Disbursement this Period

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	FOR LIN (check or 211 28	22 23 26 27		
Any information copied from such Reports and Stat or for commercial purposes, other than using the n			by any pe	rson for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (Ur	nitedHealth G	roup PA	C)		
Full Name (Last, First, Middle Initial) A. Maynard for Senate Mailing Address 15577 Rt 152 Rd	Maynard for Senate					
City Wayne Purpose of Disbursement Contribution	State WV	Zip Code 25517	011	FEC Identification Number		
Candidate Name Maynard, Mark, , WV Sen., Office Sought: House Disburs Senate President State: District:	sement For: Primary Other (spe	General ccify) ▼	Category/ Type	Transaction ID : 48089789 Amount of Each Disbursement this Period 2000.00 Contribution Memo Item		
Full Name (Last, First, Middle Initial) B. Friends of Mike Caputo 2020 Mailing Address PO Box 585				Date of Disbursement		
City Rivesville Purpose of Disbursement Contribution Candidate Name Caputo, Mike, , ,	State WV	Zip Code 26588	011 Category/ Type	FEC Identification Number C Transaction ID : 48089791 Amount of Each Disbursement this Period		
-	ement For: Primary Other (spe	General Gerify)		Contribution Memo Item		
Full Name (Last, First, Middle Initial) C. Jim Pillen for Governor Mailing Address 4438 Old Mill Court				Date of Disbursement		
City Columbus Purpose of Disbursement Contribution Candidate Name Pillen, Jim, , , Office Sought: House Disburs	House Disbursement For:			FEC Identification Number C Transaction ID : 48089816 Amount of Each Disbursement this Period 5000.00		
State: District:	Primary Other (spe	General cify) ▼		Contribution Memo Item		
SUBTOTAL of Disbursements This Page (optional)		•••••	8500.00		
TOTAL This Period (last page this line number on	ly)		••••• •			

S	CHEDULE B (FEC Form 3X)			FOR	LINE I	NUMBER: PAGE 236 OF 247
IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(chec	ck only 21b 28a	one) 22 23 26 27 28b 28c x 29 30b
	y information copied from such Reports and State for commercial purposes, other than using the nar					
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (Un	itedHealth G	Group	PAC)
Α.	Full Name (Last, First, Middle Initial) Laura Kelly for Kansas Mailing Address P.O. Box 2098					Date of Disbursement
	Topeka	State KS	Zip Code 66601			FEC Identification Number
	Purpose of Disbursement Contribution			011		C Transaction ID : 48089818
	Kelly, Laura, , ,	ment For: Primary Other (spec	General cify) ▼	Catego Type		Amount of Each Disbursement this Period 2000.00 Contribution Memo Item
B.	Full Name (Last, First, Middle Initial) Steve Erdman for Legislature Mailing Address 8527 L62A					Date of Disbursement
	City Bayard Purpose of Disbursement Contribution Candidate Name Erdman, Steve, , NE Sen.,	Zip Code 69334	011 Catego Type	ry/	FEC Identification Number C Transaction ID : 48089821 Amount of Each Disbursement this Period	
	Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spec	General Cify)			Contribution Memo Item
C.	Full Name (Last, First, Middle Initial) Friends of Mike McDonnell Mailing Address 5401 A Street					Date of Disbursement
	City Omaha Purpose of Disbursement Contribution Candidate Name McDonnell, Mike, , NE Sen.,	State NE ment For:	Zip Code 68106	011 Catego Type		FEC Identification Number
	State: District:	Primary Other (spec	General cify) ▼			Contribution Memo Item
s	UBTOTAL of Disbursements This Page (optional)				• •	3500.00
т	OTAL This Period (last page this line number only)				

