FEC	REPORT OF RECEIPTS AND DISBURSEMENTS or Other Than An Authorized Committee	Office Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼ Example: If typing, type over the lines.	12FE4M5
UnitedHealth Group Inc	corporated PAC (UnitedHealth Group PAC))
ADDRESS (number and street)	701 Pennsylvania Ave, NW	
Check if different	Suite 200	
than previously reported. (ACC)	Washington	DC
2. FEC IDENTIFICATION NU		STATE ▲ ZIP CODE ▲
C C00274431	3. IS THIS REPORT X (N) OF	AMENDED (A)
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On: Mar 20 (M3) Jun 20 (M	6) Sep 20 (M9) Dec 20 (M12)
(a) Quarterly Reports:	Apr 20 (M4)	(Non-Election Year Only)
April 15 Quarterly Report (Q1		General (12G) Runoff (12R)
July 15 Quarterly Report (Q2 October 15	PRE-Election Report for the: Convention (12C)	Special (12S)
Quarterly Report (Q3	3) M M / D D	/ Y Y Y Y in the
Year-End Report (YE		State of
Report (Non-election Year Only) (MY)	POST-Election General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	Report for the:	in the State of
5. Covering Period	/ D D / Y Y Y Y 01 2022 through 01	M / D D / Y Y Y Y 31 2022
I certify that I have examined this Type or Print Name of Treasurer	Report and to the best of my knowledge and belief it is Davis, Kelly, , ,	true, correct and complete.
Signature of Treasurer	Kelly, , , [Electronically Filed]	Date 02 / 18 / 2022
NOTE: Submission of false, errone	ous, or incomplete information may subject the person signing	g this Report to the penalties of 52 U.S.C. § 30109
Office Use Only		FEC FORM 3X Rev. 05/2016

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02/18/2022 15 : 56

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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: 01	M / D D / Y Y Y Y 01 2022 T	b: 01 / 01 / 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	658083.72	
	(c) Total Receipts (from Line 19)	124919.21	124919.21
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	783002.93	783002.93
7.	Total Disbursements (from Line 31)	- 2000.00	- 2000.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	785002.93	785002.93
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:		: 01 / D D / Y Y Y Y 31 2022
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:(a) Individuals/Persons Other	·	
(a) Individuals/Fersons Other Than Political Committees (i) Itemized (use Schedule A)	90996.48	90996.48
(ii) Unitemized	33922.73	33922.73
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	124919.21	124919.21
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees(such as PACs)(d) Total Contributions (add Lines	0.00	0.00
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	124919.21	124919.21
Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
 Loan Repayments Received Offsets To Operating Expenditures (Defende Debetweede) 	0.00	0.00
(Refunds, Rebates, etc.)(Carry Totals to Line 37, page 5)16. Refunds of Contributions Made	0.00	0.00
to Federal Candidates and Other Political Committees 17. Other Federal Receipts	0.00	0.00
(Dividends, Interest, etc.)	0.00	0.00
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	124919.21	124919.21
20. Total Federal Receipts (subtract Line 18(c) from Line 19)►	124919.21	124919.21

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 0.00 and Other Political Committees... 0.00 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 19 1 Loans Made.... Refunds of Contributions To: (a) Individuals/Persons Other 0.00 27. 28. 0.00 Than Political Committees 0.00 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 0.00 29. Other Disbursements (Including Non-Federal Donations)..... - 2000.00 - 2000.00 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)).. - 2000.00 2000.00 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... -2000.00- 2000.00

DETAILED SUMMARY PAGE

of Disbursements

COLUMN A

Total This Period

FEC Form 3	K (Rev.	05/2016)
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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)

	-7		-7	124919.21
				0.00
4	-	 	-	0.00
				404040.04
4	-		-	124919.21
				0.00
	7	 	7	0.00
				0.00
	-7-		7	0.00
				0.00
	-7		-7-	0.00

124919.21 0.00 124919.21 0.00 0.00 0.00 0.00

COLUMN B

Calendar Year-to-Date

Page 5

SCHEDULE A (FEC Form 3X) DEAEIDTA

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	✗ 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	ted PAC (l	JnitedHealth Group P	4C)						
Full Name of Individual (Last, First, Middle II A. GAUDIO, JOSEPH, , ,	nitial) or Full O	rganization Name	Date of Receipt						
Mailing Address 4842 E MOUNTAIN VIEW R	D		01 31 2022						
City PARADISE VALLEY	State AZ	Zip Code 85253-1539	Transaction ID : PR1159811864310 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle In B. MIGLIORI, RICHARD, , ,	nitial) or Full O	rganization Name	Date of Receipt						
Mailing Address PO BOX 72			01 / Y Y Y Y 01 31 2022						
City WAYZATA	State MN	Zip Code 55391-0072	Transaction ID : PR1159827464310 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P, Senior Advisor	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle In MILLER, KATHERINE, , ,	nitial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2321 HARBOR LAKE DRIV			01 / D D / Y Y Y Y 01 31 2022						
City ORANGE PARK	State FL	Zip Code 32003-7799	Transaction ID : PR1554324364310 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Pres	upation (for Individual) s Ntwk	Memo Item						
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			1153.80						
TOTAL This Period (last page this line numbe	r only)								

SCHEDULE A (FEC Form 3X) _____ _

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 7 OF

		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		1b	11c	12		
Any information copied from such Reports and					se of s				
or for commercial purposes, other than using t	ne name and a	duress of any political committee	e lo solicit co	linduti		MI SUCN	committe	H.	
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle ANDERSON, CRAIG, , ,	nitial) or Full C	rganization Name	Date o	f Rece	eipt				
Mailing Address 47 AMATO CIRCLE			01	1	D D 31	/ Y	y y 2022	Ŷ	
City WETHERSFIELD	State CT	Zip Code 06109-3971					5736431 s Period)	
FEC ID number of contributing federal political committee.	С					-	384.6	60	
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In Pres Ntwk Mgmt		lemo It	em				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R Dec	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle KELLY, JOHN , , ,	nitial) or Full C	rganization Name	Date o	f Rece	eipt				
Mailing Address 4901 HAWTHORNE COUR SUITE 304			01	1	D D D 31	/ Y	2022	Y	
City EDINA	State MN	Zip Code 55436-5802					59764310 s Period)	
FEC ID number of contributing federal political committee.	С						384.6	60	
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Tax	M	lemo It	em				
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		384.60	P/R Ded	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle JOHNSON, THAD, , ,	nitial) or Full C	rganization Name	Date o	f Rece	eipt				
Mailing Address 9741 GLACIER BAY			01	JL	D D D 31		2022		
City EDEN PRAIRIE	State MN	Zip Code 55347-2615					0436431 s Period	J	
FEC ID number of contributing federal political committee.	С			. y		g	384.6	60	
United HealthCare Services Inc Mk		upation (for Individual) Group Gen Counsel		1emo It	tem				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R Dec	duction	(\$192.	30 Bi-W	eekly)		
SUBTOTAL of Receipts This Page (optional).				. ,		y	1153.8	0	
TOTAL This Period (last page this line number	er only)					- 40-			

FOR LINE NUMBER:

PAGE 8 OF

				(check only one)							
ITEMIZED RECEIPTS			for each category of the Detailed Summary Page	×	11a 13		11b 14	11c		12 16	17
	y information copied from such Reports and S for commercial purposes, other than using the				or the		pose of	soliciting	g con	tributi	ons
\setminus	NAME OF COMMITTEE (In Full)		_								
	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)							
Α.	Full Name of Individual (Last, First, Middle Ini SCHUMACHER, DANIEL, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt				
	Mailing Address 5401 LARADA LANE			1	м м 01	/	D D D 31	/ Y	Y 20	ү 22	Y
	City EDINA	State MN	Zip Code 55436-1024					PR1596			
	FEC ID number of contributing				moun	O	Each R	eceipt th	IIS PE	erioa	_
	federal political committee.	С		Ц.	-		-			384.6	0
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef Strat & Growth Officer		M	emc	ltem				
	Receipt For:		Year-to-Date ▼	_							
	Primary General	Aggregate	P/	R Ded	ucti	on (\$192	2.30 Bi-V	Veekl	y)		
	Other (specify) v	384.60									
B	Full Name of Individual (Last, First, Middle Ini THEISEN, SCOTT, , ,	tial) or Full O	rganization Name		Date of	Be	ceipt				
Ξ.	Mailing Address 1950 MEADOWWOODS TRA	IL	1	01 31 2022						Y	
	City	Zip Code		Transaction ID : PR1596305664310							
	LONG LAKE	MN	55356-9312	A	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		384.60					0		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Unit CEO		M	emc	ltem				
	Receipt For:				_						
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 384.60						2.30 Bi-W	/eekly	y)	
<u> </u>	Full Name of Individual (Last, First, Middle Ini ANDERSON, MICHAEL, , ,	tial) or Full O	rganization Name		Date of	Re	eceipt				
	Mailing Address 17907 INVERNESS CURVE				01 31 2022						
	City	State	Zip Code	1	Trans	act	ion ID :	PR1596	3093	64310)
	EDEN PRAIRIE	MN	55347-2155	A	mount	t of	Each R	eceipt th	nis Pe	eriod	
	FEC ID number of contributing federal political committee.	С		1 l	_	_	y			384.6	0
	Name of Employer (for Individual) Optum Services, Inc						tem				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/	′R Ded	ucti	on (\$19:	2.30 Bi-V	Veekl	y)	
s	UBTOTAL of Receipts This Page (optional)						, .	. ,	1	153.8	0
T	OTAL This Period (last page this line number	only)						1.45			

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PAGE 9 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 1							
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. DAVIDSON, TRACY, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 6058 HARBOUR TOWN CI	R		01 31 2022							
City WESTERVILLE	State OH	Zip Code 43082-8144	Transaction ID : PR1596311664310 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Network	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I B. HAFERMANN , JOSEPH, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 5525 ZENITH AVENUE SO	Mailing Address 5525 ZENITH AVENUE SOUTH									
City EDINA	State MN	Zip Code 55410-2466	Transaction ID : PR1596313464310 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) s Insurance Sols	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I LAGERSTROM, EDWARD, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 8511 E TECOLOTE CIRCL		7:0.1	01 / D D / Y Y Y Y Y 01 31 2022							
City SCOTTSDALE	State AZ	Zip Code 85266-1083	Transaction ID : PR1596315064310 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:		upation (for Individual) Ntwk	Memo Item							
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			1153.80							
TOTAL This Period (last page this line number	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 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 ROSENTHAL, DANIEL, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 8 VIA HERMOSA			01 31 Y Y Y Y Y 01 31 2022							
City ORINDA	State CA	Zip Code 94563-1828	Transaction ID : PR1596317364310 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In CEO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle 3. SANDY, LEWIS, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1317 MONTVALE RIDGE	01 / Y Y Y Y 2022									
City CARY	State NC	Zip Code 27519-1015	Transaction ID : PR1600598764310 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Clin Advancement	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. PETERSON, MATTHEW, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 2260 FOX STREET		1	01 / D D / Y Y Y Y 2022							
City ORONO	State MN	Zip Code 55356-8316	Transaction ID : PR1602669964310 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual)) Ancillary & Ind/Sgt CAO	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			1153.80							
TOTAL This Period (last page this line numb	per only)									

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

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PAGE 11 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 the	Statements mane and a	A not be sold or used by any p ay not be sold or used by any p address 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 Incorpora	ted PAC (I	JnitedHealth Group P/	4C)						
Full Name of Individual (Last, First, Middle I EMERSON, PAUL, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 18855 MEADOW VIEW BLV			01 / Y Y Y Y 01 31 2022						
City PRIOR LAKE	State MN	Zip Code 55372-3133	Transaction ID : PR1806750364310 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
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 ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I B. ANDERSON, CATHERINE, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 57 SIMMONS LANE			01 31 Y Y Y Y Y 01 31 2022						
City SEVERNA PARK	State MD	Zip Code 21146-1921	Transaction ID : PR1903550764310 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Strat Initiv	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I SANTELLI, JOHN, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 25510 BIRCH BLUFF ROAD			01 / Y Y Y Y 2022						
City EXCELSIOR	State MN	Zip Code 55331-8520	Transaction ID : PR1903622064310 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ? CIO	Memo Item						
Receipt For: Primary General Other (specify)	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			1153.80						
TOTAL This Period (last page this line numbe	r only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 12 OF

				each category of the ailed Summary Page		×	11a 13] 11 14	- H	11c 15	12	17			
	y information copied from such Reports and State for commercial purposes, other than using the nar						or the		pos	e of	soliciting	g contribu	tions			
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I	PAC (I	Unite	dHealth Grou	p PA	C)										
A.	Full Name of Individual (Last, First, Middle Initial) WEYMOUTH, PAUL, , ,	or Full C	Organiza	tion Name		Date of Receipt										
	Mailing Address 317 WRIGHTS MILL RD		01 31 2022													
	City	State CT				-			63696431	-						
	COVENTRY	01	(06238-1559		A	mount	of	Ea	ch Re	eceipt th	nis Period				
	FEC ID number of contributing federal political committee.	С				384.60										
	Name of Employer (for Individual) Optum Services, Inc		upation Seg Cl	(for Individual) O			M	emo) Ite	em						
	Receipt For: A	ggregate	Year-to	-Date 🔻		1										
	Primary General Other (specify) ▼		-	384.6	0	P/	R Ded	uctio	on ((\$192	.30 Bi-W	Veekly)				
в.	Full Name of Individual (Last, First, Middle Initial) KANNE, KATHLEEN, , ,	or Full C	Organiza	tion Name			Date of	Re	ecei	pt						
	Mailing Address 4826 PALOMINO COURT			м м 01	1	ľ	31	/ Y	y y 2022	Y						
	City	State	Zip	o Code			Trans	acti	on	ID : F	PR21194	47966431	0			
	ERIE	PA	Amount of Each Receipt this Period													
	FEC ID number of contributing federal political committee.	C							,		-7	384.	60			
	Name of Employer (for Individual) Optum Services, Inc	Occ VP	Memo Item													
	Receipt For: A Primary General Other (specify) ▼	ggregate	Year-to	P/R Deduction (\$192.30 Bi-Weekly)												
с.	Full Name of Individual (Last, First, Middle Initial) WRIGHT, GREGORY, , ,	or Full C	Organiza	tion Name			Date of	Re	ecei	pt						
	Mailing Address 10471 STRAND TERRACE						^M 01	/	Γ	31	/ Y	2022	Y			
	,	State	· · ·	Code								4941643 <i>′</i>				
	SANTA ANA	CA	9	2705-1495		A	mount	t of	Ea	ch Re	eceipt th	nis Period				
	FEC ID number of contributing federal political committee.	С						_	,		, <u>,</u>	384	60			
	Name of Employer (for Individual) United HealthCare Services Inc		upation Plan C	(for Individual) EO			М	emo	o Ite	əm						
	Receipt For: A Primary General Other (specify)	ggregate	Year-to	-Date ▼ 384.6		P/	′R Ded	uctio	on	(\$192	.30 Bi-V	Veekly)				
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SCHEDULE A (FEC Form 3X) DEAEIDTA

