FEC FORM 3X	RE AN	EPORT C ND DISB Other Than Ar	URSEN	IENT	S		Office Use Only	
1. NAME OF COMMITTEE (in fi		e or print ▼		mple: If typir the lines.	ng, type	12FE4M	15	
UnitedHealth G		porated PAC		alth Grou	p PAC)			
ADDRESS (number and	street)	01 Pennsylvania Av	e, NW					
Check if differ than previous reported. (AC	ly v	Vashington				DC	20004	-
2. FEC IDENTIFICA	TION NUMB	ER 🔻	CITY ▲		S	STATE 🔺	ZIP CC	
C C00274431			3. IS THIS REPORT	~	N) OR		MENDED)	
 4. TYPE OF REPO (Choose One) (a) Quarterly Repo April 15 	orts:	(b) Monthly Report Due On:	Feb 20 (M2) Mar 20 (M3) Apr 20 (M4)		May 20 (M5) Jun 20 (M6) Jul 20 (M7)	Sep	20 (M8)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE)
July 15 Quarterly October 1 Quarterly January 3	Report (Q3)	(C) 12-Day PRE -Electi Report for		Primary (12P Convention (12C)	General Special (Runoff (12R)
Year Only Terminatio	on-election) (MY)	(d) 30-Day POST -Elec Report for		General (300		Runoff (_	Special (30S)
L (TER)			Election on	M = M /		Y = Y = Y = Y	in the State o	of
5. Covering Period	07		y y y 2022	through	07	/ D D / 31	2022	
I certify that I have exactly that I have of Type or Print Name of	F	eport and to the b Rosenhaus, Morgani		wledge and b	pelief it is true	e, correct and	d complete.	
Signature of Treasurer	Rosenhaus 	s, Morganne, , ,		[Electronically	Filed] Da	ate 08	M / D D / 19	2022
NOTE: Submission of fa	lse, erroneous	, or incomplete info	rmation may su	bject the pers	son signing thi	is Report to t	he penalties of 52	U.S.C. § 3010
Office Use Only							FEC FOR Rev. 05/2	

08/19/2022 15 : 45

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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	eport Covering the Period: From:	7 01 / Y Y Y Y 7 01 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	o: 07 / 07 / 10 0 / 10 0 0 0 0 0 0 0 0 0 0 0 0 0 0
		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	447682.18	
	(c) Total Receipts (from Line 19)	119361.01	905762.55
	(d) Subtotal (add Lines 6(b) and6(c) for Column A and Lines6(a) and 6(c) for Column B)	567043.19	1563846.27
7.	Total Disbursements (from Line 31)	35826.90	1032629.98
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	531216.29	531216.29
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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: 07	/ D D / Y Y Y Y 01 / 2022 To:	07 / D D / Y Y Y Y 2022
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:(a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	115467.53	812946.85
(ii) Unitemized	1393.48	90315.70
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	116861.01	903262.55
(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)	116861.01	903262.55
Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
 Loan Repayments Received Offsets To Operating Expenditures (Defined a Debates etc.) 	0.00	0.00
 (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Endersel Conditions and Other 	0.00	0.00
to Federal Candidates and Other Political Committees	2500.00	2500.00
(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))▶	119361.01	905762.55
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	119361.01	905762.55

Page 3

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)	of Disbursements	Page 4			
II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date			
. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calendar Tear-to-Date			
(i) Federal Share	0.00	0.00			
(ii) Non-Federal Share	0.00	0.00			
(b) Other Federal Operating Expenditures	0.00	0.00			
 (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00			
Transfers to Affiliated/Other Party Committees		0.00			
Contributions to Federal Candidates/Committees	0.00				
and Other Political Committees Independent Expenditures	0.00	689000.00			
(use Schedule E) Coordinated Party Expenditures	0.00	0.00			
(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00			
Loan Repayments Made	0.00	0.00			
Loans Made	0.00	0.00			
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	576.90	904.98			
(b) Political Party Committees					
(c) Other Political Committees	0.00	0.00			
(such as PACs) (d) Total Contribution Refunds	0.00	0.00			
(add Lines 28(a), (b), and (c))	576.90	904.98			
Other Disbursements (Including					
Non-Federal Donations)	35250.00	342725.00			
Federal Election Activity (52 U.S.C. § 30101(a) (a) Allocated Federal Election Activity (from Schedule H6)	20))				
(i) Federal Share	0.00	0.00			
(ii) "Levin" Share	0.00	0.00			
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00			
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00			
-					
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	35826.90	1032629.98			
Total Federal Disbursements					
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	35826.90	1032629.98			
		1052029.90			