SCHEDULE B (FEC Form 3X)			FOR LINE I	NUMBER: PAGE 237 OF 247		
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a	one) 22 23 26 27 28b 28c x 29 30b		
Any information copied from such Reports and State or for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (Ur	nitedHealth G	roup PAC)		
Full Name (Last, First, Middle Initial) A. Les Mason for Kansas House				Date of Disbursement		
Mailing Address 108 Arcadian Court	0			10 25 2022		
City McPherson Purpose of Disbursement Contribution	State KS	Zip Code 67460		FEC Identification Number		
Candidate Name Mason, Les, , KS Rep.,			011 Category/ Type	Transaction ID : 48089824 Amount of Each Disbursement this Period		
	ement For: Primary Other (spe	General cify) ▼		Contribution Memo Item		
Full Name (Last, First, Middle Initial) B. Sutton for Kansas State House Mailing Address 215 W Park St		Date of Disbursement				
City Gardner	State KS	Zip Code 66030		FEC Identification Number		
Purpose of Disbursement Contribution Candidate Name Sutton, Bill, , KS Rep.,		011 Category/ Type		Transaction ID : 48089825 Amount of Each Disbursement this Period		
Office Sought: House Disburs Senate President State: District:	ement For: Primary Other (spe	General cify)		Contribution Memo Item		
Full Name (Last, First, Middle Initial) C. Martinez for Arizona						
Mailing Address PO Box 13125				11 01 Y Y Y Y Y 12022		
City Casa Grande Purpose of Disbursement	State AZ	Zip Code 85130		FEC Identification Number		
Contribution Candidate Name Martinez, Teresa, , AZ Rep.,	Contribution Candidate Name					
Office Sought: House Disburs Senate President State: District:	ement For: Primary Other (spe	General cify) ▼		Contribution Memo Item		
SUBTOTAL of Disbursements This Page (optional)			····· ►	1500.00		
TOTAL This Period (last page this line number on	y)		····· ►	, , , , , , ,		

SCHEDULE B (FEC Form 3X)			FOR L	INE N	UMBER: PAGE 238 OF 247		
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Any information copied from such Reports and State or for commercial purposes, other than using the na	ements may ame and add	not be sold or use ress of any politic	ed by any al committ	person tee to s	of or the purpose of soliciting contributions solicit contributions from such committee.		
UnitedHealth Group Incorporated	PAC (Ur	nitedHealth G	Foup F	PAC)			
Full Name (Last, First, Middle Initial) A. Friends of Mike Hilgers					Date of Disbursement		
Mailing Address 1320 Lincoln Mall					11 01 2022		
City	State NE	Zip Code			FEC Identification Number		
Lincoln Purpose of Disbursement	INE	68508		_	С		
Contribution			011		Transaction ID : 48113332		
Candidate Name			Category	y/	Amount of Each Disbursement this Period		
Hilgers, Mike, , , Office Sought: House Disburs	ement For:		Туре		1000.00		
Senate President	Primary Other (spe	General cify) ▼			Contribution		
State: District:		<i>,,</i> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Memo Item		
Full Name (Last, First, Middle Initial) B. Kloos for Kansas					Date of Disbursement		
Mailing Address 4728 SE Berryton Road		11 01 2022					
City Berryton	State KS	Zip Code 66409			FEC Identification Number		
Purpose of Disbursement Contribution			011		C Transaction ID : 48113333		
Candidate Name Kloos, Rick, , KS Sen.,			Category/ Type		Amount of Each Disbursement this Period		
	ement For:		Type		1000.00		
Senate	Primary	General			Contribution		
State: District:	Other (spe	cify)			Memo Item		
Full Name (Last, First, Middle Initial)	•••				Data of Disburgement		
C. Carla Cunningham Campaign Co	mmittee				Date of Disbursement		
Mailing Address 1400 Sansberry Road					11 01 2022		
City Charlotte	State NC	Zip Code 28262			FEC Identification Number		
Purpose of Disbursement Contribution		20202	011		С		
Candidate Name Cunningham, Carla, D., NC Rep.			Category Type	y/	Transaction ID : 48113661 Amount of Each Disbursement this Period		
	, ement For:		.,,,,,,		1000.00		
Senate	Primary	General			Contribution		
State: District:	Other (spe	city) 🔻			Memo Item		
					3000.00		
SUBTOTAL of Disbursements This Page (optional)					3000.00		
TOTAL This Period (last page this line number onl	y)				, ,		