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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	3	K 11a		11b	11c	12					
	y information copied from such Reports and Stat													
or	for commercial purposes, other than using the n NAME OF COMMITTEE (In Full)	ame and ad	doress of any political committee	to s	olicit cor	ITID	utions t	rom sucr	i commit	tee.				
\rangle	UnitedHealth Group Incorporated	PAC (L	InitedHealth Group PA	C)										
A.	Full Name of Individual (Last, First, Middle Initial HULTGREN, BROR, , ,) or Full Or	rganization Name		Date of	Re	ceipt							
	Mailing Address 408 22ND ST			01 31 2022										
	City GOLDEN	State CO	Zip Code 80401-2452	_				PR21331 eceipt th						
	FEC ID number of contributing federal political committee.	С					т. I.	-	384.	60				
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) n CEO		Me	emo	Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 384.60		P/R Dedu	uctio	on (\$192	2.30 Bi-W	/eekly)					
в.	Full Name of Individual (Last, First, Middle Initial PUTNAM, T JEFFREY, , ,) or Full Or	rganization Name		Date of	Re	ceipt							
	Mailing Address 303 ELMWOOD PLACE WEST		Zip Code		01 / 31 / 2022 Transaction ID : PR2133134264310									
	City MINNEAPOLIS	State MN	-			-			-					
	FEC ID number of contributing federal political committee.	C	55419-1349		Amount of Each Receipt this Period 384.60									
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Mkt		Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 384,60	P/R Deduction (\$192.30 Bi-Weekly)										
С.	Full Name of Individual (Last, First, Middle Initial SMITH, DANNETTE, , ,) or Full Or	rganization Name		Date of	Re	ceipt							
	Mailing Address 4200 ALDEN DRIVE				01	/	D D D 31	/ Y	2022	Y				
	City EDINA	State MN	Zip Code 55416-5010	-			-	PR21457 eceipt th		-				
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .	y	384.	_				
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) eputy Gen Counsel		Me	emc	tem							
	Receipt For: Primary General Other (specify)	Year-to-Date ▼ 384.60		P/R Ded	ucti	on (\$192	2.30 Bi-W	/eekly)						
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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	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										
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (I	JnitedHealth Group PA	.C)							
Α.	Full Name of Individual (Last, First, Middle Initia LEWIS, KURT, , ,	al) or Full C	rganization Name	Date of Receipt							
	Mailing Address 961 RIVER FOREST DRIVE			01 / D D / Y Y Y Y 01 31 2022							
	City MAINEVILLE	State OH	Zip Code 45039-7720	Transaction ID : PR2203967564310							
			43039-7720	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		384.60							
	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) ▼		384.60	P/R Deduction (\$192.30 Bi-Weekly)							
в.	Full Name of Individual (Last, First, Middle Initia BEAULE, JEAN-FRANCOIS, , ,	al) or Full C	rganization Name	Date of Receipt							
	Mailing Address 7 STRATFORD RD			01 31 2022							
	City	State	Zip Code	Transaction ID : PR2225813664310							
	FARMINGTON	СТ	06032-1444	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) P HIth Advancement	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$115.38 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initia RYAN, JOHN, , ,	al) or Full C	rganization Name	Date of Receipt							
	Mailing Address 45 WESTMORELAND LN			01 / Y Y Y Y 01 31 2022							
	City	State	Zip Code	Transaction ID : PR2225819664310							
	NAPERVILLE	IL	60540-5817	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		384.60							
	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 ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)							
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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)													
	UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)										
A.	Full Name of Individual (Last, First, Middle Initia KANTOLA, KEVIN, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt							
	Mailing Address 7031 HALSTEAD DRIVE			01 31 2022										
	City MINNETRISTA	State MN	Zip Code 55364-3201						52706431 is Period					
	FEC ID number of contributing federal political committee.	С						-	384.	60				
	Name of Employer (for Individual) Optum Services, Inc	Occu VP I	upation (for Individual) T		Me	emo	Item							
	Receipt For: Primary General Other (specify) ▼	Year-to-Date ▼ 384.60	F	P/R Dedu	uctio	on (\$192	2.30 Bi-W	/eekly)						
в.	Full Name of Individual (Last, First, Middle Initia OBRIEN, DENNIS, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt							
	Mailing Address 61 LOUGHLIN AVE	1			01 / D / Y Y Y Y 2022									
	City COS COB	State CT	Zip Code 06807-2621				-		2736431 is Period	-				
	FEC ID number of contributing federal political committee.	С			384.60									
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Reg		Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)										
С.	Full Name of Individual (Last, First, Middle Initia PRINCE, JOHN, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt							
	Mailing Address 546 HARRINGTON ROAD		- 1		01 ^M	/	31		y y 2022					
	City WAYZATA	State MN	Zip Code 55391-1550				-		73846431 is Period	-				
	FEC ID number of contributing federal political committee.	С					,		384.	_				
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Grp Pres & COO		Me	emo	tem							
	Receipt For: Primary General Other (specify)	Year-to-Date ▼ 384.60	F	P/R Dedu	uctio	on (\$192	2.30 Bi-W	/eekly)						
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	mercial purposes, other than using the na	ame and ad	ddress of any political committee	to solic	it cont	tribu	utions f	rom such	n committ	ee.				
	of COMMITTEE (In Full) edHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)										
	me of Individual (Last, First, Middle Initial , JOY, , ,) or Full Or	rganization Name	Da	te of	Rec	ceipt							
Mailing	Address 2208 ELM AVENUE			01 / D D / Y Y Y Y 01 31 2022										
City MANH	ATTAN BEACH	State CA	Zip Code 90266-2809	Transaction ID : PR2402446264310 Amount of Each Receipt this Period										
	number of contributing political committee.	С					,		384.	60				
United I	of Employer (for Individual) HealthCare Services Inc		upation (for Individual) of Compl Off & SVP Reg Affs		Me	mo	Item							
	rimary General hther (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R	Dedu	ctio	n (\$192	2.30 Bi-W	/eekly)					
	me of Individual (Last, First, Middle Initial KANDER, CORY, , ,) or Full Or	rganization Name	Da	te of	Rec	ceipt							
	Address 4901 HAMPDEN LANE UNIT 405	Ototo	Zin Oode	01 / 01 / 2022 Transaction ID : PR2405428864310										
City BETHE	SDA	State MD	Zip Code 20814-7918						12886431 is Period	0				
	number of contributing political committee.	С		384.60										
	of Employer (for Individual) HealthCare Services Inc		upation (for Individual) P, Senior Advisor											
	: For: rimary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 384.60	P/R Deduction (\$192.30 Bi-Weekly)										
	me of Individual (Last, First, Middle Initial , KATHLYN, , ,) or Full Or	rganization Name	Da	te of	Rec	ceipt							
	Address 2225 46TH ST NW	1		4 L	01 ^M	/	D D 31	JL	ү ү 2022					
City WASH	INGTON	State DC	Zip Code 20007-1032						54506431 iis Period	0				
	number of contributing political committee.	С			_		9	y	384.	60				
United	of Employer (for Individual) HealthCare Services Inc		upation (for Individual) Plan CEO		Me	mo	Item							
	rimary General ther (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R	Dedu	ictio	n (\$192	2.30 Bi-V	Veekly)					
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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 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 BALTHAZOR, PAUL, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 2002 SUGARWOOD DRIVE	E		Date of Receipt										
City ORONO	State MN	Zip Code 55356-9339											
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 384.60										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment COO	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle I B. NESS, LAURA, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 10550 PINNACLE WAY			01 / D D / Y Y Y Y 2022										
City WOODBURY	State MN	Zip Code 55129-4282	Transaction ID : PR2437121564310 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		384.60										
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 ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle I C. COSGRIFF, JOHN, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 1875 HUNTER LANE			01 / D D / Y Y Y Y Y 2022										
City MENDOTA HEIGHTS	State MN	Zip Code 55118-4110	Transaction ID : PR2437121664310 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		384.60										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ' Bus Dev	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)										
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		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 a to collicit contributions from such committee								
or for commercial purposes, other than using t	ine name and a	duress of any political committee	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 EDELSON, BRETT, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 4600 DREXEL AVENUE			01 31 2022								
City EDINA	State MN	Zip Code 55424-1132	Transaction ID : PR2437127164310 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		384.60								
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 ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. RAINEY, PETER, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 8850 COUNTY ROAD 26			01 / D D / Y Y Y Y 2022								
City MINNETRISTA	State MN	Zip Code 55359-9445	Transaction ID : PR2437127564310 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Corp Controller	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify) ▼		384.60	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. LIPPERT, ROBIN, , ,		rganization Name	Date of Receipt								
Mailing Address 6711 POINTE LAKE LUCY	State	Zip Code									
City CHANHASSEN	MN	Zip Code 55317-8434	Transaction ID : PR2439928064310 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) of of Staff	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)								
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or	for commercial purposes, other than using the n NAME OF COMMITTEE (In Full)	ame and a	address of any political committee	to solicit c	ontric	outions tr	om sucr	1 committ	ee.				
	UnitedHealth Group Incorporated	PAC (l	UnitedHealth Group PA	C)									
A.	Full Name of Individual (Last, First, Middle Initia HEYMAN, STEPHEN, , ,	l) or Full O	Drganization Name	Date	of Re	eceipt							
	Mailing Address 5300 SHERRILL AVENUE			M M / D D / Y Y Y Y 01 31 2022									
	City CHEVY CHASE	State MD	Zip Code 20815-3720					26576431 is Period	0				
	FEC ID number of contributing federal political committee.	С				-		384.6	60				
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) P Strategy & Partnerships		Memo	o Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 384.60	P/R De	educti	on (\$192	2.30 Bi-W	/eekly)					
в.	Full Name of Individual (Last, First, Middle Initia LANGER, DONALD, , ,	l) or Full O	Drganization Name	Date	of Re	eceipt							
	Mailing Address 5110 OAK RAMBLING DRIVE	1		01 / D D / Y Y Y Y 01 31 2022									
	City KATY	State TX	Zip Code 77494-1971			-		1546431)				
	FEC ID number of contributing		11494-1971	Amou	int of	Each Re	eceipt th	is Period	_				
	federal political committee.	С		384.60									
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) h Plan CEO	Memo Item									
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	Other (specify) ▼		, 384.60	P/R De	ducti	on (\$192	.30 Bi-W	(eekly)					
C.	Full Name of Individual (Last, First, Middle Initia ALCOREZA, LENYS, , ,	l) or Full O	Drganization Name	Date	of Re	eceipt							
	Mailing Address 675 THALIA POINT RD	-		01		D D D 31	/ Y	y y 2022	Y				
	City VIRGINIA BEACH	State VA	Zip Code 23452-1815					01686431 is Period	0				
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	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Sales		Memo	o Item							
	Receipt For: Primary General Other (specify)	e Year-to-Date ▼ 384.60	P/R De	educti	ion (\$192	2.30 Bi-W	/eekly)						
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SCHEDULE A (FEC Form 3X) DEAEIDTA