L

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)		Page 5
III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Total Contributions (other than loans) (from Line 11(d), page 3) 	116861.01	903262.55
34. Total Contribution Refunds (from Line 28(d))	576.90	904.98
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	116284.11	902357.57
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FOR LINE NUMBER:

PAGE 6 OF

171			Use separate schedule(s)	(ch	eck only	/ or	ne)							
	EMIZED RECEIPTS		for each category of the Detailed Summary Page		4 11a		11b	11c	12					
	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	JnitedHealth Group PA	AC)										
A.	Full Name of Individual (Last, First, Middle Initia Rex, Joan, K., ,	al) or Full O	rganization Name		Date of	Re	ceipt							
	Mailing Address 503 Harrington Road			07 05 / Y Y Y Y 2022										
CityStateWayzataMNFEC ID number of contributing federal political committee.C			Zip Code 55391-1512					4786293 eceipt th						
					<u> </u>				5000.	00				
	Name of Employer (for Individual) Unemployed		upation (for Individual) sewife		Me	emo	Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00											
в.	Full Name of Individual (Last, First, Middle Initia DEWALL, PATRICK, , ,	al) or Full O	rganization Name		Date of	Re	ceipt							
	Mailing Address 7662 RIDGEVIEW WAY				м м 07	/	D D D 31	/ Y	y y 2022	Y				
	City CHANHASSEN	State MN	Zip Code 55317-4507	-				4788979 eceipt th						
	FEC ID number of contributing federal political committee.	С			U				00					
	Name of Employer (for Individual) Optum Services, Inc	Occi Dep	Memo Item											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 865.35	Refund(s) on Schedule B Totaling \$576.90 This changes the YTD Total to \$865.35						6.90 This				
<u>с.</u>	Full Name of Individual (Last, First, Middle Initia STREB, DEBORAH, , ,	al) or Full O	rganization Name		Date of	Re	ceipt							
	Mailing Address 2201 NORTH STAR ROAD				^M 07	/	D D D 31	/ Y	y 2022	Y				
	City UPPER ARLINGTON	State OH	Zip Code 43221-3810					PR11597 eceipt th						
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .	y	28.	00				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ir Capability		Me	emo	tem							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			•			,		5028.	00				
т	OTAL This Period (last page this line number or	nly)		-										