SCHEDULE B (FEC Form 3X)	11		FC	R L	NE N	NUMBER: PAGE 239 OF 247			
ITEMIZED DISBURSEMENTS	for each	rate schedule(s) category of the Summary Page	(ch	2	only 1b 8a	one) 22 23 26 27 28b 28c x 29 30b			
Any information copied from such Reports and Stater or for commercial purposes, other than using the nam						on for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (Un	itedHealth G	irou	ρP	AC))			
Full Name (Last, First, Middle Initial) A. Committee to Elect Mike Kennedy Mailing Address 659 East 200 North						Date of Disbursement			
	State	Zip Code				FEC Identification Number			
Alpine Purpose of Disbursement Contribution	UT	84004	0'	11	t	C			
Candidate Name Kennedy, Mike, , ,			Cate Ty	gory vpe	,	Transaction ID : 48118035 Amount of Each Disbursement this Period			
Office Sought: House Disburser Senate President District:	ment For: Primary Other (spec	General cify) ▼				Contribution Memo Item			
Full Name (Last, First, Middle Initial) B. Cullimore for Senate						Date of Disbursement			
Mailing Address 8359 Snow Basin Dr						11 07 2022			
City Sandy Purpose of Disbursement Contribution Candidate Name	State Zip Code UT 84093			011 Category/		FEC Identification Number C Transaction ID : 48118040 Amount of Each Disbursement this Period			
Cullimore, Kirk, , UT Sen., Jr. Office Sought: House Disburser Senate President District:	ment For: Primary Other (spec	General		pe		400.00 Contribution Memo Item			
Full Name (Last, First, Middle Initial) C. Jerry Stevenson Campaign Fund	Full Name (Last, First, Middle Initial)								
Mailing Address 466 South 1700 West						11 07 Y Y Y Y 2022			
City Layton Purpose of Disbursement Contribution	State UT	Zip Code 84041				FEC Identification Number			
Candidate Name Stevenson, Jerry, , UT Sen., Office Sought: House Disburser	Stevenson, Jerry, , UT Sen.,				,	Amount of Each Disbursement this Period 300.00			
State: District:	Primary Other (spec	General cify) ▼				Contribution Memo Item			
SUBTOTAL of Disbursements This Page (optional)						1000.00			
TOTAL This Period (last page this line number only)									

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS		Use separate schedule(s)				E NUMBER: PAGE 240 OF 247 nly one)		
			category of the Summary Page		21b 28a	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$		
	y information copied from such Reports and State for commercial purposes, other than using the na							
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (Un	itedHealth G	iroup	PAC)		
Α.	Full Name (Last, First, Middle Initial) Committee to Elect Don Ipson					Date of Disbursement		
	Mailing Address 539 Diagonal Street					11 07 2022		
	City St. George Purpose of Disbursement	State UT	Zip Code 84770			FEC Identification Number		
	Contribution Candidate Name			011 Categ		Transaction ID : 48118042 Amount of Each Disbursement this Period		
		ment For:		Тур		300.00		
	State: District:	Primary Other (spec	General cify) ▼			Contribution Memo Item		
в.	Full Name (Last, First, Middle Initial) Wilson Leadership PAC		Date of Disbursement					
	Mailing Address 67 South Main Street Suite 300	11 07 2022						
	City Layton Purpose of Disbursement	State UT	Zip Code 84041			FEC Identification Number		
	Contribution Candidate Name		011 Category/ Type		ory/	C Transaction ID : 48118043 Amount of Each Disbursement this Period		
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spec	General cify)			500.00 Contribution Memo Item		
С.	Full Name (Last, First, Middle Initial) Elect Mike Schultz					Date of Disbursement		
	Mailing Address 4904 W 5850 S					11 07 Y Y Y Y 2022		
	City Hooper Purpose of Disbursement	State UT	Zip Code 84315			FEC Identification Number		
	Contribution Candidate Name Schultz, Mike, , UT Rep.,					C Transaction ID : 48118044 Amount of Each Disbursement this Period		
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spec	General cify) ▼			400.00 Contribution Memo Item		
s	UBTOTAL of Disbursements This Page (optional).				▶	1200.00		
т	OTAL This Period (last page this line number only	/)			🕨	, ,		