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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 PA	AC)									
Full Name of Individual (Last, First, Middle Ir A. MANDERFELD, THOMAS, , ,	nitial) or Full C	organization Name	Date of Receipt									
Mailing Address 3760 WEST CALHOUN PAR	RKWAY		01 31 2022									
City MINNEAPOLIS	State MN	Zip Code 55410-1118	Transaction ID : PR2486697964310 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Investor Relations	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle Ir B. MCMAHON, DIRK, , ,	nitial) or Full C	organization Name	Date of Receipt									
Mailing Address 60 WILDHURST ROAD			01 31 2022									
City EXCELSIOR	State MN	Zip Code 55331-8461	Transaction ID : PR2491457064310 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) sident UHG & COO	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 384.60	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle Ir c. SMITH, KARA, , ,	nitial) or Full C	organization Name	Date of Receipt									
Mailing Address 3917 TERRY PLACE			01 / Y Y Y Y Y 01 31 2022									
City ALEXANDRIA	State VA	Zip Code 22304-1737	Transaction ID : PR2540175364310 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
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 ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)									
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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\backslash	NAME OF COMMITTEE (In Full)				. .										
\sum	UnitedHealth Group Incorporated	PAC (l	Jni	tedHealth Group PA	C)										
Α.	Full Name of Individual (Last, First, Middle Initial) PURDY, PATRICIA, , ,) or Full O	rgar	nization Name		Date of Receipt									
	Mailing Address 3615 THORNAPPLE STREET					M M / D D / Y Y Y Y 01 31 2022									
	City	State		Zip Code		Trans	acti	ion	1D : I	PR	25413	00664	4310		
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	Primary General Other (specify) ▼	384.60	P	/R Ded	uctio	on	(\$192	2.30) Bi-W	eekly))				
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в.	Full Name of Individual (Last, First, Middle Initial)) or Full O	rgar	nization Name		Date of	Re	cei	ipt						
	Mailing Address 9905 WOODLAND DRIVE	01 / D D / Y Y Y Y 2022													
	City	State		Zip Code		Transaction ID : PR2543582564310 Amount of Each Receipt this Period									
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	FEC ID number of contributing federal political committee.	С				384.60)	
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) ernal Affs	Memo Item										
	Receipt For:	Aggregate	Yea	r-to-Date ▼											
	Primary General				P/R Deduction (\$192.30 Bi-Weekly)										
	Other (specify) V		,	384.60											
C.	Full Name of Individual (Last, First, Middle Initial) DAVENPORT, ALLISON, , ,) or Full O	rgar	nization Name		Date of	Re	cei	ipt						
	Mailing Address 141 PELHAM ROAD	1 -				01 ^M	/	L	D D D			2022	2		
	City	State		Zip Code				-			25523				
	PHILADELPHIA	PA		19119-2661	_ <i>I</i>	Amount	of	Ea	ich Re	ece	eipt this	s Per	iod		
	FEC ID number of contributing federal political committee.	С						,			9	3	84.60)	
	Name of Employer (for Individual)	Occi	upat	ion (for Individual)		M	emo	o Ite	em						
	Optum Services, Inc	VP 0	Gen	Mgmt											
	Receipt For:	r-to-Date ▼													
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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 PA	AC)										
Full Name of Individual (Last, First, Middle I LOVELADY, JOHN, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 5378 BUENA VISTA DR			01 31 2022										
City FRISCO	State TX	Zip Code 75034-2253	Transaction ID : PR2552964264310 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 384.60										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Bus Ops	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle I B. REIDY, GREGORY, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 1005 BLAKEFIELD DRIVE			M M / D / Y										
City BRENTWOOD	State TN	Zip Code 37027-8479	Transaction ID : PR2554013364310 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		384.60										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In CEO	Memo Item										
Receipt For:	Aggregate	Year-to-Date V											
Primary General Other (specify) ▼		384.60	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle I C. GIANCURSIO, DONALD, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 72 MIDNIGHT RIDGE DR			01 / D D / Y Y Y Y 2022										
City LAS VEGAS	State NV	Zip Code 89135-1680	Transaction ID : PR2560064964310 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		384.60										
Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) Plan CEO	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)										
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			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 Incorport	rated PAC (l	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middl KUNEMUND, GREGG, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 3169 NEAL COURT			01 / D D / Y Y Y Y 01 31 2022								
City CUMMING	State GA	Zip Code 30041-6111	Transaction ID : PR2560065364310 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
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 ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middl B. MILICH, DAVID, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 2702 BIRCHMERE COUR			01 / Y Y Y Y 01 31 2022								
City KATY	State TX	Zip Code 77450-1303	Transaction ID : PR2560066064310								
FEC ID number of contributing		77450-1505	Amount of Each Receipt this Period								
federal political committee.	C		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) I Plan CEO	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify) ▼		384.60	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middl C. NOEL, TIMOTHY, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 4316 FREMONT AVENU			01 / Y Y Y Y 2022								
City MINNEAPOLIS	State MN	Zip Code 55409-1721	Transaction ID : PR2560398864310 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
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 ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)								
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	F COMMITTEE (In Full) dHealth Group Incorporated	PAC (U	InitedHealth Group PA	C)								
	ne of Individual (Last, First, Middle Initial EN, PAUL, , ,) or Full Or	ganization Name	Date	e of R	eceipt						
Mailing A	Address 9 VAN MULEN STREET				M)1	/ D D 31	/ Y	y y 2022	Y			
City MAHWA	Н	State NJ	Zip Code 07430-2977					30336431 is Period)			
	number of contributing olitical committee.	С						384.6	50			
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	ne of Individual (Last, First, Middle Initial JIST, DARREN, , ,) or Full Or	ganization Name	Date	e of R	eceipt						
	Address 5004 ARDEN AVE	1	-		м)1	/ D D 31	/ Y	y y 2022	Y			
City EDINA		State MN	Zip Code 55424-1314					3 03464310 is Period)			
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	mary General ner (specify) ▼		384,60	P/R D	Deduct	ion (\$192	2.30 Bi-W	(eekly)				
	ne of Individual (Last, First, Middle Initial RNS, MATTHEW, , ,) or Full Or	ganization Name	Date	e of R	eceipt						
	Address 5118 FAIRGLEN LANE)1	/ D D 31	/ Y	y y 2022	Y			
City CHEVY	CHASE	State MD	Zip Code 20815-6517					77796431 is Period)			
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United H	Employer (for Individual)	Occu VP C	pation (for Individual) omm		Mem	io Item						
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Any information copied from such Reports and			
or for commercial purposes, other than using the	ne name and a	aaress of any political committee	e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)
Full Name of Individual (Last, First, Middle I HINTON, DUSTIN, , ,	nitial) or Full C	rganization Name	Date of Receipt
Mailing Address W132N6475 MARACH RD			01 / Y Y Y Y Y 01 31 2022
City MENOMONEE FALLS	State WI	Zip Code 53051-6085	Transaction ID : PR2571978764310 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		384.60
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 ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle I WIFFLER, THOMAS, , ,	nitial) or Full C	rganization Name	Date of Receipt
Mailing Address 1421 SOMERFIELD DRIVE			01 / Y Y Y Y Y 2022
City BOLINGBROOK	State IL	Zip Code 60490-3207	Transaction ID : PR2572992764310
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 384.60
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Unit CEO	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle I C. KANE, BRIAN, , ,	nitial) or Full C	rganization Name	Date of Receipt
Mailing Address 4615 ROANOAKE ROAD			01 / D D / Y Y Y Y Y 2022
City GOLDEN VALLEY	State MN	Zip Code 55422-5254	Transaction ID : PR2574979164310 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		384.60
Name of Employer (for Individual) Optum Services, Inc Receipt For:	SVF	upation (for Individual) 2 Comm	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	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
Any information copied from such Reports and	d Statements ma	Ay not be sold or used by any p	13 14 15 16 17 version for the purpose of soliciting contributions a to collicit contributions
or for commercial purposes, other than using	the name and a	louress of any political committe	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 CIANFROCCO, HEATHER, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 4478 MIDDLE ROAD			01 31 2022
City ALLISON PARK	State PA	Zip Code 15101-1110	Transaction ID : PR2574986264310 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		384.60
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 ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle SJOBLAD, BETHANY, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 10730 PERRY DRIVE NOF			01 / D D / Y Y Y Y Y 2022
City BROOKLYN PARK	State MN	Zip Code 55443-4700	Transaction ID : PR2575009164310 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		384.60
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify) ▼		384.60	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle DUNCAN, MICHELE, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 3038 FAIRWAY CIRCLE			01 / D D / Y Y Y Y Y 01 2022
City CHASKA	State MN	Zip Code 55318-3408	Transaction ID : PR2575029664310 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		384.60
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Compliance	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)
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Any information copied from such Reports and					soliciting	contribut	
or for commercial purposes, other than using t	ne name and a	duress of any political committee	e to solicit cor	ntributions fr	om such	committe	e.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)				
Full Name of Individual (Last, First, Middle MADDOX, JEFFREY, , ,	Initial) or Full C	rganization Name	Date of	Receipt			
Mailing Address 7810 HANOVER ST			M M 01	/ D D 31	/ Y	y y 2022	Y
City DALLAS	State TX	Zip Code 75225-8220)
FEC ID number of contributing federal political committee.	С					384.6	0
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		emo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Ded	uction (\$192	2.30 Bi-W	eekly)	
Full Name of Individual (Last, First, Middle FITZPATRICK, JOSEPH , , ,	Initial) or Full C	rganization Name	Date of	Receipt			
Mailing Address 3936 CAMPELLO CURVE	1-		M M 01	/ D D 31	/ Y		Y
City CHASKA	State MN	Zip Code 55318-4639					
FEC ID number of contributing federal political committee.	С					384.6	0
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) Fin		emo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Ded	uction (\$192	.30 Bi-W	eekly)	
Full Name of Individual (Last, First, Middle C. LINDSAY, VIVIAN, , ,	Initial) or Full C	rganization Name	Date of	Receipt			
Mailing Address 14930 SW 39 ST			01	/ D D 31	/ Y		Y
City DAVIE	State FL	Zip Code 33331-2767)
FEC ID number of contributing federal political committee.	С			, , ,	, ,	384.6	0
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	M	emo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R Ded	uction (\$192	2.30 Bi-W	/eekly)	
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (II UnitedHealth Grou		JnitedHealth Group PA	4C)
Full Name of Individual (La ZAETTA, CHRISTOPH	st, First, Middle Initial) or Full C ER, , ,	organization Name	Date of Receipt
Mailing Address 875 LAKE	STREET NORTH #216		M M / D D / Y Y Y Y 01 31 2022
City	State MN	Zip Code	Transaction ID : PR2575068364310
WAYZATA FEC ID number of contribu federal political committee.		55391-2761	Amount of Each Receipt this Period 384.60
Name of Employer (for Ind Optum Services, Inc	,	upation (for Individual) Group Gen Counsel	Memo Item
Receipt For: Primary Ger Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (La B. NICHOLS, SANDRA	st, First, Middle Initial) or Full C	organization Name	Date of Receipt
Mailing Address 16900 CR	OWN BRIDGE DRIVE		01 31 2022
City DELRAY BEACH	State FL	Zip Code 33446-2407	Transaction ID : PR2575074564310 Amount of Each Receipt this Period
FEC ID number of contribu federal political committee.	ting		384.60
Name of Employer (for Ind United HealthCare Services	laa [']	upation (for Individual) P CMO	Memo Item
Receipt For: Primary Ger Other (specify) ▼	neral Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (La C. PETERSOHN, PAT	st, First, Middle Initial) or Full C	organization Name	Date of Receipt
Mailing Address 16413 BIR	CH STREET		01 / D D / Y Y Y Y 01 31 2022
City OVERLAND PARK	State KS	Zip Code 66085-7842	Transaction ID : PR2575148364310
FEC ID number of contribution federal political committee.			Amount of Each Receipt this Period 384.60
Name of Employer (for Ind United HealthCare Services		upation (for Individual) Reg VP of SIs	Memo Item
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	AME OF COMMITTEE (In Full) InitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	AC)									
	ull Name of Individual (Last, First, Middle Initia HAMANN, CHAD, , ,	ll) or Full Or	rganization Name	Date of Receipt									
M	ailing Address 7638 RIDGEVIEW WAY				01 / Y Y Y Y 01 31 2022								
	ity CHANHASSEN	State MN	Zip Code 55317-4507						701643 1 is Perioc				
	EC ID number of contributing deral political committee.	С					y		384	60			
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	ull Name of Individual (Last, First, Middle Initia DEMARIS, PETER, , ,	ll) or Full Or	rganization Name		Date of	Rec	ceipt						
	ailing Address 2301 OLIVER AVE S				M M 01	/	D D 31	/ Y	2022	Y			
	ity IINNEAPOLIS	State MN	Zip Code 55405-2448						9186431	-			
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	ame of Employer (for Individual) nited HealthCare Services Inc		upation (for Individual) Mktg eComm		Me	emo	Item						
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	ailing Address 268 OAK LANDING WAY				01 ^M	/	D D D 31	L	y y 2022				
	ity SEVERNA PARK	State MD	Zip Code 21146-3116				-		2031643	-			
	EC ID number of contributing deral political committee.	С			<u> </u>	_	9	, ,	384	60			
U	ame of Employer (for Individual) nited HealthCare Services Inc		ipation (for Individual) Unit CEO		Me	emo	Item						
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	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (l	JnitedHealth Grou	up PAC	;)							
Α.	Full Name of Individual (Last, First, Middle Initial) FRANCIS, KEVIN, , , Mailing Address 15815 MINNETONKA BLVD	or Full O	rganization Name		1 _	ate of	Red		ot D		YY	Y
	City	State MN	Zip Code 55345-1410			01 Transa		on	31 I D : F		2022 20336431	0
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	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Chief Actuary			Me	mo	lte	m			
	Receipt For: Ag Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 384.	.60	P/F	R Dedu	uctio	on (\$0.00	Bi-Wee	ekly)	
B.	Full Name of Individual (Last, First, Middle Initial) STORDAHL, PAUL, , ,	or Full O	rganization Name		D	ate of	Red	ceip	ot			
	Mailing Address 7001 W 175TH AVENUE	State	Zip Code			м м 01	/	L	31		2022	
	EDEN PRAIRIE	MN	55346-2161					-			2 1306431 is Period	-
	FEC ID number of contributing federal political committee.	0						,		-9-	384.	60
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Chief Actuary			Me	mo	Ite	m			
	Receipt For: Ag Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 384.	.60	P/F	R Dedu	ictio	on (\$	\$192.	30 Bi-W	/eekly)	
C.	Full Name of Individual (Last, First, Middle Initial) KOENIG, ERICA, , , Mailing Address 5985 PRESTWICK COURT	or Full O	rganization Name		1 _	ate of	Red					
		State	Zip Code			01 Tropo	, noti	L	31		2022 2150643	
	EXCELSIOR	MN	55331-4412								is Period	
	FEC ID number of contributing federal political committee.	0			ļ			9		y	384.	60
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) of Talent Officer			Me	emo	lte	m			
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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	y information copied from such Reports and State for commercial purposes, other than using the na					for	the		pos	se of	sol	liciting	contri	butio	ns
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Un	itedHealth Group PA	AC)										
Α.	Full Name of Individual (Last, First, Middle Initial) TRUXAL, WILLIAM, , ,	or Full O	rga	nization Name		Da	ite o	f Re	ece	ipt					
	Mailing Address 226 HARBOR VIEW LANE					IV	01	1	l	D D 31		/ Y	2022		
	City LARGO	State FL		Zip Code 33770-4007					-				18464		
		C	I	33770-4007		An	noun	t of	Ea	ich R	ece	eipt thi	s Peri 38	od 34.60	
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual)			М	emc	o It	em					
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 384.60		P/R	Ded	luctio	on	(\$192	2.30) Bi-W	eekly)		
В.	Full Name of Individual (Last, First, Middle Initial) SHORS, MATTHEW, , ,	or Full O)rga	nization Name		Da	ite o	f Re	ece	ipt					
	Mailing Address 4649 EWING AVENUE SOUTH					M	01	/	ľ	D D 31	1	/ Y	2022		
	City MINNEAPOLIS	State MN		Zip Code 55410-1745									22364 s Peri		_
	FEC ID number of contributing federal political committee.	С							-		_	-9	38	34.60	
	Name of Employer (for Individual) United HealthCare Services Inc			tion (for Individual) uty Gen Counsel			М	emc	o It	em					
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 384.60	l f	P/R	Ded	uctio	on	(\$192	2.30) Bi-W	eekly)		
с.	Full Name of Individual (Last, First, Middle Initial) SANTORO, MICHAEL, , ,	or Full O)rga	nization Name		Da	ite o	f Re	ece	ipt					
	Mailing Address 18 OLD FIRE ROAD					IV	01	/	l	D D 31		/ Y	2022		
	City TRUMBULL	State CT		Zip Code 06611-1431									22664		
		C					noun	t of	Ea	ICN R	ece	eipt thi	s Peri 38	oa 34.60	
	Name of Employer (for Individual) United HealthCare Services Inc	Occi VP (•	tion (for Individual)			Μ	lemo	o It	em					
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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 GRUNDHOEFER, BRYAN, , ,	nitial) or Full C	rganization Name	Date o	f Rece	eipt			
Mailing Address 317 SIDNEY BAKER STRE SUITE 400 PMB 519			01	1	D D 31	/ Y	y y 2022	Y
City KERRVILLE	State TX	Zip Code 78028-6150)
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Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) D Med Grp Non Physn	M	lemo It	em			
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Mailing Address 8222 STONE MASON CT			M M 01	1	D D 31	/ Y		Ŷ
City WINDERMERE	State FL	Zip Code 34786-5624)
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Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual)		lemo It	em	,		
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Mailing Address 3180 CYPRESS CIRCLE S	0	7. 0.4	01	JL	^D 31		2022	
City MEDINA	State MN	Zip Code 55340-8807						0
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Name of Employer (for Individual) United HealthCare Services Inc	Occ VP I	upation (for Individual) Fin		lemo It	tem			
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	v information copied from such Reports and Stat				for the		ose of	soliciting	g cont	ributio	ons
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	Full Name of Individual (Last, First, Middle Initial KUETER, DANIEL, , ,) or Full Or	ganization Name	[Date of	Re	ceipt				
I	Mailing Address 1500 WINGATE DRIVE				м м 01	/	D D 31	/ Y	ү 202	22	ſ
	City DELAWARE	State OH	Zip Code 43015-9200					PR25752 eceipt th			_
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I	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Segment CFO		Me	emo	Item				
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-	Mailing Address 815 NORTHERN SHORES POIN				м м 01	/	D D D 31	/ Y	202	2 2	
	City GREENSBORO	State NC	Zip Code 27455-3459					PR25752 eceipt th			
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	Name of Employer (for Individual) Jnited HealthCare Services Inc		pation (for Individual) Plan CEO		Me	emo	Item				
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(City LADERA RANCH	State CA	Zip Code 92694-1556					PR2575: eceipt th			
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	Name of Employer (for Individual) United HealthCare Services Inc	Occu Regn	pation (for Individual) CEO		Me	emo	ltem				
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NAME OF COMMITTEE (In Full)			
UnitedHealth Group Incorporat	ed PAC (I	JnitedHealth Group PA	AC)
Full Name of Individual (Last, First, Middle In A. HUNT, BRADLEY, , ,	itial) or Full C	organization Name	Date of Receipt
Mailing Address 6636 W SHORE DR			01 31 2022
City	State	Zip Code	Transaction ID : PR2575310464310
EDINA	MN	55435-1529	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		384.60
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
United HealthCare Services Inc	Bus	Segment CMO	
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify) ▼		384.60	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle In B. WHITE, WAYNE, , ,	itial) or Full C	organization Name	Date of Receipt
Mailing Address 8727 W BUCKHORN TRL			01 / D D / Y Y Y Y Y 01 31 2022
City PEORIA	State AZ	Zip Code 85383-4852	Transaction ID : PR2575342364310
		03303-4032	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		384.60
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Cust Svs	Memo Item
Receipt For:	Aggregate	Year-to-Date V	
Other (specify) ▼		384.60	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle In C. BRATTEBO, CRAIG, , ,	itial) or Full C	Prganization Name	Date of Receipt
Mailing Address 10202 HARMONY CIRCLE			01 31 2022
	State MN	Zip Code	Transaction ID : PR2575397264310
EDEN PRAIRIE		55347-5019	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		384.60
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) uty Gen Counsel	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify)		384.60	P/R Deduction (\$192.30 Bi-Weekly)
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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•	information and the second second		av not be calified and the		13		14			15	16	17
	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	UnitedHealth Group PA	C)								
Α.	Full Name of Individual (Last, First, Middle Initial) VENKATESAN, CHANDRAMOULEESWAF		Organization Name		Date of	Re	cei	ipt				
	Mailing Address 17698 62ND COURT NORTH				м м 01	1	Г	D D 31	/	Y	y y 2022	Y
	City MAPLE GROVE	State MN	Zip Code 55311-4619	\vdash							1016431	-
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	Primary General Other (specify) ▼		384.60	P/	R Dedu	uctio	on	(\$192	2.30	Bi-We	eekly)	
В.	Full Name of Individual (Last, First, Middle Initial) CASTILLO, EFREM, , ,	or Full O	Organization Name		Date of	Re	cei	ipt				
	Mailing Address 630 ELIZABETH ROAD				м м 01	/	_	31	/	Y	y y 2022	Y
	City SAN ANTONIO	State TX	Zip Code 78209-6135								4136431 s Perioc	
	FEC ID number of contributing federal political committee.	С					- -			-y	269	22
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) n Care Initiv		Me	emo) Ite	em				
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с.	Full Name of Individual (Last, First, Middle Initial) MURLEY, MARY, , ,	or Full O	Organization Name		Date of	Re	cei	ipt				
	Mailing Address 2775 COUNTRYSIDE DRIVE WE	ST			^M 01	1	Ľ	D D D	1	Y	2022	Y
	City ORONO	State MN	Zip Code 55356-9675	-							436643 [,]	
	EEC ID number of contributing	C			Amount	of	⊨a	ich He	ece	ipt thi	s Perioc 384	_
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P, Risk and Analytics		Me	emo	o Ite	em				
	Receipt For: A Primary General Other (specify)	vggregate	Year-to-Date ▼ 384.60	P/	/R Dedi	uctio	on	(\$192	2.30) Bi-W	eekly)	
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	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	d PAC (L	InitedHealth Group PA	AC)							
<u> </u>	Full Name of Individual (Last, First, Middle Initia SPILKER, TIMOTHY, , ,	ganization Name		Date of	Re	ceipt					
	Mailing Address 32 FITCH LANE				M M / D D / Y Y Y Y 01 31 2022						
	City NEW CANAAN	State CT	Zip Code 06840-5051		Transaction ID : PR25754463643 Amount of Each Receipt this Period				0		
	FEC ID number of contributing federal political committee.	C			384.60						
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Bus		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate] '	P/R Deduction (\$192.30 Bi-Weekly)							
в.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name BOOKER, ROBERT, , ,				Date of	Re	ceipt				
	Mailing Address 16632 HANSON BLVD NW				01 / D D / Y Y Y Y 01 31 2022						
	City ANDOVER	State MN	Zip Code 55304-2089		Transaction ID : PR2575447264310 Amount of Each Receipt this Period				0		
	FEC ID number of contributing federal political committee.	С					7		384.	60	
	Name of Employer (for Individual) Optum Services, Inc	Occupation (for Individual) Chief Info Security Officer				emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate]	P/R Deduction (\$192.30 Bi-Weekly)							
<u></u> с.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name RUNICE, PAUL, , ,				Date of	Re	ceipt				
	Mailing Address 4622 BRUCE AVENUE				01	1	D D D 31	/ Y	y y 2022	Y	
	City EDINA	State MN	Zip Code 55424-1123						15156431 is Period	0	
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	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) reasury		Me	emo	tem				
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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	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) HENSEL, KRISTA, , ,	or Full O	rgar	nization Name	[Date of Receipt								
	Mailing Address 5913 ASHCROFT AVE						01 [™]	1	Ľ	D D 31)	/ Y	ү ү 2022	Y
	5	State MN		Zip Code					-				826643	-
			_	55424-1711	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C			384.60									
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) n CEO			Me	emo) It	em				
	Receipt For:	ggregate	Yea	r-to-Date ▼										
	Primary General Other (specify) ▼		7	384.60	P/	/R [Dedu	uctio	on	(\$192	2.3	0 Bi-W	eekly)	
в.	Full Name of Individual (Last, First, Middle Initial) VESLEDAHL, MATTHEW, , ,	or Full O	rgar	nization Name		Date	e of	Re	ece	ipt				
	Mailing Address 15598 MICHELE LANE		_				™ 01	/	Γ	D D 31		/ Y	2022	Y
	City EDEN PRAIRIE	State MN		Zip Code 55346-2548					-				992643 s Period	
	FEC ID number of contributing federal political committee.	C						384.60						
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) etwork			Me	emo) It	em				
	Receipt For: Age Primary General Other (specify) ▼	ggregate	Yea	r-to-Date ▼ 384.60	P/	/R [Dedu	uctic	on	(\$192	2.3	0 Bi-We	eekly)	
	Full Name of Individual (Last, First, Middle Initial) SUNDAL, DEBORAH, , ,	or Full O	rgar	nization Name		Date	e of	Re	ece	ipt				
	Mailing Address 5109 WEST 66TH ST						01 [™]	/	Γ	31)	/ Y	2022	Y
	5	State		Zip Code		Tr	ans	acti	ior	ו ID :	PF	R25755	029643	10
	EDINA	MN		55439-1429	/	Amo	ount	of	Ea	ach R	lec	eipt thi	s Period	k
	FEC ID number of contributing federal political committee.	C							9			<u>y</u>	384	.60
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Mgmt		Memo Item								
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	ne name and a	doress of any political committe	e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle HOWELL, NICHOLAS, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 300 ORANGE GROVE AVE	INUE		01 31 Y Y Y Y Y Y 01 31 2022							
City SOUTH PASADENA	State CA	Zip Code 91030-1616	Transaction ID : PR2575510064310 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Bus Dev	Memo Item							
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Full Name of Individual (Last, First, Middle COHEN, SANFORD, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 28 CRESCENT LANE			01 / D D / Y Y Y Y Y 01 31 2022							
City LEVITTOWN	State NY	Zip Code 11756-2506	Transaction ID : PR2575526164310 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		224.60							
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 ▼ 224.60	P/R Deduction (\$32.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle HUNTER, ROBERT, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 5420 COUNTRYSIDE ROA			01 / D D / Y Y Y Y Y 2022							
City EDINA	State MN	Zip Code 55436-2524	Transaction ID : PR2575528364310 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60 Memo Item							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Prd								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)							
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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 nat			person for the purpose of soliciting contributions					
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	UnitedHealth Group P	AC)					
Α.	Full Name of Individual (Last, First, Middle Initial) HOLOVNIA, KRISTEN, , ,	or Full C	Drganization Name	Date of Receipt					
	Mailing Address 4610 LAKEVIEW DRIVE			01 / Y Y Y Y 2022					
	City EDINA	State MN	Zip Code 55424-1518	Transaction ID : PR2575533064310					
		C	33424-1310	Amount of Each Receipt this Period 384.60					
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Deputy Gen Counsel	Memo Item					
	Receipt For: A Primary General Other (specify) ▼	ggregate	e Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)					
в.	Full Name of Individual (Last, First, Middle Initial) STEINBRECHER, HOLLY, , ,	or Full C	Drganization Name	Date of Receipt					
	Mailing Address 1800 N FIELD ST APT 4211			01 / D D / Y Y Y Y 01 31 2022					
	City DALLAS	State TX	Zip Code 75202-2782	Transaction ID : PR2575544564310 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		384.60					
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) P Bus Dev	Memo Item					
	Receipt For: A Primary General Other (specify) ▼	ggregate	e Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)					
с.	Full Name of Individual (Last, First, Middle Initial) WINSOR, ELIZABETH, , ,	or Full C	Drganization Name	Date of Receipt					
	Mailing Address 57 WILDERS PASS			01 / D D / Y Y Y Y 2022					
	City CANTON	State CT	Zip Code 06019-2259	Transaction ID : PR2575582864310					
		C		Amount of Each Receipt this Period 384.60					
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) gn CEO	Memo Item					
	Receipt For: A Primary General Other (specify)	ggregate	e Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)					
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated P	AC (U	InitedHealth Group PA	C)								
Α.	Full Name of Individual (Last, First, Middle Initial) of SOLLER, BRIAN, , ,	r Full Or	ganization Name		Date of Receipt							
	Mailing Address 1120 S 2ND STREET UNIT 614 City S	tate	Zip Code		01 31 2022 Transaction ID : PR2575586764310							
		/N	55415-1375	A			-			nis Perioc	-	
	FEC ID number of contributing federal political committee.	;					-			384	_	
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) Seg CIO		M	lemo	o Ite	em				
	Receipt For: Agg Primary General Other (specify) ▼	For: Aggregate Year-to-Date ▼						(\$192	.30 Bi-V	Veekly)		
B.	Full Name of Individual (Last, First, Middle Initial) of GISCH, SHAWNA, , ,	r Full Org	ganization Name		Date o	of Re	ecei	ipt				
	Mailing Address 320 PRESERVE COURT			^M 01	/		31	/ Y	y y 2022	Y		
	,	tate ЛN	Zip Code 55317-8717				-			59216431 nis Perioc		
	FEC ID number of contributing federal political committee.	;		384.60								
	Name of Employer (for Individual) Optum Services, Inc		ipation (for Individual) Unit CEO		Memo Item							
	Receipt For: Agg Primary General Other (specify) ▼	gregate Y	Year-to-Date ▼ , 384.60	P/	R Ded	luctio	on ((\$192	.30 Bi-W	/eekly)		
C.	Full Name of Individual (Last, First, Middle Initial) of MILLER, MICHAEL, , ,	r Full Org	ganization Name		Date o	of Re	ecei	ipt				
	Mailing Address 1 CANAL STREET 802				^M 01		L	31	L	2022 Y		
	5	tate ∕IA	Zip Code 02114-2019							5956643 [,]		
	FEC ID number of contributing federal political committee.				Amoun	it of	Ea	ICN RE	eceipt tr	nis Perioc 384	_	
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) usiness Development Exe		Memo Item							
	Receipt For:	1	Year-to-Date ▼ 384.60	P/	/R Dec	ducti	ion	(\$192	.30 Bi-V	Veekly)		
s	UBTOTAL of Receipts This Page (optional)		>				7			1153.	80	
т	OTAL This Period (last page this line number only).		•				-		-			