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11b	11c	12	47					
Any information copied from such Reports and or for commercial purposes, other than using the													
NAME OF COMMITTEE (In Full)		and been any pointour committee				5001							
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle I GAUDIO, JOSEPH, , ,	nitial) or Full C	rganization Name	Date	of R	eceipt								
Mailing Address 4842 E MOUNTAIN VIEW R	RD			07 31 2022									
City PARADISE VALLEY	State AZ	Zip Code 85253-1539					31186582 is Period	1					
FEC ID number of contributing federal political committee.	С				-g-		384.6	60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n CEO		Mem	o Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R D	educt	ion (\$192	2.30 Bi-W	/eekly)						
Full Name of Individual (Last, First, Middle I B. FALK, DAVID, , ,	nitial) or Full C	rganization Name	Date	of R	eceipt								
Mailing Address 323 LAWRENCE AVE			07		31	/ Y	2022	Y					
	State NJ	Zip Code					2026582 [,]						
HIGHLAND PARK	INJ	08904-1851	Amoi	unt of	Each R	leceipt th	is Period						
FEC ID number of contributing federal political committee.	С		28.00										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) d Dir		Mem	o Item								
Receipt For:	Aggregate	Year-to-Date 🔻											
Primary General Other (specify) ▼		210.00	P/R Deduction (\$14.00 Bi-Weekly)										
Full Name of Individual (Last, First, Middle I MIGLIORI, RICHARD, , ,	nitial) or Full C	rganization Name	Date	of R	eceipt								
Mailing Address PO BOX 72			0	7	31		2022 Y						
City WAYZATA	State MN	Zip Code 55391-0072					82746582 is Period	1					
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, Senior Advisor		Mem	o Item								
Receipt For: Primary General Other (specify)	Year-to-Date ▼ 2884.50	P/R D	educt	ion (\$19)	2.30 Bi-W	/eekly)							
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NAME OF COMMITTEE (In Full)													
UnitedHealth Group Incorpora	ited PAC (l	JnitedHealth Group P/	AC)										
Full Name of Individual (Last, First, Middle A. MILLER, KATHERINE, , ,	Initial) or Full O	rganization Name	Da	ate of	Receip	ot							
Mailing Address 2321 HARBOR LAKE DRIV	Έ		07 31 2022										
City ORANGE PARK	State FL	Zip Code 32003-7799						2436582 s Period	1				
FEC ID number of contributing federal political committee.	C				-7			384.0	60				
Name of Employer (for Individual) United HealthCare Services Inc	upation (for Individual) s Ntwk		Me	mo Iter	m								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R	Dedu	ction (S	\$192.30	Bi-We	eekly)					
Full Name of Individual (Last, First, Middle ANDERSON, CRAIG, , ,	Initial) or Full O	rganization Name	Da	ate of	Receip	ot							
Mailing Address 47 AMATO CIRCLE			07 / D D / Y Y Y Y 31 2022										
City WETHERSFIELD	State CT	Zip Code 06109-3971						5736582 s Period	1				
FEC ID number of contributing federal political committee.	С			384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Jn Pres Ntwk Mgmt		Me	mo Iter	m							
Receipt For:	Aggregate	Year-to-Date ▼	P/R	Dedu	ction (\$	\$192.30	Bi-We	eekly)					
Other (specify) v		, 2884.50											
Full Name of Individual (Last, First, Middle KELLY, JOHN, , ,	Initial) or Full O	rganization Name	Da	ate of	Receip	ot							
Mailing Address 4901 HAWTHORNE COUR SUITE 304	T	Zip Code	46	07		31		2022					
City EDINA	MN	55436-5802						5976582 s Period	1				
FEC ID number of contributing federal political committee.	С				9		y	384.0	60				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 'Tax		Me	mo Ite	m							
Receipt For: Primary General Other (specify)	Year-to-Date ▼ 2884.50	P/F	R Dedu	ction (S	\$192.30	Bi-W	eekly)						
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ITEMIZED RECEIPTS			Use separate schedule(s)			(check only one)						
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	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	d PAC (UnitedHealth Group PA	(C)								
Α.	Full Name of Individual (Last, First, Middle Init JOHNSON, THAD, , ,	ial) or Full C	Organization Name		Date o	f Re	eceipt					
	Mailing Address 9741 GLACIER BAY	-			07 31 2022							
	City EDEN PRAIRIE	State MN	Zip Code 55347-2615					PR1596 eceipt th				
	FEC ID number of contributing federal political committee.	С			<u> </u>					384.60	0	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Group Gen Counsel		М	emo	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50		P/R Ded	lucti	on (\$192	2.30 Bi-W	Veekly	1)		
в.	Full Name of Individual (Last, First, Middle Init SCHUMACHER, DANIEL, , ,	Organization Name		Date o	f Re	eceipt						
	Mailing Address 5401 LARADA LANE		07 / D D / Y Y Y Y Y 2022							ſ		
	City EDINA	State MN					PR15963 eceipt th					
	FEC ID number of contributing federal political committee.	С		384.60							0	
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) ief Strat & Growth Officer	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 2884.50	P/R Deduction (\$192.30 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Init THEISEN, SCOTT, , ,	ial) or Full C	Organization Name		Date o	f Re	eceipt					
	Mailing Address 1950 MEADOWWOODS TRA		Zin Code		07		31		202			
	LONG LAKE	State MN	Zip Code 55356-9312					PR1596				
	FEC ID number of contributing federal political committee.				<u>[</u> :		y .	, y		384.60	0	
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Unit CEO		M	emo) Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)								
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	y information copied from such Reports and S for commercial purposes, other than using the				or the		pose of	soliciting	g con	tributio	ons		
	NAME OF COMMITTEE (In Full)												
	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group P/	AC)									
Α.	Full Name of Individual (Last, First, Middle Init ANDERSON, MICHAEL, , ,	ial) or Full C	rganization Name		Date of Receipt								
	Mailing Address 17907 INVERNESS CURVE				м м 07	/	31) / Y	202	22	Y		
	City EDEN PRAIRIE	State MN	Zip Code 55347-2155					PR1596					
	FEC ID number of contributing federal political committee.	С						-		384.6	0		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P CInt Relationship		M	emo	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/I	R Ded	ucti	on (\$19)	2.30 Bi-V	Veekly	y)			
в.	Full Name of Individual (Last, First, Middle Init BORCA, TROY, , ,	ial) or Full C	rganization Name	D	ate of	f Re	eceipt						
	Mailing Address 1649 SPRING VALLEY ROAD			07 / D D / Y Y Y Y 07 31 2022							Ý		
	City HARTLAND	State WI	Zip Code 53029-2056					PR1596: Receipt th					
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) VP Gen Mgmt				76.92 Memo Item							
	Name of Employer (for Individual) Optum Services, Inc												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Init BRODIGAN, STEVEN, , ,	ial) or Full C	rganization Name	D	ate of	f Re	eceipt						
	Mailing Address 2159 BRINKER ST	State	Zin Code		07	J.	31	J L	202	the state of the s			
	City CHANHASSEN	MN	Zip Code 55317-9361	A			-	PR1596 Receipt th					
	FEC ID number of contributing federal political committee.	С		ļļ			,	. ,		28.0	6		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Jnderwriting		M	emo	o Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.45	P/R Deduction (\$14.03 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)						, .	. ,		489.58	В		
т	OTAL This Period (last page this line number of	only)		Ī									