SCHEDULE B (FEC Form	1 3X)			FOR		NUMBER: PAGE 241 OF 247
ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the			k only	one)
			Summary Page		21b 28a	22 23 26 27 28b 28c x 29 30b
					/ perso	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)				-	.	
UnitedHealth Group Inco	rporated F	PAC (Un	itedHealth G	Froup F	PAC	
Full Name (Last, First, Middle Initial) A. Val Peterson Campaign						Date of Disbursement
Mailing Address 528 W 1160 N						11 07 _2022
City		State	Zip Code			FEC Identification Number
Orem Purpose of Disbursement Contribution		UT	84057	011		C
Candidate Name				Categor	nv/	Transaction ID: 48118050 Amount of Each Disbursement this Period
Peterson, Val, , UT Rep.,				Туре		
Office Sought: House Senate President	Disburser	nent For: Primary Other (spec	General cify) ▼			400.00 Contribution Memo Item
State: District:						
B. Committee to Elect Jeffe Mailing Address 1668 Aspen Circle			Date of Disbursement			
City Saratoga Springs	ga Springs State Zip Code UT 84045					FEC Identification Number
Purpose of Disbursement Contribution	Purpose of Disbursement					C Transaction ID : 48118053
Candidate Name	Ca			-	Amount of Each Disbursement this Period	
Office Sought: House	Moss, Jefferson, , UT Rep., Office Sought: House Disburseme			Туре		400.00
Senate President		Primary Other (spec	General Cify)			Contribution Memo Item
State: District:						
-	Full Name (Last, First, Middle Initial) Committee to Elect Jake Anderegg for Utah					Date of Disbursement
Mailing Address 788 South 2575 We	Mailing Address 788 South 2575 West					11 07 2022
City Lehi		State UT	Zip Code 84043			FEC Identification Number
Purpose of Disbursement Contribution				011 Categor		C Transaction ID : 48118054
	Anderegg, Jacob, , UT Sen.,					Amount of Each Disbursement this Period
Office Sought: House						300.00
State: District:		Primary General Other (specify) ▼				Contribution Memo Item
SUBTOTAL of Disbursements This Pa	ge (optional)				• 🕨	1100.00
TOTAL This Period (last page this line	number only))			•	, ,