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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. IVERSON, LISA, , ,	Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 1330 EDGCUMBE RD			M M / D D / Y Y Y Y Y 01 31 2022
City SAINT PAUL	State MN	Zip Code 55116-1780	Transaction ID : PR2575603264310 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		384.60
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Strat Initiv	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle B. GOODMAN, BENJAMIN, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 13828 EVERGREEN COUF			01 / D D / Y Y Y Y Y 01 31 2022
City APPLE VALLEY	State MN	Zip Code 55124-9257	Transaction ID : PR2575603864310 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		384.60
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CFO	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle KING, SARAH, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 23 GARDEN CITY ROAD			01 / D D / Y Y Y Y 2022
City DARIEN	State CT	Zip Code 06820-5343	Transaction ID : PR2575612864310 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		384.60
Name of Employer (for Individual) Optum Services, Inc Receipt For:	Bus	upation (for Individual) Segment CEO	Memo Item
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional).			1153.80
TOTAL This Period (last page this line numb	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								
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. WAULTERS, SCOTT, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 38 BRISTOL ROAD			01 31 2022								
City	State NJ	Zip Code	Transaction ID : PR2575622164310								
MANALAPAN	INJ	07726-4160	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item								
United HealthCare Services Inc	VP	Gen Mgmt									
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify) ▼		384.60	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. THOMPSON, BRIAN, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 17829 63RD AVE N			01 31 2022								
City	State	Zip Code	Transaction ID : PR2575634664310								
MAPLE GROVE	MN	55311-4650	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P UHC CEO	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼	-								
Primary General			P/R Deduction (\$192.30 Bi-Weekly)								
Other (specify) v		, 384.60	1								
Full Name of Individual (Last, First, Middle C. WILSON, STEPHEN, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 2420 DURHAM MANOR D	RIVE		M M / D D / Y Y Y Y 01 31 2022								
City	State TN	Zip Code	Transaction ID : PR2575636164310								
FRANKLIN		37064-5266	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		384.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼	-								
Other (specify)		384.00	P/R Deduction (\$192.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional).			1153.20								
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SCHEDULE A (FEC Form 3X) DEAEIDTA