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ITEMIZED RECEIPTS			Use separate schedule(s)	(check	(check only one)									
111			for each category of the Detailed Summary Page	X 1	1a 3	11	1b 4	11c 15		2 6 [17			
	y information copied from such Reports and Stat for commercial purposes, other than using the n			erson for	the p	urpos	se of s	soliciting	conti	ributic	ons			
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)										
Α.	Full Name of Individual (Last, First, Middle Initial DAVIDSON, TRACY, , ,	l) or Full Or	rganization Name	Da	te of	Rece	ipt							
	Mailing Address 6058 HARBOUR TOWN CIR				07 31 2022									
	City WESTERVILLE	State OH	Zip Code 43082-8144					PR15963 eceipt th			_			
FEC ID number of contributing federal political committee.						-7			3	84.60)			
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Network		Me	mo It	em							
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 2884.50	P/R	Dedu	ction	(\$192.	.30 Bi-W	/eekly)				
в.	Full Name of Individual (Last, First, Middle Initial HEUMANN, KURT, , ,	l) or Full Or	rganization Name	Da	te of	Rece	ipt							
	Mailing Address 63 MUIRFIELD COURT	1		07 / D D / Y Y Y Y 2022										
	City SAINT LOUIS	State MO	Zip Code 63141-7372					R15963 ceipt th						
	FEC ID number of contributing federal political committee.	С		88.46							3			
	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 ▼ 663.45	P/R	Dedu	ction	(\$44.2	3 Bi-We	ekly)					
с.	Full Name of Individual (Last, First, Middle Initial HIGGINS, MARY, , ,	l) or Full Or	rganization Name	Da	te of	Rece	ipt							
	Mailing Address 54 BELCREST ROAD			M	07 ^M	1	D D D	/ Y	2022					
	City WEST HARTFORD	State CT	Zip Code 06107-3304					PR1596						
	FEC ID number of contributing federal political committee.	С				y		. y		76.92	2			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		Me	mo It	em							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)					,		. ,	5	49.98	3			
т	OTAL This Period (last page this line number on	ly)	••••••			-				-				

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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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												
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ted PAC (I	UnitedHealth Group PA	NC)									
Full Name of Individual (Last, First, Middle Ir A. ROSENTHAL, DANIEL, , ,	nitial) or Full C	Organization Name	Date of Receipt									
Mailing Address 8 VIA HERMOSA	Stata	Zin Code	07 / D D / Y Y Y Y 31 2022									
City ORINDA	State CA	Zip Code 94563-1828	Transaction ID : PR1596317365821									
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Jn CEO	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle Ir B. STURKEY, DAVID, , ,	nitial) or Full C	Organization Name	Date of Receipt									
Mailing Address 117 KELLER BLVD		07 31 2022										
City CLEMSON	State SC	Zip Code 29631-2149	Transaction ID : PR1596318465821 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		78.00									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP SIs Acct Mgmt	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 585.00	P/R Deduction (\$39.00 Bi-Weekly)									
Full Name of Individual (Last, First, Middle Ir C. TODD, JEFFREY, , ,	nitial) or Full C	Organization Name	Date of Receipt									
Mailing Address 467 PRAIRIE WAY SOUTH			07 / D D / Y Y Y Y 2022									
City BAYPORT	State MN	Zip Code 55003-1607	Transaction ID : PR1596319065821 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		50.00									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Underwriting	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 375.00	P/R Deduction (\$25.00 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			512.60									
TOTAL This Period (last page this line number	r only)	••••••										