S	CHEDULE B (FEC Form 3X)			FO	RLI	NE NUMBER: PAGE 242 OF 247
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(ch		only one)
			Summary Page			11b 22 23 26 27 18a 28b 28c x 29 30b
	ny information copied from such Reports and State for commercial purposes, other than using the na				any p	person for the purpose of soliciting contributions
$\left \right\rangle$	NAME OF COMMITTEE (In Full)				-	
	UnitedHealth Group Incorporated	PAC (Un	itedHealth G	iroup	D P	AC)
Α.	Full Name (Last, First, Middle Initial) David G. Buxton for Senate					Date of Disbursement
	Mailing Address 4162 South 2340 West	11 07 2022				
	City Roy	State UT	Zip Code 84067			FEC Identification Number
	Purpose of Disbursement				-	C
	Contribution			01	1	Transaction ID : 48118056
	Candidate Name			Cate		
	Buxton, D. Gregg, , UT Sen., Office Sought: House Disburse	ment For:		Ту	pe	250.00
	State: District:	Primary Other (spec	General cify) ▼			Contribution Memo Item
	Full Name (Last, First, Middle Initial)					
В.		Date of Disbursement				
	Mailing Address 1004 North Morton Drive	11 07 2022				
	City	State	FEC Identification Number			
	Salt Lake City Purpose of Disbursement	UT	84116			
	Contribution			01	11	C
	Candidate Name			Categ	aonv	Amount of Each Disbursement this Period
	Escamilla, Luz, , UT Sen.,			Тур		Allount of Each Disburschieft this Fellou
	Office Sought: House Disburse					250.00
	Senate	Primary General				Contribution
	State: District:	Other (spec	cify)			Memo Item
_	Full Name (Last, First, Middle Initial)	Date of Distances				
U.	Committee to Elect Keith Grover	Date of Disbursement				
	Mailing Address 1374 West 1940 North		11 07 <u>Y Y Y Y Y</u> 11 07 2022			
	City Provo	State UT	Zip Code 84604			FEC Identification Number
	Purpose of Disbursement	-	C			
	Contribution	Transaction ID : 48118059				
	Candidate Name	Amount of Each Disbursement this Period				
	Grover, Keith, , UT Sen., Office Sought: House Disburse	Ту	pe	250.00		
	Office Sought: House Disburse					
	President	Primary Other (spec	General cify) ▼			Contribution
	State: District:		- , , ,			Memo Item
s	UBTOTAL of Disbursements This Page (optional).					750.00
	OTAL This Period (last page this line number only					

SCHEDULE B (FEC Form 3X)		arata pahadula(a)		NUMBER: PAGE 243 OF 247		
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check onl 21b 28a	22 23 26 27		
Any information copied from such Reports and State or for commercial purposes, other than using the national states of the state						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (Ur	nitedHealth G	Group PAC	C)		
Full Name (Last, First, Middle Initial) A. Friends of Chris Wilson				Date of Disbursement		
Mailing Address 1367 Cedarwood Lane		11 07 2022				
Logan Purpose of Disbursement	State UT	Zip Code 84341		FEC Identification Number		
Contribution Candidate Name			011 Category/	Transaction ID : 48118060 Amount of Each Disbursement this Period		
Wilson, Chris, , UT Sen., Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General ccify) ▼	Туре	Contribution Memo Item		
Full Name (Last, First, Middle Initial) B. Candice Pierucci for District 52 Mailing Address 13457 S Corbin Valley Drive	Full Name (Last, First, Middle Initial) Candice Pierucci for District 52					
City Riverton Purpose of Disbursement Contribution	State UT	011	FEC Identification Number			
Candidate Name Pierucci, Candice, , UT Rep., Office Sought: House Senate President State: District:	ement For: Primary Other (spe	General ccify)	Category/ Type	Transaction ID : 48118061 Amount of Each Disbursement this Period 300.00 Contribution Memo Item		
Full Name (Last, First, Middle Initial) C. Committee to Re-Elect Cheryl Act	Full Name (Last, First, Middle Initial)					
Mailing Address 5143 W Wheatcrest Circle				11 07 2022		
City West Jordan Purpose of Disbursement Contribution	State UT	Zip Code 84081	011	FEC Identification Number		
	ement For:	Category/ Type	Amount of Each Disbursement this Period			
Senate President State: District:	Primary Other (spe	Ceneral ecify) ▼		Contribution Memo Item		
SUBTOTAL of Disbursements This Page (optional))		····· •	800.00		
TOTAL This Period (last page this line number onl	ly)		••••••	, , , , , , , , , , , , , , , , , , , ,		