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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 the			erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle I CLARK, TERRENCE, , ,	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 8 COOPER AVENUE			01 31 2022									
City EDINA	State MN	Zip Code 55436-1315	Transaction ID : PR2575636964310 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef Marketing Officer	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle I B. CABANILLAS, MARIA, , ,	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 2411 WORDSWORTH ST			01 / Y Y Y Y Y 01 31 2022									
City HOUSTON	State TX	Zip Code 77030-1833	Transaction ID : PR2575637364310 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		384.60									
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 ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle II	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 9609 WYOMING CIRCLE			01 / D D / Y Y Y Y Y 01 31 2022									
City BLOOMINGTON	State MN	Zip Code 55438-1628	Transaction ID : PR2575650264310 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		384.60									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Advisory Svc	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			1153.80									
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 1							
Any information copied from such Reports and or for commercial purposes, other than using the			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 I	nitial) or Full O	rganization Name	Date of Receipt							
Mailing Address 7624 N MOUNTAIN VIEW F	PASS		M M / D D / Y Y Y Y							
City	State	Zip Code	01 31 2022 Transaction ID : PR2575657464310							
PARADISE VALLEY	AZ	85253-2844	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual)	Occ	Memo Item								
United HealthCare Services Inc										
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify) ▼		384.60	P/R Deduction (\$192.30 Bi-Weekly)							
			-							
Full Name of Individual (Last, First, Middle I LEON, LINDA, , ,	nitial) or Full O	rganization Name	Date of Receipt							
Mailing Address 19 ENSIGN LANE			01 / D D / Y Y Y Y 01 31 2022							
City	State NY	Zip Code	Transaction ID : PR2575671864310							
		11758-7839	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Reg VP of SIs	Memo Item							
Receipt For:	Aggregate	Year-to-Date 🔻	1							
Primary General Other (specify) ▼		, 384.60	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I C. STIDMAN, CHRISTOPHER, , ,	nitial) or Full O	rganization Name	Date of Receipt							
Mailing Address 6504 CHEROKEE TRAIL			01 31 2022							
City	State	Zip Code	Transaction ID : PR2575683864310							
EDINA	MN	55439-1109	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
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 ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			1153.80							
TOTAL This Period (last page this line numbe	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						
			13 14 15 16 1 erson for the purpose of soliciting contributions						
or for commercial purposes, other than using	the name and a	doress of any political committee	to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle A. OCHIPINTI, JOSEPH, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 20 DEAN STREET			01 31 2022						
City ANNAPOLIS	State MD	Zip Code 21401-2716	Transaction ID : PR2575685764310 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		384.60						
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 ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. FINE, BRETT, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 707 STONINGTON ROAD			01 / Y Y Y Y 01 31 2022						
City SILVER SPRING	State MD	Zip Code 20902-1549	Transaction ID : PR2575692864310 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Corp Strat	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	P/R Deduction (\$192.30 Bi-Weekly)						
Other (specify) v		, 384.60							
Full Name of Individual (Last, First, Middle PROKOCKI, ELIZABETH , , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 821 HIBISCUS CT			01 / D D / Y Y Y Y Y 2022						
City CORONA DEL MAR	State CA	Zip Code 92625-1548	Transaction ID : PR2575705864310 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
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 ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			1153.80						
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	Use separate schedule(s)								
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 Incorpor	ated PAC (JnitedHealth Group P#	AC)						
Full Name of Individual (Last, First, Middle MILSON, D ELLEN, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 400 STUART STREET 25D			01 31 2022						
City BOSTON	State MA	Zip Code 02116-5011	Transaction ID : PR2575708864310 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P UnitedHlth Grp	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. CAIN, STEVE, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 4 COUNTRYSIDE CT			01 31 Y Y Y Y Y						
City DANVILLE	State CA	Zip Code 94506-1126	Transaction ID : PR2575724364310 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 ▼ 230.76	P/R Deduction (\$115.38 Bi-Weekly)						
Full Name of Individual (Last, First, Middle c. MURRAY, THOMAS, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 10 CIRCLE WEST			01 / D D / Y Y Y Y 01 31 2022						
City EDINA	State MN	Zip Code 55436-1313	Transaction ID : PR2575736564310 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 Receipt For:		upation (for Individual) Segment COO							
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)		999.96						
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11		MIZED RECEIPTS for each category of the Detailed Summary Page		X 11	_	11b	11c	12					
Any information copied from such Reports and Statements		tatements ma	ay not be sold or used by any p	erson for t	he pu	14 Irpose of	15 f soliciting	contribut	17 ions				
or	for commercial purposes, other than using the	name and a	ddress of any political committee	e to solicit	contri	ibutions	from such	n committe	90.				
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group PA	AC)									
Α.	Full Name of Individual (Last, First, Middle Init CESARETTI, GINA, , ,	ial) or Full O	rganization Name	Date	of F	leceipt							
	Mailing Address 5020 CIRCLE DOWN				01 31 2022								
	City GOLDEN VALLEY	State MN	Zip Code 55416-1304				Receipt th	739064310 is Period)				
	FEC ID number of contributing federal political committee.	С				-		384.6	60				
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Strategy		Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R D	educ	tion (\$19	92.30 Bi-W	/eekly)					
B.	Full Name of Individual (Last, First, Middle Init FULTON, RYAN, , ,	-	rganization Name	Date	of F	leceipt							
	Mailing Address 805 LANEWOOD LANE NORT				[™]	/ D 31		ү ү 2022	Ŷ				
	City PLYMOUTH	State MN	Zip Code 55447-4347				PR25757 Receipt th	7 56964310 is Period)				
	FEC ID number of contributing federal political committee.	C				384.60							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clms		Mem	no Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R D	educt	tion (\$19	2.30 Bi-W	/eekly)					
C.	Full Name of Individual (Last, First, Middle Init EKLO, BENJAMIN, , ,	ial) or Full O	rganization Name	Date	of F	leceipt							
	Mailing Address 3942 CAMPELLO CURVE	State	Zip Code	C)1	/ D 31		2022 76186431					
	CHASKA	MN	55318-4639				Receipt th		,				
	FEC ID number of contributing federal political committee.	С				y 1		384.6	60				
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) Bus Segment CFO			Merr	no Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R [)educ	tion (\$19	92.30 Bi-W	/eekly)					
s	UBTOTAL of Receipts This Page (optional)					,	. ,	1153.8	0				
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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	d Statements mathematic the name and a	L 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 Incorpora	ated PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle A. CUNNINGHAM, MICHAEL, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 122 MAHOGANY WAY			01 31 2022							
City UPPER GWYNEDD	State PA	Zip Code 19446-6084	Transaction ID : PR2575767864310 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		384.60							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) O NA Acct	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. PAIK, JESSICA , , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 18 BUTTONWOOD LANE	EAST		01 31 / Y Y Y Y Y 01 31 2022							
City RUMSON	State NJ	Zip Code 07760-1010	Transaction ID : PR2575783164310 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P SIs	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify) V		, 384.60	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle LEVINE, CAROL, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 9100 LARKSPUR LANE			01 D D / Y Y Y Y 2022							
City EDEN PRAIRIE	State MN	Zip Code 55347-2004	Transaction ID : PR2575803364310 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Cust Strategy	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			1153.80							
TOTAL This Period (last page this line numb	er only)									

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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 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/	4C)						
Full Name of Individual (Last, First, Middle A. HJERPE, ADAM, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 13932 UTAH AVE S			01 / Y Y Y Y 01 31 2022						
City SAVAGE	State MN	Zip Code 55378-2159	Transaction ID : PR2575806264310 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
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 ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. SHAPIRO , DAVID , , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 5215 MORGAN AVENUE S	OUTH		01 31 2022						
City MINNEAPOLIS	State MN	Zip Code 55419-1026	Transaction ID : PR2575814264310 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) s Seg Chief Cnsmr Off	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle MCNATT, RICHARD, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 4945 CANDACRAIG	01-1-	7. 0.4	M M / D D / Y Y Y Y 01 31 2022						
City ALPHARETTA	State GA	Zip Code 30022-6340	Transaction ID : PR2575824964310 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ? SIs	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			1153.80						
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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 □						
Any information copied from such Reports and St or 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 P/	AC)						
Full Name of Individual (Last, First, Middle Initi	ial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1580 BOHNS POINT ROAD			01 31 2022						
City	State	Zip Code	Transaction ID : PR2575829864310						
WAYZATA	MN	55391-9309	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual)	Осси	pation (for Individual)	Memo Item						
United HealthCare Services Inc	Bus	Segment COO							
Receipt For:	Aggregate	Year-to-Date 🔻							
Primary General Other (specify) ▼		384.60	P/R Deduction (\$192.30 Bi-Weekly)						
			1						
Full Name of Individual (Last, First, Middle Initi B. GOLDEN, WILLIAM, , ,	ial) or Full O	rganization Name	Date of Receipt						
Mailing Address 106 SOUND COURT			01 31 / Y Y Y Y 01 31 2022						
City	State	Zip Code	Transaction ID : PR2575859364310						
NORTHPORT	NY	11768-3527	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CEO	Memo Item						
Receipt For:	Aggregate	Year-to-Date 🔻	7						
Primary General Other (specify) ▼		384.60	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle Initi C. COTTINGTON, NYLE BRENT, , ,	ial) or Full O	rganization Name	Date of Receipt						
Mailing Address 15050 47TH STREET NE			01 31 2022						
City	State	Zip Code	Transaction ID : PR2575865364310						
SAINT MICHAEL	MN	55376-1613	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual)	Memo Item						
Receipt For:	Aggregate	Year-to-Date 🔻							
Other (specify)		384.60	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			1153.80						
TOTAL This Period (last page this line number of			-						

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 51 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 A. PEZHMAN, PAYMAN, , ,	Date of Receipt								
Mailing Address 2825 MAPLEWOOD CI	-		01 / D D / Y Y Y Y Y 2022						
City WAYZATA	State MN	Zip Code 55391-2633	Transaction ID : PR2575883564310						
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 384.60						
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Bus	upation (for Individual) Segment Gen Counsel Year-to-Date ▼	Memo Item						
Other (specify) ▼	Primary General Aggregate real-to-Date +								
Full Name of Individual (Last, First, Mide MCGOLDRICK, CHRISTOPHE		rganization Name	Date of Receipt						
	Mailing Address 48 MOUNTAIN TERRACE ROAD								
City WEST HARTFORD	State CT	Zip Code 06107-1533	Transaction ID : PR2575930464310 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP SIs & Bus Dev	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Mido C. MATTERA, RICHARD, , ,	dle Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 640 LOCUST HILLS DR	RIVE		01 / D D / Y Y Y Y Y 01 31 2022						
City WAYZATA	State MN	Zip Code 55391-1973	Transaction ID : PR2575938464310 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) S Chief Dev Officer	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (option	al)		1153.80						
TOTAL This Period (last page this line nu	mber only)	••••••							

FOR LINE NUMBER:

PAGE 52 OF

			Use separate schedule(s)	(check only one)						
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11b	11c	12	<u> </u>	
	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	JnitedHealth Group PA	.C)						
A.	Full Name of Individual (Last, First, Middle Initia RILEY, FELICITY, , ,	al) or Full O	rganization Name	Date of	of Re	ceipt				
	Mailing Address 3330 EDMUND BLVD			01	VI /	D D D 31	/ Y	y y 2022	Y	
	City MINNEAPOLIS	State MN	Zip Code 55406-2348					94336431	D	
	FEC ID number of contributing	_		Amour	nt of	Each Re	ceipt th	is Period		
	federal political committee.	C						292.3	30	
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP T	upation (for Individual) Tax		Nemo	Item				
Receipt For: Age Primary General Other (specify) ▼			Year-to-Date ▼ 292.30	P/R De	ductic	on (\$196.	.15 Bi-W	/eekly)		
в.	Full Name of Individual (Last, First, Middle Initia FRANK, DANIEL, , ,	al) or Full O	rganization Name	Date o	of Re	ceipt				
	Mailing Address 1373 PRAIRIE MEADOW RD			M N 01	И /	D D D 31	/ Y	y y 2022	Y	
-		State MN	Zip Code					70464310)	
	MINNETRISTA FEC ID number of contributing		55359-6701	Amour	nt of	Each Re	ceipt th	is Period	_	
	federal political committee.	С	384.60							
	Name of Employer (for Individual) Optum Services, Inc	Occupation (for Individual) Chief Clin Off			Nemo	Item				
	Receipt For:	Aggregate	Year-to-Date V	1						
	Other (specify) ▼		384.60	P/R Deduction (\$192.30 Bi-Weekly)						
<u>с.</u>	Full Name of Individual (Last, First, Middle Initia RICHARDS, ALISON, , ,	al) or Full O	rganization Name	Date o	of Re	ceipt				
	Mailing Address 257 WEST GRANTLEY			M 01	VI /	D D D 31	/ Y	2022 Y	Y	
	City ELMHURST	State IL	Zip Code 60126-2237					98796431 is Period	0	
	FEC ID number of contributing federal political committee.	С				,	,	384.6	60	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) sion CEO		Лето	ltem				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R De	ductio	on (\$192	.30 Bi-W	/eekly)		
s	UBTOTAL of Receipts This Page (optional)							1061.5	50	
т	OTAL This Period (last page this line number or	חly)	••••••							

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 53 OF

			Use separate schedule(s)	(check only one)							
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 1	F	_	1b	11c	12	[17
	y information copied from such Reports and Sta for commercial purposes, other than using the r			erson for		ourpo					17 s
\setminus	NAME OF COMMITTEE (In Full)										
	UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	.C)							
 A.	Full Name of Individual (Last, First, Middle Initia CHAMBUNDABONGSE, KUNJORN, , ,	l) or Full O	rganization Name	Da	te of	Rece	eint				
	Mailing Address 9730 46TH STREET				I - M	1	D D	/ Y	YY	Y	
	City	State	Zip Code	┥┕	01 ransa	ctio	31 • • • • •	002576	2022 0002643	210	
	WATERTOWN	MN	55388-9333						nis Perio		
FEC ID number of contributing federal political committee.						_,			384	4.60	
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Technology		Mei	mo li	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R	Dedu	ction	(\$192	.30 Bi-V	Veekly)		
в.	Full Name of Individual (Last, First, Middle Initia BRIGGS, MARC, , ,	l) or Full O	rganization Name	Da	ite of	Rece	eipt				
	Mailing Address 13534 TUSCALEE HILL CIR			M	01 [™]	1	D D 31	/ Y	2022	Y	
	City DRAPER	State UT	Zip Code 84020-5653						0016643	-	
	FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period 384.60								
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) Hlth Plan CEO			Mer	mo li	tem				
	Receipt For:	Aggregate	Year-to-Date ▼	-							
	Primary General Other (specify) ▼		384.60	P/R Deduction (\$192.30 Bi-Weekly)							
С.	Full Name of Individual (Last, First, Middle Initia SONERHOLM, KIMBERLY, , ,	l) or Full O	rganization Name	Da	ite of	Rece	eipt				
	Mailing Address 3380 SHELBORNE WOODS PA	ARKWAY		M	01 ^M	1	D D D 31	/ Y	y y 2022	Y	
	City CARMEL	State IN	Zip Code 46032-8101						0332643		
	FEC ID number of contributing	C		Am	iount	of Ea	ach Re	eceipt th	nis Perio	d 4.60	
	federal political committee.	0		분물		y			50-	.00	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Me	mo l	tem				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R	Dedu	ction	ı (\$192	.30 Bi-V	Veekly)		
s	UBTOTAL of Receipts This Page (optional)					.,			1153	3.80	
т	OTAL This Period (last page this line number or	ıly)		Ē							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 54 OF

ITEMIZED RECEIPTS			Use separate schedule(s)	(check	(check only one)						
			for each category of the Detailed Summary Page	× 1 ¹	- F	11b	11c	12	17		
	y information copied from such Reports and Sta for commercial purposes, other than using the r			erson for	the p	urpose d	of soliciting	g contribu	tions		
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group P	AC)							
A.	Full Name of Individual (Last, First, Middle Initia BYRNES, CHRISTOPHER, , ,	al) or Full O	rganization Name	Dat	te of I	Receipt					
	Mailing Address 3920 GLENWOOD STREET				01 ^M	/ D 3 [·]		y y 2022	Y		
	City DULUTH	State MN	Zip Code 55804-1403				: PR2576 Receipt th		0		
	FEC ID number of contributing federal political committee. Name of Employer (for Individual) United HealthCare Services Inc					-		384.	60		
			upation (for Individual) Ops		Mer	no Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R	Deduo	ction (\$1	92.30 Bi-W	Veekly)			
B.	Full Name of Individual (Last, First, Middle Initia KANDALAFT, KEVIN, , ,	-	rganization Name	Dat	te of I	Receipt					
	Mailing Address 4189 WINDSOR POINT PLACE	State	Zip Code	- L	01	/ D 3	1	2022			
	EL DORADO HILLS	CA	95762-3797				: PR25760 Receipt th		0		
	FEC ID number of contributing federal political committee.	Occupation (for Individual) HIth Plan CEO			Amount of Each Receipt this Period						
	Name of Employer (for Individual) United HealthCare Services Inc				Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R	Deduc	tion (\$1	92.30 Bi-W	/eekly)			
с.	Full Name of Individual (Last, First, Middle Initia NELSON, KRISTA, , ,	al) or Full O	rganization Name	Dat	te of I	Receipt					
	Mailing Address 18202 SHAVERS LAKE DRIVE			_ L	01 31 Y Y Y Y 01 31 2022						
	City WAYZATA	State MN	Zip Code 55391-3338				: PR2576 Receipt th		0		
	FEC ID number of contributing federal political committee.	C			_	<u>y</u>	, y	384.	60		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual)		Mer	no Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R	Dedu	ction (\$1	92.30 Bi-V	Veekly)			
s	UBTOTAL of Receipts This Page (optional)					9		1153.	80		
Т	OTAL This Period (last page this line number of	nly)		• L							

FOR LINE NUMBER:

PAGE 55 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 berson for the purpose of soliciting contributions be to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle A. MONICAL, KENT, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 9795 E PIEDRA DRIVE			01 31 2022						
City SCOTTSDALE	State AZ	Zip Code 85255-9231	Transaction ID : PR2576051364310 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P, Medicare STARS	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. REX, JOHN, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 503 HARRINGTON ROAD								
	State MN	Zip Code	Transaction ID : PR2576060064310						
WAYZATA FEC ID number of contributing	_	55391-1512	Amount of Each Receipt this Period						
federal political committee.	C		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) G CFO	Memo Item						
Receipt For:	Aggregate	Year-to-Date V	P/R Deduction (\$192.30 Bi-Weekly)						
Other (specify) ▼		384.60							
Full Name of Individual (Last, First, Middle MCEWAN, JOSHUA, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 4916 ALDRICH AVE SOL	1		01 / D D / Y Y Y Y 2022						
City MINNEAPOLIS	State MN	Zip Code 55419-5353	Transaction ID : PR2576085764310 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc	Occi VP 1	upation (for Individual) Fax	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)		1153.80						
TOTAL This Period (last page this line num	ber only)								

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	<u> </u>					
An	information copied from such Reports and S for commercial purposes, other than using the	itatements ma	y not be sold or used by any p	13 14 15 16 berson for the purpose of soliciting contributions from such committee to solicit contributions from solicit contributicontee to soli	utions					
	NAME OF COMMITTEE (In Full)		duress of any political committee							
	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group P	AC)						
۹.	Full Name of Individual (Last, First, Middle Ini PALMER, BRYAN, , ,	tial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 346 COUNTRY CLUB DRIVE			M M / D / Y	Y					
	City TEQUESTA	State FL	Zip Code 33469-1944	Transaction ID : PR25760979643 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		384	.60					
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) n Growth Off	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)						
	Full Name of Individual (Last, First, Middle Ini GROSSMAN, MICHAEL, , ,	tial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 15725 56TH AVE N			01 / Y Y Y 2022	Y					
		State MN	Zip Code	Transaction ID : PR25761458643						
_	PLYMOUTH	IVIIN	55446-2984	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		384.60						
	Name of Employer (for Individual) Jnited HealthCare Services Inc		upation (for Individual) sion COO	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)						
	Full Name of Individual (Last, First, Middle Ini BENSON, JEAN, , ,	tial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 14951 HIGHLAND COURT N			01 / Y Y Y 2022	Y					
	City PRIOR LAKE	State MN	Zip Code 55372-4109	Transaction ID : PR25763109643 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		384	.60					
	Name of Employer (for Individual) Optum Services, Inc		ipation (for Individual) Group CFO	Memo Item	Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)						
_	JBTOTAL of Receipts This Page (optional)			1153	80					

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 57 OF

			Use separate schedule(s)		(check only one)						
			for each category of the Detailed Summary Page		× 11a 13		11b 14	11c 15		12 16	17
	ormation copied from such Reports and Stat commercial purposes, other than using the na				for the		pose of	soliciting	g cont	tributio	ons
	itedHealth Group Incorporated	PAC (U	InitedHealth Group PA	(C)							
	Name of Individual (Last, First, Middle Initial NG, PAUL, , ,) or Full Or	ganization Name		Date of	f Re	eceipt				
Mail	ing Address 12352 PRINCETON AVE				м м 01	/	D D 31	/ Y	y 202	22	r
City EDE	City Sta EDEN PRAIRIE MI		Zip Code 55347-1936					PR25787 eceipt th			
FEC ID number of contributing federal political committee.							т. т. т. т.	-	3	384.60)
Unit	ne of Employer (for Individual) ed HealthCare Services Inc		pation (for Individual) Sen Mgmt		М	emc	tem				
Receipt For: Aggregative Primary General Other (specify) ▼			/ear-to-Date ▼ 384.60	'	P/R Ded	luctio	on (\$192	2.30 Bi-W	Veekly	()	
	Name of Individual (Last, First, Middle Initial GELAND, DANIEL, , ,) or Full Or	ganization Name		Date of	f Re	eceipt				
Mailing Address 2659 E LAKE OF THE ISLES PKW			01 / 01 / 2022 Transaction ID : PR2578741064310								
City	INEAPOLIS	State MN	Zip Code 55408-1052								
FEC	ID number of contributing ral political committee.	C				Amount of Each Receipt this Period					
	ne of Employer (for Individual) Im Services, Inc	Occupation (for Individual) VP Bus Dev			M	emc	tem				
	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384,60	F	P/R Ded	uctio	on (\$192	2.30 Bi-W	/eekly	[,])	
	Name of Individual (Last, First, Middle Initial JFFEY, KRISTY, , ,) or Full Or	ganization Name		Date of	f Re	eceipt				
	ing Address 42095 N 109TH PLACE	1			01	/	31	/ Y	y 202		
City SC	OTTSDALE	State AZ	Zip Code 85262-3293					PR2578			
	D number of contributing ral political committee.	С			384.60						
Opti	Optum Services, Inc C		pation (for Individual) Clin Off	Memo Item							
	eipt For: Primary General Other (specify)	Aggregate	/ear-to-Date ▼ 384.60		P/R Ded	lucti	on (\$19:	2.30 Bi-V	Veekly	1)	
SUBT	OTAL of Receipts This Page (optional)		••••••				, .		11	153.80)
ΤΟΤΑΙ	L This Period (last page this line number on	ly)		-	Γ.	T					

SCHEDULE A (FEC Form 3X) _____ _

FOR LINE NUMBER:

PAGE 58 OF

		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 CIAVOLA, LAURA, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 6958 DELOACH COURT			01 31 2022						
City FRISCO	State TX	Zip Code 75034-7436	Transaction ID : PR2578824364310 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Ops	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. HAREWOOD, JUNIOR, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 223 MOUNT VERNON CO			01 / Y Y Y Y Y 2022						
City SANDY SPRINGS	State GA	Zip Code 30328-4130	Transaction ID : PR2595231564310 Amount of Each Receipt this Period						
SANDY SPRINGS FEC ID number of contributing									
federal political committee.	C		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Plan CEO	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) ▼		384.60	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle SHORT, MARIANNE, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 2215 SUMMIT AVENUE			01 / D D / Y Y Y Y Y 01 31 2022						
City SAINT PAUL	State MN	Zip Code 55105-1002	Transaction ID : PR2601133564310 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 Gen Counsel	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			1153.80						
TOTAL This Period (last page this line numb	er only)								

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 59 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 berson 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, Midd A. MCBEATH, ROBERT, , ,	le Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2537 RED ARROW DRIVE			01 / Y Y Y Y 01 31 2022						
City LAS VEGAS	State NV	Zip Code 89135-1628	Transaction ID : PR2605708964310 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.			384.60						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) D Med Grp Physn	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Midd B. MALONE, TRACY, , ,	le Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 900 S 22ND ST			01 / Y Y Y Y 01 31 2022						
City ARLINGTON	State VA	Zip Code 22202-2625	Transaction ID : PR2605736964310 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P External Affs	P/R Deduction (\$192.30 Bi-Weekly)						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60							
Full Name of Individual (Last, First, Midd C. WRIGHT, NORMAN, , ,	le Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 26335 N 104TH WAY	1		01 / D D / Y Y Y Y 2022						
City SCOTTSDALE	State AZ	Zip Code 85255-8009	Transaction ID : PR2609812364310 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) f Customer Officer	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (option:	al)		1153.80						
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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 13 14 15 16 17						
			person for the purpose of soliciting contributions te 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, Midd A. BAKER, MICHAEL, , ,	le Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2383 HIGHOVER TRAIL			01 / Y Y Y Y 01 31 2022						
City CHANHASSEN	State MN	Zip Code 55317-4744	Transaction ID : PR2612530564310 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
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 ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Midd B. BURKHOLDER, CHAD, , ,	le Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2423 DUBONNET DRIVI	01 / 01 / 2022								
City	State PA	Zip Code	Transaction ID : PR2615073464310						
MACUNGIE FEC ID number of contributing		18062-8857	Amount of Each Receipt this Period						
federal political committee.	C		384.60						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Ops	Memo Item						
Receipt For:	Aggregate	Year-to-Date V							
Other (specify) ▼		384.60	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Midd BIRNBAUM, MICHAEL, , ,	le Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 55 DEAN STREET			01 / D D / Y Y Y Y 2022						
City BROOKLYN	State NY	Zip Code 11201-6245	Transaction ID : PR2615671664310 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Hithcare Econ	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional	al)		1153.80						
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b		11c	12	<u> </u>			
	y information copied from such Reports and Sta for commercial purposes, other than using the n													
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (I	JnitedHealth Group PA	C)										
۹.	Full Name of Individual (Last, First, Middle Initia BROWN, ROGER, , ,	l) or Full C	rganization Name	D	Date of Receipt									
	Mailing Address 512 EAST STATE AVE	1			01 31 Y Y Y Y Y 01 31 2022									
	City PHOENIX	State AZ	Zip Code 85020-4940				-			55796431	-			
	FIDENIA		05020-4940	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С			384.60									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev	1	Me	emo	Item	I						
	Receipt For:		Year-to-Date ▼	_										
	Primary General Other (specify) ▼		384.60	P/R Deduction (\$192.30 Bi-Weekly)										
в.	Full Name of Individual (Last, First, Middle Initia MOURAS, DENNIS, , ,	l) or Full C	rganization Name	D	ate of	Re	ceipt							
	Mailing Address 6376 MARSH ROAD				01 31 2022									
	City	State	Zip Code		Trans	acti	on ID) : Pl	R26237	70296431	0			
	COTTRELLVILLE	MI	48039-1314	A	mount	t of	Each	Red	ceipt th	is Perioc	ł			
	FEC ID number of contributing federal political committee.	С		384.60										
	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 ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)										
<u>с.</u>	Full Name of Individual (Last, First, Middle Initia MULES, REBECCA, , ,	l) or Full C	rganization Name		ate of	Re	ceipt							
	Mailing Address 1136 BATTERY AVENUE				^M 01	/		^р 31	/ Y	ү ү 2022	Ŷ			
	City	State	Zip Code		Trans	acti	ion ID) : P	R26244	4426643 ⁻	10			
	BALTIMORE	MD	21230-4112	A	mount	t of	Each	Rec	ceipt th	is Perioc	1			
	FEC ID number of contributing federal political committee.	С					,		9	384	.60			
	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 ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)										
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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 STALLWOOD , GREGG, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 4842 JUNIPER DR			01 / Y Y Y Y 01 31 2022								
City PALM HARBOR	State FL	Zip Code 34685-2688	Transaction ID : PR2625499064310 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		384.60								
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 ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. COLLETTE, CHRISTOPHER, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 4776 MANITOU ROAD	1-		01 / D D / Y Y Y Y Y 2022								
City	State MN	Zip Code	Transaction ID : PR2625499564310								
EXCELSIOR		55331-9400	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P UnitedHIth Grp	Memo Item								
Receipt For:	Aggregate	Year-to-Date V	1								
Primary General Other (specify) ▼		384.60	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle SMITH, LISA, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 5040 INTERLACHEN BLU			01 / D D / Y Y Y Y Y 01 31 2022								
City EDINA	State MN	Zip Code 55436-1360	Transaction ID : PR2625503764310 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Mktg	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)								
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	y information copied from such Reports and Sta for commercial purposes, other than using the				for the		oose of	soliciting	g cont	ributic	ons			
	NAME OF COMMITTEE (In Full)													
	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group PA	C)										
Α.	Full Name of Individual (Last, First, Middle Initi LAWTON, MICHAEL, , ,	al) or Full O	organization Name											
	Mailing Address 2232 AUTUMN COVE CIRCLE				01 / D D / Y Y Y Y 2022									
	City FLEMING ISLAND	State FL	Zip Code 32003-3230		Transaction ID : PR2625505464310 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С							3	384.60)			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		М	emo	Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	F	P/R Ded	lucti	on (\$192	2.30 Bi-V	Veekly	')				
B.	Full Name of Individual (Last, First, Middle Initi DUKART, JENNIFER, , ,	al) or Full O	rganization Name		Date o	f Re	ceipt							
	Mailing Address 2541 DRESDEN LANE	State	Zip Code		01		31	JL	202					
	GOLDEN VALLEY	MN	55422-3617					PR2627						
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Pe						384.60)			
	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 ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)										
C.	Full Name of Individual (Last, First, Middle Initi VANDERWALDE, LAMBERT, , ,	al) or Full O	organization Name		Date o	f Re	ceipt							
	Mailing Address 45 AUDUBON CAUSEWAY	Chata	Zia Octo		01		31		202	2				
	City LANTANA	State FL	Zip Code 33462-4756					PR2628 leceipt th						
	FEC ID number of contributing federal political committee.	С			Ľ.		,		3	384.60)			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) PUHG Research-Corp Affairs		Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)										
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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 Summary Page	×	11a	\square	11		_	11c	12	·	
Δn	y information copied from such Reports and State	emente ma		at he sold or used by any po		13 or the i		14 109		_	15 licitina	16	17 ions	
or	for commercial purposes, other than using the na													
\backslash	NAME OF COMMITTEE (In Full)		I '		\sim									
/	UnitedHealth Group Incorporated				(C)									
Α.	Full Name of Individual (Last, First, Middle Initial) THOMPSON, BRUCE, , ,) or Full O	rgar	ization Name		Date of	Re	ecei	ipt					
	Mailing Address 2826 HEDGEROW DRIVE					M M	1	_	D D	ī.	/ Y	Y Y	Y	
	City	State		Zip Code	- L	01 31 2022 Transaction ID : PR2628833664310								
	DALLAS	TX		75235-7590	A	Amount of Each Receipt this Period							•	
	FEC ID number of contributing federal political committee.	С			384.60									
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Mgmt		Me	emo) Ite	em					
		r-to-Date ▼												
	Primary General Other (specify) ▼		-	384.60	P/	R Dedu	uctio	on ((\$192	.30) Bi-W	eekly)		
B.	Full Name of Individual (Last, First, Middle Initial) DREFAHL, JASON, , ,) or Full O	rgar	ization Name		Date of	Re	ecei	ipt					
	Mailing Address 6104 FOX MEADOW LN					м м 01	/	ľ	31	1	/ Y	y y 2022	Y	
	City	State		Zip Code		Transa	acti	on	ID : F	PR	26320	7896431)	
	EDINA	MN		55436-1217	A	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С						-			-9-	384.	60	
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) COO		Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)									
C.	Full Name of Individual (Last, First, Middle Initial) TUFFIN, MICHAEL, , ,) or Full O	rgar	ization Name		Date of	Re	ecei	ipt					
	Mailing Address 5904 ASHBY MANOR PLACE					^M 01	/		31]	/ Y	y y 2022	Y	
	City ALEXANDRIA	State VA		Zip Code 22310-2267	+							8796431	0	
	FEC ID number of contributing		-			mount	of	Ea	cn Re	ece	eipt thi	s Period		
	federal political committee.	С				_	_	9		-	g	384.	50	
	Name of Employer (for Individual)		•	on (for Individual)	1	Me	emo	o Ite	em					
	United HealthCare Services Inc Receipt For:			vt Affs	_									
	Primary General	rea	r-to-Date ▼	P/	R Ded	uctio	on	(\$192	2.30	0 Bi-W	eekly)			
	Other (specify)		-11-	384.60								- /		
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SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)						
II EIVIIZED KEGEIF13		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) UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle A. WALTHOUR, JOHN, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 5049 COLFAX AVE S			M M / D D / Y Y Y Y 01 31 2022						
City MINNEAPOLIS	State MN	Zip Code 55419-1145	Transaction ID : PR2632877064310 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
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 ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. PRIBLE, JOHN, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1923 SHIVER DR			01 / Y Y Y Y Y 2022						
City ALEXANDRIA	State VA	Zip Code 22307-1629	Transaction ID : PR2634656664310 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
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 ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle PAYET, KEITH, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 415 CHURCH STREET #2410	State	Zin Code	01 / D D / Y Y Y Y 2022						
City NASHVILLE	TN	Zip Code 37219-1859	Transaction ID : PR2635440064310 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Prd	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)		1153.80						
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			for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 □									
	y information copied from such Reports and Stat for commercial purposes, other than using the n			erson for the purpose of soliciting contributions									
	NAME OF COMMITTEE (In Full)		lucitor all Localthe One cure DA	0)									
/	UnitedHealth Group Incorporated	PAC (L	United Health Group PA	(C)									
۹.	Full Name of Individual (Last, First, Middle Initial ROOS, THOMAS, , ,) or Full O	rganization Name	Date of Receipt									
	Mailing Address 3199 KAGEN AVE NE			01 / 2022 Transaction ID : PR2635451264310									
	City	State	Zip Code										
	SAINT MICHAEL	MN	55376-3416	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		384.60									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Chief Acctng Off	Memo Item									
		Aggregate	Year-to-Date ▼										
	Primary General Other (specify) ▼		384.60	P/R Deduction (\$192.30 Bi-Weekly)									
	Full Name of Individual (Last, First, Middle Initial ZEGLINSKI, MICHAEL, , ,) or Full O	rganization Name	Date of Receipt									
	Mailing Address 1155 N GULFSTREAM AVENUE #406			01 31 2022									
	City	State FL	Zip Code	Transaction ID : PR2639701864310									
	SARASOTA	-	34236-5558	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		384.60									
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Gen Mgmt	Memo Item									
		Aggregate	Year-to-Date ▼	1									
	Primary General Other (specify) ▼		384.60	P/R Deduction (\$192.30 Bi-Weekly)									
	Full Name of Individual (Last, First, Middle Initial CALABRESE, DAVID, , ,) or Full O	rganization Name	Date of Receipt									
	Mailing Address 85 LITTLE POND RD			01 31 2022									
	City	State	Zip Code	Transaction ID : PR2639708364310									
	NORTHBOROUGH	MA	01532-1686	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		384.60									
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) CInt Relationship	Memo Item									
		Aggregate	Year-to-Date ▼										
	Primary General Other (specify)		384.60	P/R Deduction (\$192.30 Bi-Weekly)									
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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												
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	C)									
A.	Full Name of Individual (Last, First, Middle Initia ZUCCO, BETHANY, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt						
	Mailing Address 2608 CROMWELL COURT				M M / D D / Y Y Y Y 01 31 2022 Transaction ID : PR2639760064310 Amount of Each Receipt this Period								
	City MINNEAPOLIS	State MN	Zip Code 55410-2519										
	FEC ID number of contributing federal political committee.	С						y	384.	60			
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP N	upation (for Individual) Mktg		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initia FLEMING, SUSAN, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt						
	Mailing Address 2016 N HOWE ST UNIT 1S				M M 01	/	31	/ Y	y y 2022	Ŷ			
	City CHICAGO	State IL	Zip Code 60614-4414					PR26397 leceipt th		-			
	FEC ID number of contributing federal political committee.	С			384.60								
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Mktg		Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)									
C.	Full Name of Individual (Last, First, Middle Initia DUTTA, SUMIT, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt						
	Mailing Address 1112 W WRIGHTWOOD AVE				01 ^M	1	31		y y 2022				
	City CHICAGO	State IL	Zip Code 60614-1315				-	PR26397 leceipt th		-			
	FEC ID number of contributing federal political committee.	С			<u> </u>		,	· ,	384.	60			
			upation (for Individual) Seg Chief Med Off		Me	emo	tem						
	Receipt For: Primary General Other (specify)	Year-to-Date ▼ 384.60	F	P/R Ded	ucti	on (\$19:	2.30 Bi-W	/eekly)					
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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 A. STOW, CHRISTINA, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 4709 ALTON PL NW			01 31 2022							
City	State	Zip Code	Transaction ID : PR2640466464310							
WASHINGTON	DC	20016-2041	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item							
United HealthCare Services Inc	SVF	Public Affairs								
Receipt For:	Aggregate	Year-to-Date V								
Other (specify) V		384.60	P/R Deduction (\$192.30 Bi-Weekly)							
			·							
Full Name of Individual (Last, First, Middle ADVANI, PROTIMA, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 7618 BRITTANY PARC CT			01 / D D / Y Y Y Y Y 01 31 2022							
City	State VA	Zip Code	Transaction ID : PR2642024164310							
FALLS CHURCH	VA	22043-2907	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Rsch	Memo Item							
Receipt For:	Aggregate	Year-to-Date 🔻								
Other (specify)		384.60	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. BRUECKMAN, BRIAN, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 6445 HAWKS POINTE LAI	NE		01 31 2022							
City	State	Zip Code	Transaction ID : PR2642029464310							
EXCELSIOR	MN	55331-2612	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
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 ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			1153.80							
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
			13 14 15 16 erson for the purpose of soliciting contributions to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)	rated PAC (I	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middl											
A. FOX, ELIZABETH, , , Mailing Address 611 SECOND STREET			Date of Receipt								
			01 31 2022								
City	State VA	Zip Code	Transaction ID : PR2642832064310								
ALEXANDRIA	VA	22314-1416	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		384.60								
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 ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middl B. CRAGLE, STEVE, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 6604 MOHAWK TRAIL			01 / D D / Y Y Y Y Y 2022								
City EDINA	State MN	Zip Code 55439-1030	Transaction ID : PR2643200664310 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) s Segment CMO	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middl C. NEELY, MARC, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 1159 BUFFALO RIDGE F			01 / Y Y Y Y 01 31 2022								
City CASTLE PINES	State CO	Zip Code 80108-8190	Transaction ID : PR2643203164310 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
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 ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)								
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SCHEDULE A (FEC Form 3X) DEAEIDTA