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Ar	y information copied from such Reports and S	Statements ma	ay not be sold or used by any p	erson	13 for the	pur	14 pose of	15 soliciting	contribut	ions		
or	for commercial purposes, other than using the	e name and a	ddress of any political committee	e to s	olicit co	ntrib	outions f	rom such	n committ	ee.		
\backslash	NAME OF COMMITTEE (In Full)		Inite all leadth One in D/									
	UnitedHealth Group Incorporate			4C)								
/	Full Name of Individual (Last, First, Middle Ini	itial) or Full O	rganization Name									
Α.	SANDY, LEWIS, , ,				Date of Receipt							
	Mailing Address 1317 MONTVALE RIDGE DR	IVE			м м 07	1	31) / Y	Y Y 2022	Y		
	City	State	Zip Code			act		PR16005	59876582	1		
	CARY	NC	27519-1015		Amount of Each Receipt this Period							
	FEC ID number of contributing	С			1			384.0	50			
	federal political committee.	U				-	-	-	001.			
	Name of Employer (for Individual)	Occ	upation (for Individual)		M	emc	ltem					
	United HealthCare Services Inc	SVF	P Clin Advancement									
	Receipt For: Primary General	Aggregate	Year-to-Date V									
	Other (specify)		2884.50	11	P/R Ded	ucti	on (\$19)	2.30 Bi-W	/eekly)			
			Age Age Age									
R	Full Name of Individual (Last, First, Middle Ini PETERSON, MATTHEW, , ,	itial) or Full O	rganization Name		Date of	Be	ceint					
Ь.	Mailing Address 2260 FOX STREET											
					07	ľ	31		2022			
	City	State	Zip Code						6996582	1		
	ORONO	MN	55356-8316	_	Amount	of	Each R	leceipt th	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) O Ancillary & Ind/Sgt CAO		M	emo	tem					
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General			111	P/R Ded	uctio	on (\$192	2.30 Bi-W	eekly)			
	Other (specify) v		, 2884.50									
C.	Full Name of Individual (Last, First, Middle Ini MALONEY, JEFFREY, , ,	tial) or Full O	rganization Name		Date of	Re	eceipt					
	Mailing Address 6327 PASADENA POINT BLV	VD S			M M	/	D D) / Y	YY	Y		
					07	Ι.	31		2022			
	City GULFPORT	State FL	Zip Code 33707-3867	-					24356582	1		
	FEC ID number of contributing				Amoun	. 01			is Period	_		
	federal political committee.	С			L.		y	. y	192.3	30		
	Name of Employer (for Individual)	Occ	upation (for Individual)	_	М	emo	b Item					
	Optum Services, Inc		Gen Mgmt									
	Receipt For:	Aggregate	Year-to-Date V									
	Other (specify)	1442.25				P/R Deduction (\$96.15 Bi-Weekly)						
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s	UBTOTAL of Receipts This Page (optional)			•			y		961.5	50		
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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	prated PAC (I	JnitedHealth Group P	4C)									
Full Name of Individual (Last, First, Mid A. SEVIGNY, BRIAN, , ,	dle Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 137 CREEKVIEW LAN	E		07 31 2022									
City LORETTO	State MN	Zip Code 55357-2111	Transaction ID : PR1653445765821 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		28.08									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Director Technology	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)									
Full Name of Individual (Last, First, Mid B. EMERSON, PAUL, , ,	dle Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 18855 MEADOW VIEW	BLVD		07 / 31 / 2022									
City PRIOR LAKE	State MN	Zip Code 55372-3133	Transaction ID : PR1806750365821									
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) Unit CEO	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Mid ULLOA, SHAUNA, , ,	dle Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 9 STRATFORD ROAD			07 / 0 D / Y Y Y Y 07 31 2022									
City FARMINGTON	State CT	Zip Code 06032-1444	Transaction ID : PR1832379165821 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		28.08									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP CInt Relationship	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)									
SUBTOTAL of Receipts This Page (option	nal)		440.76									
TOTAL This Period (last page this line nu	mber only)	······										