	CHEDULE B (FEC Form 3X)		urato cobodula(a)	FOR LINE	
IT	EMIZED DISBURSEMENTS	for each o	rate schedule(s) category of the Summary Page	(check only 21b 28a	7 one) 22 23 26 27 28b 28c x 29 30b
	y information copied from such Reports and Stater for commercial purposes, other than using the nar				
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I	PAC (Un	itedHealth G	roup PAC	;)
Α.	Full Name (Last, First, Middle Initial) Vote Dr. Barlow Mailing Address 940 Signal Hill				Date of Disbursement
	Fruit Heights Purpose of Disbursement Contribution	State UT	Zip Code 84037	011	FEC Identification Number
	Candidate Name Barlow, Stewart, , UT Rep., Office Sought: House Disburse	ment For:		Category/ Type	Transaction ID : 48118069 Amount of Each Disbursement this Period 250.00
	State: District:	Primary Other (spec	General cify) ▼		Contribution Memo Item
В.	Full Name (Last, First, Middle Initial)	Date of Disbursement			
	Mailing Address 8157 South Grambling Way	11 07 2022			
	City Sandy Purpose of Disbursement Contribution	011	FEC Identification Number		
	Candidate Name Eliason, Steven, , UT Rep., Office Sought: House Disburser	ment For:		Category/ Type	Amount of Each Disbursement this Period 250.00
	State: District:	Primary Other (spec	General bify)		Contribution Memo Item
C.	Full Name (Last, First, Middle Initial) Marsha Judkins for State House	Date of Disbursement			
	Mailing Address 838 N 2400 W				11 07 2022
	Provo Purpose of Disbursement	State UT	Zip Code 84601		FEC Identification Number
	Contribution Candidate Name Judkins, Marsha, , UT Rep.,		011 Category/ Type	Transaction ID : 48118071 Amount of Each Disbursement this Period	
	Office Sought: House Disburse Senate President Image: Senate State: District:	ment For: Primary Other (spec	General cify) ▼		Contribution Memo Item
s	UBTOTAL of Disbursements This Page (optional)				750.00
⊢	OTAL This Period (last page this line number only)				

SCHEDULE B (FEC Form 3X)		arata sabadula(a)	FOR LINE	-		
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a	7 one) 22 23 26 27 28b 28c x 29 30b		
Any information copied from such Reports and Sta or for commercial purposes, other than using the						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (Ur	nitedHealth G	Group PAC	·)		
Full Name (Last, First, Middle Initial) A. Elect Robert Spendlove				Date of Disbursement		
Mailing Address 2492 East Barcelona Drive		11 07 2022				
City Sandy	State UT			FEC Identification Number		
Purpose of Disbursement Contribution Candidate Name			011	C Transaction ID : 48118072		
Spendlove, Robert, , UT Rep.,	sement For:		Category/ Type	Amount of Each Disbursement this Period 250.00		
Senate President	Other (spe	General ecify)		Contribution Memo Item		
Full Name (Last, First, Middle Initial) B. Ray Ward Committee to Elect			Date of Disbursement			
Mailing Address 954 E Millbrook Way	State		11 07 2022			
Bountiful Purpose of Disbursement Contribution	UT	Zip Code 84010	011	FEC Identification Number		
Candidate Name Ward, Raymond, , UT Rep., Office Sought: House Disbur Senate President State: District:	rsement For: Primary Other (spe	General ccify)	Category/ Type	Transaction ID : 48118073 Amount of Each Disbursement this Period 250.00 Contribution Memo Item		
Full Name (Last, First, Middle Initial) C. Committee to Elect Lincoln Fillme	Full Name (Last, First, Middle Initial) Committee to Elect Lincoln Fillmore					
Mailing Address 10167 South 1190 W				11 07 Y Y Y Y 2022		
City South Jordan Purpose of Disbursement Contribution	State UT	Zip Code 84095	011 FEC Identification Number			
Candidate Name Fillmore, Lincoln, , UT Sen.,		Category/ Type	Transaction ID : 48118595 Amount of Each Disbursement this Period 250.00			
Office Sought: House Disbur Senate President State: District:	rsement For: Primary Other (spe	General ecify) ▼		Contribution Memo Item		
SUBTOTAL of Disbursements This Page (optiona	al)			750.00		
TOTAL This Period (last page this line number of	nly)		•••••	, ,		