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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 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 (l	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middle A. MCKOY, PHILIP, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 927 LINCOLN AVE			01 / D / Y Y Y Y Y 01 31 2022								
City SAINT PAUL	State MN	Zip Code 55105-3149	Transaction ID : PR2644651664310 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
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 ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. MAHRT, JONATHAN, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 117 VIA DI MELLO			01 31 2022								
City HENDERSON	State NV	Zip Code 89011-0110	Transaction ID : PR2645176964310 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) s Segment COO	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. STANKIEWICZ, DENNIS, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 17761 WEAVER LAKE DRI			01 / D D / Y Y Y Y 2022								
City MAPLE GROVE	State MN	Zip Code 55311-1328	Transaction ID : PR2646304064310 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Auditor	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	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								
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 PA	AC)								
Full Name of Individual (Last, First, Middle II SWENSSON, CHARLES, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 6312 MERRIMAC LANE NO	RTH		01 31 Y Y Y Y Y 01 31 2022								
City MAPLE GROVE	State MN	Zip Code 55311-3835	Transaction ID : PR2698403964310 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CMO	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle II B. AHLSTROM, ALEXIS, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 3421 OAKWOOD TERRACE			01 / Y Y Y Y 2022								
City WASHINGTON	State DC	Zip Code 20010-1819	Transaction ID : PR2699187164310								
		20010-1819	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
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) ▼		384.60	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle In C. WAYLAND, CHARLES, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 7615 SWEETBRIAR RD			01 / D D / Y Y Y Y 01 31 2022								
City RICHMOND	State VA	Zip Code 23229-6619	Transaction ID : PR2700924664310								
		23223-0013	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		384.60								
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 ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)								
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γL	InitedHealth Group Incorporated	PAC (U	nitedHealth Group PA	AC)									
	III Name of Individual (Last, First, Middle Initial) or Full Org	ganization Name		Date of	Re	ceipt						
M	ailing Address 1128 EDINGTON PLACE				01 31 Y Y Y Y 2022								
Ci N	ty IARCO ISLAND	State FL	Zip Code 34145-2006					PR27018 Receipt th					
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	ame of Employer (for Individual) nited HealthCare Services Inc		pation (for Individual) of Staff - UHG CEO		Me	emo	Item						
	eceipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)									
	II Name of Individual (Last, First, Middle Initial DCONNELL, DANIEL, , ,) or Full Or	ganization Name		Date of	Re	ceipt						
	ailing Address 3325 W 18TH AVENUE				01	/	31	/ Y	y y 2022	Y			
	ty ENVER	State CO	Zip Code 80204-1681					PR27018 leceipt th					
	EC ID number of contributing deral political committee.	С							230.	_			
N Ur	ame of Employer (for Individual) nited HealthCare Services Inc		pation (for Individual) rovt Affs		Memo Item								
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-	Primary General Other (specify) ▼		230.76	P/R Deduction (\$115.38 Bi-Weekly)									
CE	III Name of Individual (Last, First, Middle Initial SRUCE, JAMIE, , ,) or Full Org	ganization Name		Date of	Re	ceipt						
	ailing Address 1433 POWDER DRIVE	Ototo	Zin Oode		01	/	31		y y 2022				
Ci) FALLON	State MO	Zip Code 63366-1398				-	PR27018 leceipt th					
	EC ID number of contributing deral political committee.	С			<u> </u>		y :	. ,	384.	60			
			pation (for Individual) Plan CEO		Memo Item								
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or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and a	ddress of any political committee	e to soli	cit con	itrid	utions t	rom sucr	n committ	ee.			
UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle A. YOUNG, DAVID, , ,	Initial) or Full C	rganization Name		ate of	Re	ceipt						
Mailing Address 654 CHISWELL CT			M M / D D / Y Y Y Y 01 31 2022 2022 Transaction ID : PR2703655464310 Amount of Each Receipt this Period Amount of Each Receipt this Period Priod Priod									
City BRENTWOOD	State TN	Zip Code 37027-3109										
FEC ID number of contributing federal political committee.	С			_		-		384.	60			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Gen Mgmt		Me	emo	Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. HOROHO, PATRICIA, , ,	Initial) or Full C	rganization Name	C	ate of	Re	ceipt						
Mailing Address 335 MUIRFIELD LOOP	0	7. 0.4		^M 01	/	31		ү ү 2022	Y			
City REUNION	State FL	Zip Code 34747-6409				-		19466431	0			
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) s Segment CEO		Me	emo	Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle C. DELANY, ANDREW, , ,	Initial) or Full C	rganization Name		ate of	Re	ceipt						
Mailing Address 209 GARLAND AVENUE				[™] 01	/	31) / Y	y 2022	Y			
City DECATUR	State GA	Zip Code 30030-4940	A			-		19636431 his Period	0			
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Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Cust Svs		Me	emo	Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)									
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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	EMIZED RECEIPTS			or each category of the Detailed Summary Page	×	11a		-	11b 14		11c 15	12	17		
	y information copied from such Reports and Stat for commercial purposes, other than using the na					or the		rpc	ose o		oliciting	contribu	tions		
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Uni	tedHealth Group PA	C)										
A.	Full Name of Individual (Last, First, Middle Initial BARBARO, PHILIP, , ,) or Full O	Date of Receipt												
	Mailing Address 670 ARBUTUS STREET				01 / D D / Y Y Y Y 2022										
	City MIDDLETOWN	State CT		Zip Code 06457-7106	Transaction ID : PR2705988264310										
				00437-7100	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С	_		384.60										
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) onal Sales	Memo Item										
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В.	Full Name of Individual (Last, First, Middle Initial KMIEC, ADAM, , ,) or Full O	Drgai	nization Name	Date of Receipt										
	Mailing Address 4736 PRAIRIE DUNES WAY				01 31 2022								Y		
	City	State		Zip Code		Transaction ID : PR2705989264310									
	EAGAN	MN		55123-2352	Amount of Each Receipt this Period										
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	Name of Employer (for Individual) United HealthCare Services Inc	Occ VP		Memo Item											
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С.	Full Name of Individual (Last, First, Middle Initial BARTHOLET, DANIEL, , ,) or Full O	Drgai	nization Name		Date	of Re	ec	eipt						
	Mailing Address 5918 VALEWOOD DRIVE					[™] 01		/	31		/ Y	y y 2022	Ŷ		
	City	State		Zip Code		Trar	isac	tio	on ID	: P	R27064	5116431	0		
	MINNETONKA	MN		55345-6545	/	Amou	nt of	fΕ	ach I	Red	ceipt thi	s Period			
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	Receipt For: Primary General Other (specify)	Yea	ar-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)											
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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)												
	UnitedHealth Group Incorporated	PAC (U	InitedHealth Group PA	AC)									
A.	Full Name of Individual (Last, First, Middle Initia MOORE, KEVIN, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt						
	Mailing Address 9405 EAGLE NEST LANE				Model Model <td< td=""></td<>								
	City MIDDLETON	State WI	Zip Code 53562-5647										
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	federal political committee.	С			<u>_</u>		-		384.	60			
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Plan CEO	Me	emo	Item							
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в.	Full Name of Individual (Last, First, Middle Initia ERICKSON, ELIZABETH, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt						
	Mailing Address 5301 CLINTON AVENUE				01	/	31	/ Y	y y 2022	Y			
	City	State	Zip Code				-	PR27405		0			
	MINNEAPOLIS	MN	55419-1427	_	Amount	of	Each R	eceipt th	is Period				
	FEC ID number of contributing federal political committee.	С					384.60						
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) , Industry & Ntwk Rel		Me	emo	Item						
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	Primary General Other (specify)		384.60	111	P/R Dedu	uctic	on (\$192	2.30 Bi-W	eekly)				
C.	Full Name of Individual (Last, First, Middle Initia PONS, NATALIE, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt						
	Mailing Address 3209 GALLERIA UNIT 803				01	/	31	/ Y	2022	Y			
	City	State	Zip Code		Trans	acti	ion ID :	PR27407	76196431	0			
	EDINA	MN	55435-2547		Amount	of	Each R	eceipt th	is Period				
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			pation (for Individual) Segment Gen Counsel		Me	emo	Item						
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Midd FEHR , STEPHANIE , , ,		organization Name	Date of Receipt									
Mailing Address 6601 BLACKFOOT PAS	1		01 / Y Y Y Y 2022									
City EDINA	State MN	Zip Code 55439-1103	Transaction ID : PR2748020564310									
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P, Mkt Grp CHRO	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Midd B. ORIE, TIMOTHY, , ,	le Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 23 BISHOP LANE			01 / D D / Y Y Y Y 2022									
City SUDBURY	State MA	Zip Code 01776-1701	Transaction ID : PR2754244164310 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
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 ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Midd C. SIMON, JOHN, , ,	le Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 1388 DIAMOND COURT			01 / D D / Y Y Y Y Y 2022									
City PITTSBURGH	State PA	Zip Code 15241-1220	Transaction ID : PR2754663264310 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		384.60									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Advisory Svc	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)									
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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ITEMIZED RECEIPTS	for each category of Detailed Summary Pa	
or for commercial purposes, other than usin		by any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (UnitedHealth Gro	up PAC)
Full Name of Individual (Last, First, Midd A. BOTHRA, SIDDHARTH, , ,	le Initial) or Full Organization Name	Date of Receipt
Mailing Address 17200 SE 45TH STREE	Т	01 / D D / Y Y Y Y 01 31 2022
City BELLEVUE	State Zip Code WA 98006-6510	Transaction ID : PR2754720764310
	WA 98006-6510	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	384.60
Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) SVP Ops	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	384	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Midd B. WEILER, KATHY, , ,	le Initial) or Full Organization Name	Date of Receipt
Mailing Address 1250 CANTON AVENUE		01 31 2022
City	State Zip Code	Transaction ID : PR2755347664310
MILTON	MA 02186-2414	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	384.60
Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) Bus Segment CMO	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 384	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Midd C. ABRAHAM, SANTIAGO, , ,	le Initial) or Full Organization Name	Date of Receipt
Mailing Address 4320 COTTONWOOD L	Ν	01 01 <u>Y Y Y Y Y</u> 01 01 01 01 01 01 01 01 01 01 01 01 01 0
City	State Zip Code	Transaction ID : PR2755652164310
EXCELSIOR	MN 55331-9328	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	384.60
Name of Employer (for Individual) Optum Services, Inc	Occupation (for Individual) Bus Seg CIO	Memo Item
Receipt For: Primary General Other (specify)		P/R Deduction (\$192.30 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional	ı al)	1153.80
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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 □									
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 (l	JnitedHealth Group P/	AC)									
Full Name of Individual (Last, First, Middle I HERMELINGIII, THEODORE, , ,	nitial) or Full C	rganization Name	Date of Receipt									
Mailing Address 117 5TH STREET			01 / Y Y Y Y 01 31 2022									
City WILMETTE	State IL	Zip Code 60091-3405	Transaction ID : PR2756521664310 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
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 ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle II B. MALLEY, KENNETH, , ,	nitial) or Full C	rganization Name	Date of Receipt									
Mailing Address 764 WEST SADDLE RIVER	ROAD		01 31 2022									
City	State NJ	Zip Code	Transaction ID : PR2757436664310									
HOHOKUS	NJ	07423-1645	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Gen Mgmt	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼	-									
Primary General Other (specify) ▼		384.60	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle I BROWN, KAROOM, , ,	nitial) or Full C	rganization Name	Date of Receipt									
Mailing Address 11711 SAVONA WAY			01 01 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0									
City ORLANDO	State FL	Zip Code 32827-7267	Transaction ID : PR2759422364310 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus Dev	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			1153.80									
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FOR LINE NUMBER:

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	MIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12	17
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	AME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (L	JnitedHealth Group PA	AC)						
	Full Name of Individual (Last, First, Middle Initia SCHLAIFER, MARISSA, , ,	al) or Full Or	rganization Name		Date of	Rec	ceipt			
_	Aailing Address 1050 N STUART ST #400				м м 01	1	D D D 31	/ Y	ү ү 2022	Ŷ
	Dity ARLINGTON	State VA	Zip Code 22201-5727	A					568643 1 is Perioc	
	EC ID number of contributing ederal political committee.	С					<u>, </u>		384	.60
	Jame of Employer (for Individual) Dptum Services, Inc		ipation (for Individual) Regl Affs		Me	emo	Item			
F	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/	R Dedu	uctio	n (\$192	.30 Bi-W	/eekly)	
	Full Name of Individual (Last, First, Middle Initia DECKER, WYATT, , ,	al) or Full Or	rganization Name		Date of	Rec	eipt			
_	Aailing Address 1482 HUNTER DRIVE				M M 01	/	D D 31	/ Y	y y 2022	Ŷ
	City NAYZATA	State MN	Zip Code 55391-9658						3406431	-
F	EC ID number of contributing ederal political committee.	C		Amount of Each Receipt this Period						
	Name of Employer (for Individual) Dptum Services, Inc		upation (for Individual) Segment CEO		Me	emo	Item			
F	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 384.60	P/I	R Dedu	uctior	n (\$192	.30 Bi-W	eekly)	
	Full Name of Individual (Last, First, Middle Initia GRUHN, GINA, , ,	al) or Full Or	rganization Name		Date of	Rec	ceipt			
_	Mailing Address 13 WEATHER VANE DRIVE				м м 01	1	D D D 31		2022 Y	
	City MORRISTOWN	State NJ	Zip Code 07960-4758	A					7 694643 is Perioc	
	EC ID number of contributing ederal political committee.	C					9	, <u>,</u>	384	.60
(Name of Employer (for Individual) Optum Services, Inc		ipation (for Individual) Cint Svc Acct Mgmt		Me	emo	Item			
F	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)						
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PAGE 80 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 1							
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)			e to solicit contributions from such committee.							
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle AMASTEN, DALE, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 9845 BENNINGTON DRIV			01 / D D / Y Y Y Y 01 31 2022							
City SHARONVILLE	State OH	Zip Code 45241-3619	Transaction ID : PR2760775864310 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
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 ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. DELMONICO, SUSAN, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 12 MULBERRY CIRCLE			01 / D D / Y Y Y Y 01 31 2022							
City JOHNSTON	State RI	Zip Code 02919-2519	Transaction ID : PR2760781764310 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		230.76							
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 ▼ 230.76	P/R Deduction (\$115.38 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. CRAWFORD, KEVIN, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 127 CHUZZLEWIT DOWN		Zin Oodo								
City BRENTWOOD	State TN	Zip Code 37027-7627	Transaction ID : PR2760825164310 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) rnal Affs Dir	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$115.38 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			846.12							
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	EMIZED RECEIPTS		for each category of the Detailed Summary Page		11a		11b	11c	12	Г			
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\rangle	UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	AC)									
Α.	Full Name of Individual (Last, First, Middle Initia VELASCO, JOEL, , ,	l) or Full O	organization Name		Date of Receipt								
	Mailing Address 6352 31 PLACE NW ST				м м 01	/	D D D 31	/ Y	y y 2022]		
	City WASHINGTON	State DC	Zip Code 20015-2358	_	Transaction ID : PR2760938564310 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С					,	-	38	4.60			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Intl Relations		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60]	P/R Ded	uctic	on (\$192	2.30 Bi-W	/eekly)				
в.	Full Name of Individual (Last, First, Middle Initia WINN, JOSEPH, , ,	l) or Full Oi	organization Name		Date of	Ree	ceipt						
	Mailing Address 4401 GREGG ROAD				01 / 01 / 2022 Transaction ID : PR2760940264310								
	City BROOKEVILLE	State MD	Zip Code 20833-1033										
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period 384.60								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ernal Affs Dir		Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)									
C.	Full Name of Individual (Last, First, Middle Initia SONNIER, SUSAN, , ,	ll) or Full Oi	organization Name		Date of	Ree	ceipt						
	Mailing Address 301 DEMONBREUN ST UNIT 1		7. 0.4		01 ^M	/	31		2022]		
	City NASHVILLE	State TN	Zip Code 37201-2248					PR2762					
	FEC ID number of contributing federal political committee.	С			<u> </u>		, .			0.76			
United HealthCare Services Inc D			upation (for Individual) Mktg Bus Dev		M	emo	ltem						
	Receipt For: Primary General Other (specify)	Year-to-Date ▼ 230.76		P/R Ded	uctic	on (\$115	5.38 Bi-W	/eekly)					
s	UBTOTAL of Receipts This Page (optional)			•			, .	9	99	9.96			
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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			person for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	UnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle TARVESTAD, KATHERINE, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 5095 KELSEY TERR			01 / D D / Y Y Y Y 01 31 2022							
City EDINA	State MN	Zip Code 55436-2717	Transaction ID : PR2762955964310 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		384.60							
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 ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle GUNDBERG, CORY, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 6609 DOVRE DR	04-4-	7. 0.1	01 / Y Y Y Y Y Y 2022							
City EDINA	State MN	Zip Code 55436-1711	Transaction ID : PR2763080564310 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) s Unit COO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. SIMMONS, CHRISTOPHER, , ,		organization Name	Date of Receipt							
Mailing Address 18505 6TH AVENUE N			01 / D D / Y Y Y Y 01 31 2022							
City PLYMOUTH	State MN	Zip Code 55447-3318	Transaction ID : PR2763179964310 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc	Occ Dir I	upation (for Individual) M A	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			1153.80							
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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 the												
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group P	4C)									
Full Name of Individual (Last, First, Middle I A. LEFF, ERIN, , ,	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 2633 WEST VIEWMONT W			01 / D D / Y Y Y Y 01 31 2022									
City SEATTLE	State WA	Zip Code 98199-3018	Transaction ID : PR2767366864310 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Clin Ops	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle I B. RICHARDSON, GENEVRA, , ,	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 3618 N 51ST PLACE			01 31 2022									
City PHOENIX	State AZ	Zip Code 85018-6158	Transaction ID : PR2778357564310 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
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 ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle I C. HAUSMAN, ERIC, , ,	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 1617 WEST 25TH STREET			01 / D D / Y Y Y Y 2022									
City MINNEAPOLIS	State MN	Zip Code 55405-2466	Transaction ID : PR2778612764310 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
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 ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			1153.80									
TOTAL This Period (last page this line numbe	er only)											

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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	-	Use separate schedule(s)	(check	only c							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11		11b	11c	12	17			
Any information copied from such Reports an or for commercial purposes, other than using				he pu							
NAME OF COMMITTEE (In Full)											
> UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle A. BAKER, OMAR, , ,	e Initial) or Full O	rganization Name	Date	e of R	eceipt						
Mailing Address 8100 SPRING HILL FARM	M DR		0	м 1	/ D D 31	/ Y	y y 2022	Y			
City MCLEAN	State VA	Zip Code 22102-2330	Transaction ID : PR2778986664310 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С				-	-	384.6	60			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 Strat Intv & CMO Hlth Svc		Mem	o Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R D	Deduct	tion (\$192	2.30 Bi-W	/eekly)				
Full Name of Individual (Last, First, Middle B. DOCIMO, ANNE, , ,	e Initial) or Full O	rganization Name	Date	e of R	eceipt						
Mailing Address 338 S 4TH STREET	0	7.0.4	01 / 31 / 2022 Transaction ID : PR2779271864310								
City PHILADELPHIA	State PA	Zip Code 19106-4217					71864310 is Period)			
FEC ID number of contributing federal political committee.	С			384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Grp Chief Med Off		Mem	o Item						
Receipt For:	Aggregate	Year-to-Date V)educt	ion (\$10)	2.30 Bi-W	(ookly)				
Other (specify) ▼		384.60			ion (\$152	2.30 DF W	certy)				
Full Name of Individual (Last, First, Middle OWEN, CHRISTOPHER, , ,	e Initial) or Full O	rganization Name	Date	e of R	eceipt						
Mailing Address 9011 LESLIES GATE)1	/ D D D 31	/ Y	2022	Y			
City BOERNE	State TX	Zip Code 78015-4779					90866431 is Period	0			
FEC ID number of contributing federal political committee.	С				, ,		384.6	60			
Name of Employer (for Individual) United HealthCare Services Inc	Occi VP M	upation (for Individual) Mktg		Mem	io Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)								
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SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

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ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)									
			for each category of the Detailed Summary Page		× 11a		11b	11c	12				
			y not be sold or used by any pe ddress of any political committee										
	IMITTEE (In Full)												
UnitedHea	Ith Group Incorporat	ed PAC (l	JnitedHealth Group PA	AC)									
Full Name of In A. CONWAY, P.	ndividual (Last, First, Middle In ATRICK, , ,	itial) or Full O	rganization Name		Date of	Re	ceipt						
Mailing Address	3 190 WINDING RIVER RD				01	/	D D D 31	/ Y	2022	Y			
City State WELLESLEY MA			Zip Code		Transaction ID : PR2787875564310								
		MA	02482-7320	_	Amount	of	Each R	eceipt th	is Period				
FEC ID number federal political	0	С			<u> </u>	_	-		384.	60			
Optum Services	yer (for Individual) s, Inc		upation (for Individual) Unit CEO		Me	emo	Item						
Receipt For: Primary Other (spe	General ecify) ▼	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)									
B. SMITH, TAN		itial) or Full O	rganization Name		Date of	Re	ceipt						
	3 1605 PARK AVE	01-1-	7.0.0.1		01	/	D D D 31	/ Y	2022	Y			
City RICHMOND		State VA	Zip Code 23220-2908						3296431	0			
FEC ID number federal political	0	С			Amount of Each Receipt this Period								
Name of Emplo United HealthCa	oyer (for Individual) are Services Inc		upation (for Individual) Plan CEO		Me	emo	Item						
Receipt For:		Aggregate	Aggregate Year-to-Date ▼				1						
Other (spe	ecify) ▼		384.60] f	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of In C. MORSE, S	ndividual (Last, First, Middle In	itial) or Full O	rganization Name		Date of	Re	ceipt						
Mailing Address 6398 VALE STREET					01 / D D / Y Y Y Y 2022								
City ALEXANDRIA		State VA	Zip Code 22312-1435						47346431 is Period	0			
FEC ID number federal political	0	С				. 01		,	384.	60			
Name of Emplo United HealthCa	yer (for Individual) are Services Inc		upation (for Individual) Govt Affs		M	emo	Item						
Receipt For: Primary Other (spe	General Gerify)	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)									
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SCHEDULE B (FEC Form 3X)			FC	OR LINE	NU	MBER:			PA	GE 86 OF	86		
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the		neck only		e)							
		Summary Page		21b		22 28b	23 28c	×	26 29	27 30b			
Any information copied from such Reports and Stat or for commercial purposes, other than using the n				any pers		or the	purpose	of so	olicitin	g contributions	\$		
NAME OF COMMITTEE (In Full)													
UnitedHealth Group Incorporated	I PAC (Un	itedHealth G	rou	p PAC	;)								
Full Name (Last, First, Middle Initial) A. Campaign Fund for Bart Rowland	4					Date of	Disburs	emer	nt				
Mailing Address PO Box 336						01		12		2022			
City Tompkinsville	State	State Zip Code KY 42167				FEC Identification Number							
Purpose of Disbursement							С						
Void - Campaign Fund for Bart Rowland; Check Dated 11/16/2021					Transaction ID : 47106534								
Rowland, Bart, , KY Rep.,		egory/ /pe	Amount of Each Disbursement this Period						bd				
Office Sought: House Disburs	sement For:	ement For:					- 2000.00						
President		Primary General Other (specify) ▼					Void - Campaign Fund for Bart Memo Item Rowland; Check Dated 11/16/2						
State: District:					_		no item						
Full Name (Last, First, Middle Initial) B.						Date of	Disburs	emer	nt				
						M M / D D / Y Y Y Y							
Mailing Address													
City	State	Zip Code			I	EC Id	entificatio	n Nu	umber				
Purpose of Disbursement			_	_	I	С							
Candidate Name					1	_			-				
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	sement For:									1 1 45 1			
President	Primary Other (spec	Other (specify)				Memo Item							
State: District:						Ivie	mo item						
Full Name (Last, First, Middle Initial)						Date of	Disburs	emer	nt				
						M M	/ D	D	/ Y	YYYY			
Mailing Address								_					
City	State	Zip Code			I	EC Id	entificatio	n Nu	umber				
Purpose of Disbursement				_	1	С							
Candidate Name					A	of Each	Diel		nant this David	- al			
			Cate Ty	egory/ /pe		Amoun	or Each	DIS	ourser	ment this Peric			
Office Sought: House Disburs	ement For: Primary	General											
President Other (specify) ▼						Memo Item							
State: District:					1								
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