SCHEDULE A (FEC Form 3X) DEOFIDTO

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)		and be any pointed commute									
UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middle ANDERSON, CATHERINE, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 57 SIMMONS LANE			07 / 07 / 2022								
City SEVERNA PARK	State MD	Zip Code 21146-1921	Transaction ID : PR1903550765821 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 Strat Initiv	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. SANTELLI, JOHN, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 25510 BIRCH BLUFF RO	AD		07 31 / Y Y Y Y Y 07 31 2022								
City EXCELSIOR	State MN	Zip Code 55331-8520	Transaction ID : PR1903622065821 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60 Memo Item								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P CIO									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. WEYMOUTH, PAUL, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 317 WRIGHTS MILL RD			07 / D D / Y Y Y Y 2022								
COVENTRY	State CT	Zip Code 06238-1559	Transaction ID : PR1903636965821 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 ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optiona)		1153.80								
TOTAL This Period (last page this line num	ber only)										

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	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
			13 14 15 16 17 person for the purpose of soliciting contributions per 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. DUPERRE, BRIAN, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 100 LONG HILL DRIVE			07 31 Y Y Y Y Y 07 31 2022								
City SOMERS	State CT	Zip Code 06071-1272	Transaction ID : PR1910417365821 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.92								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) puty Gen Counsel	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. CAMPBELL, COLLEEN, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 10906 GREEN HARVEST			07 / D D / Y Y Y Y 2022								
City RIVERVIEW	State FL	Zip Code 33578-6185	Transaction ID : PR2119469965821 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		30.00								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Adhr Sr Cnslt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 225.00	P/R Deduction (\$15.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. DEMBROSKI, TODD, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 1390 FINCH LN		1	07 / D D / Y Y Y Y 2022								
City GREEN BAY	State WI	Zip Code 54313-6400	Transaction ID : PR2119472865821 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		30.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Act Svs	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 225.00	P/R Deduction (\$15.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)		136.92								
TOTAL This Period (last page this line num	ber only)	······									

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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				category of the Summary Page		X 11a 13		11b	·	11c 15	12	17		
	y information copied from such Reports and State for commercial purposes, other than using the na					for the		pose		soliciting	contribu	utions		
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	JnitedHe	ealth Group PA	AC)									
Α.	Full Name of Individual (Last, First, Middle Initial) GILDERNICK, AMY, , ,	or Full C	organization	Name		Date of Receipt								
	Mailing Address 2709 WILLIAMS GRANT													
	City DE PERE	State WI	Zip Coo	de 5-9456							4752658			
		C				Amount of Each Receipt this Period								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Clms	Individual)		M	emo	lter	m					
	Receipt For: A Primary General Other (specify) ▼	ggregate	Year-to-Date	300.00]	P/R Ded	uctio	on (\$	\$20.0	0 Bi-We	ekly)			
В.	Full Name of Individual (Last, First, Middle Initial) KANNE, KATHLEEN, , ,	or Full C	organization	Name		Date of	f Re	eceip	ot					
	Mailing Address 4826 PALOMINO COURT					м м 07	y y 2022	Y						
	City ERIE	State PA	Zip Coo 16506		Transaction ID : PR2119479 Amount of Each Receipt this									
	FEC ID number of contributing federal political committee.	С				384.60								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Experience	Individual)		M	emo	lter	m					
	Receipt For: A Primary General Other (specify) ▼	vggregate	Year-to-Date]	P/R Deduction (\$192.30 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial) MACEMEADOR, HEATHER, , ,	or Full C	organization	Name		Date of	f Re	eceip	ot					
	Mailing Address 13531 CARLTON OAKS					M M 07	/	D	31 D	/ Y	ү ү 2022	Y		
	City SAN ANTONIO	State TX	Zip Coo 78232								4825658			
	FFC ID number of contributing	С						J		, seipt th		.00		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Med Clin Ops	,		М	emo) Itei	m					
	Receipt For: A Primary General Other (specify)	vggregate	ate Year-to-Date ▼ 300.00 P/R Deduction (\$20.00 Bi-Wee						ekly)					
s	UBTOTAL of Receipts This Page (optional)				•			,			464	.60		
Т	OTAL This Period (last page this line number only	/)			•			- -		-				