S	CHEDULE B (FEC Form 3X)			FO	R LINE	NUMBER: PAGE 246 OF 247
IT	EMIZED DISBURSEMENTS	for each	rate schedule(s) category of the Summary Page	(ch	eck only 21b 28a	r one) 22 23 26 27 28b 28c x 29 30b
	y information copied from such Reports and Stater for commercial purposes, other than using the nar					
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (Un	itedHealth G	Group	PAC	·)
Α.	Full Name (Last, First, Middle Initial) Committee to Elect Curt Bramble Mailing Address 3663 North 870 East		Date of Disbursement			
	City Provo Purpose of Disbursement	State UT	Zip Code 84604			FEC Identification Number
	Contribution Candidate Name Bramble, Curtis, , UT Sen.,	ment For: Primary Other (spec	General cify) ▼	01 Categ Typ	gory/	C Transaction ID : 48118596 Amount of Each Disbursement this Period 250.00 Contribution Memo Item
в.	Full Name (Last, First, Middle Initial) Scott Sandall Campaign Fund Mailing Address 635 N Hillcrest Circle					Date of Disbursement
	Tremonton Purpose of Disbursement Contribution Candidate Name Sandall, Scott, , ,	State UT ment For: Primary	Zip Code 84337 General	01 Cateo Typ	gory/	FEC Identification Number C Transaction ID : 48118597 Amount of Each Disbursement this Period 250.00 Contribution
	State: District:	Other (spec				Memo Item
C.	Full Name (Last, First, Middle Initial) • Elect Ann Millner Committee Mailing Address 4275 Spring Road					Date of Disbursement
	City Ogden Purpose of Disbursement Contribution Candidate Name Millner, Ann, , UT Sen.,	State UT	Zip Code 84403	01 Categ	gory/	FEC Identification Number C Transaction ID : 48118601 Amount of Each Disbursement this Period
	Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼					400.00 Contribution Memo Item
s	UBTOTAL of Disbursements This Page (optional)				►	900.00
Т	OTAL This Period (last page this line number only))			▶	, ,

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 247 OF 247		
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a	/ one) 22 23 26 27 28b 28c x 29 30b		
Any information copied from such Reports and State or for commercial purposes, other than using the nat				on for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (Un	itedHealth G	roup PAC	;)		
Full Name (Last, First, Middle Initial) A. Committee to Elect Jim Dunnigan Mailing Address 3070 Eugene Hill Way	Date of Disbursement					
City	State UT	Zip Code		FEC Identification Number		
Taylorsville Purpose of Disbursement Contribution	01	84129	011			
Candidate Name Dunnigan, Jim, , UT Rep., Office Sought: House Disburse	ment For:		Category/ Type	Transaction ID : 48118602 Amount of Each Disbursement this Period 500.00		
State: District:	Primary Other (spec	General cify) ▼		Contribution Memo Item		
Full Name (Last, First, Middle Initial)		Date of Disbursement				
Mailing Address						
City Purpose of Disbursement	State	Zip Code		FEC Identification Number		
Candidate Name				Amount of Each Disbursement this Period		
Office Sought: House Disburse Senate President	ment For: Primary Other (spec	General	Туре			
State: District:		, , , , , , , , , , , , , , , , , , ,		Memo Item		
Full Name (Last, First, Middle Initial)		Date of Disbursement				
Mailing Address						
City						
Purpose of Disbursement			Category/ Type	C Amount of Each Disbursement this Period		
Office Sought: House Disburse Senate President		<u> </u>				
State: District:		Memo Item				
SUBTOTAL of Disbursements This Page (optional).			····· ►	500.00		
TOTAL This Period (last page this line number only	/)		••••••	40850.00		