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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				Detailed Summary Page	×	11a		11		_	11c	12		
	y information copied from such Reports and State for commercial purposes, other than using the na								se of s	soli				
<u> </u>	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated					.511 001			5115 11	0111		Johnnitt		
/	Full Name of Individual (Last, First, Middle Initial)													
Α.	NYGARD, KEITH, , ,		igui			Date of Receipt								
	Mailing Address 8056 CARPENTER CREEK AVE	NUE				07 / D D / Y Y Y Y 07 31 2022								
	City LAS VEGAS	State NV		Zip Code 89113-3685	A	Transaction ID : PR2119485065821 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			40.00									
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Adhr		Me	emo	o Ite	em					
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 300.00	P/	P/R Deduction (\$20.00 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Initial) OLLMANNWAGNER, TRACY, , ,	or Full O	Organ	nization Name		Date of	Re	ecei	ipt					
	Mailing Address 2839 TIMBER LANE				07 31 / Y Y Y Y Y 2022									
	City GREEN BAY	State WI		Zip Code 54313-5841	Transaction ID : PR211948526 Amount of Each Receipt this Pe								1	
	FEC ID number of contributing federal political committee.	С										30.	00	
	Name of Employer (for Individual) United HealthCare Services Inc	Occi Ass	Memo Item											
	Receipt For: A Primary General Other (specify) ▼	Aggregate	P/	P/R Deduction (\$15.00 Bi-Weekly)										
C.	Full Name of Individual (Last, First, Middle Initial) RICCIUTI, SHARON, , ,	or Full O	Organ	nization Name		Date of	Re	ecei	ipt					
	Mailing Address 55 PERENNIAL	1				^M 07	/	Г	D D D 31	1	/ Y	y y 2022	Y	
	City IRVINE	State CA		Zip Code 92603-0621								8796582 s Period	1	
	FEC ID number of contributing federal political committee.	С					51				J.	28.0	08	
	Name of Employer (for Individual) United HealthCare Services Inc		upati Clin (ion (for Individual) Qlty		Me	emo	o Ite	em					
	Receipt For: A Primary General Other (specify)	Aggregate	gate Year-to-Date ▼ 210.60				uctio	on	(\$14.0	04 I	Bi-We	ekly)		
s	UBTOTAL of Receipts This Page (optional)			••••••								98.0	08	
	OTAL This Period (last page this line number only				Ī			,						

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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	erson for the	e pur	14 pose of	15 soliciting	16 contribut	17 tions			
or for commercial purposes, other than using											
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle WRIGHT, GREGORY, , ,	Initial) or Full O	rganization Name	Date of	Date of Receipt							
Mailing Address 10471 STRAND TERRACE	E		07 31 Y Y Y Y Y 2022								
City SANTA ANA	State CA	Zip Code 92705-1495	Transaction ID : PR2119494165821 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		/lemc	tem						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. YOUNG, GEORGE, , ,	Initial) or Full O	rganization Name	Date o	of Re	eceipt						
Mailing Address 36296 N 98TH WAY			07 / D D / Y Y Y Y Y 2022								
City SCOTTSDALE	State AZ	Zip Code 85262-3138					9446582 is Period	1			
FEC ID number of contributing federal political committee.	С		30.00 Memo Item P/R Deduction (\$15.00 Bi-Weekly)								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 225.00									
Full Name of Individual (Last, First, Middle C. CUMMINGS, DANIEL, , ,	Initial) or Full O	rganization Name	Date o	of Re	eceipt						
Mailing Address 1929 FAIRMOUNT AVE	1		07		31) / Y	y y 2022	Y			
City SAINT PAUL	State MN	Zip Code 55105-1539					13266582 is Period	1			
FEC ID number of contributing federal political committee.	С				, .	,	30.0	00			
Name of Employer (for Individual) United HealthCare Services Inc	Occi VP F	upation (for Individual) Fin		Nemo	tem						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 225.00	P/R Deduction (\$15.00 Bi-Weekly)								
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$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group P/	AC)									
A.	Full Name of Individual (Last, First, Middle Initial HULTGREN, BROR, , ,) or Full Or	rganization Name	Da	ate of	Re	ceipt						
	Mailing Address 408 22ND ST				07	/	31) / Y	y 202	22			
	City GOLDEN	State CO	Zip Code 80401-2452		Transaction ID : PR2133133265821 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		Me	emo	ltem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R	/R Deduction (\$192.30 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Initial PUTNAM, T JEFFREY, , ,) or Full Or	rganization Name	Da	ate of	Re	ceipt						
	Mailing Address 303 ELMWOOD PLACE WEST				07 / D D / Y Y Y Y 2022								
	City MINNEAPOLIS	State MN	Zip Code 55419-1349					PR21331 leceipt th					
	FEC ID number of contributing federal political committee.	С	384.60										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Group CFO	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R	Dedu	uctio	on (\$192	2.30 Bi-W	/eekly	')			
С.	Full Name of Individual (Last, First, Middle Initial RUMMEL, LEAH, , ,) or Full Or	rganization Name	Da	ate of	Re	ceipt						
	Mailing Address 12100 TRAUTWEIN ROAD	1		_ L	07 ^M	/	31	JL	202		ſ		
	City AUSTIN	State TX	Zip Code 78737-9358				-	PR2145					
	FEC ID number of contributing federal political committee.	С				_	,	,		76.92	2		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs		Me	emo	tem						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-\				.46 Bi-We	eekly)				
s	UBTOTAL of Receipts This Page (optional)						, .	. ,	8	346.12	2		
T	OTAL This Period (last page this line number on	ly)						1.95		-			

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			for each category of the Detailed Summary Page	×	11a	\vdash	11b	11c	12		7	
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<u>N</u>	AME OF COMMITTEE (In Full)											
¢ι	InitedHealth Group Incorporated	PAC (L	InitedHealth Group PA	AC)								
	ull Name of Individual (Last, First, Middle Initia EWIS, KURT, , ,	l) or Full Or	ganization Name		Date of Receipt							
М	ailing Address 961 RIVER FOREST DRIVE				M - M / D - D / Y - Y - Y - Y - Y 07 31 2022 Transaction ID : PR2203967565821 Amount of Each Receipt this Period							
	ity IAINEVILLE	State OH	Zip Code 45039-7720									
	EC ID number of contributing deral political committee.	С		384.60								
U	ame of Employer (for Individual) nited HealthCare Services Inc		pation (for Individual) Plan CEO		Me	emo	ltem					
R	eceipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 2884.50	I P	P/R Ded	uctio	n (\$192	.30 Bi-W	'eekly)			
	ull Name of Individual (Last, First, Middle Initia BEAULE, JEAN-FRANCOIS, , ,	l) or Full Or	ganization Name		Date of	Rec	eipt					
	ailing Address 7 STRATFORD RD	1		07 / D D / Y Y Y Y 2022								
	ity ARMINGTON	State CT	Zip Code 06032-1444					PR22258				
	EC ID number of contributing		00032-1444	- '	Amount	OTE	ach Re	eceipt th	is Period	a	1	
	deral political committee.	С			230.76							
	ame of Employer (for Individual) nited HealthCare Services Inc		pation (for Individual) HIth Advancement	Memo Item								
R	eceipt For: Primary General	Aggregate `	lear-to-Date ▼			otion	o (\$115	20 0: 14				
-	Other (specify) V		1730.70		/R Deal	uction	סווק) וו	.38 Bi-W	еекіу)			
	III Name of Individual (Last, First, Middle Initia	l) or Full Or	ganization Name		Date of	Rec	eipt					
М	ailing Address 437 DRURY LANE				м м 07	1	D D D 31	/ Y	y y 2022	Ŷ		
Ci V	ity VYCKOFF	State NJ	Zip Code 07481-2204					PR22258				
	EC ID number of contributing deral political committee.	С							192]	
			pation (for Individual) Plan CEO		Me	emo	ltem					
R	eceipt For: Primary General Other (specify)	Aggregate `	/ear-to-Date ▼ 1442.25	I P	P/R Ded	uctio	n (\$96.′	15 Bi-We	ekly)			
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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						
Any information copied from such Reports and or for commercial purposes, other than using											
NAME OF COMMITTEE (In Full)											
> UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle RYAN, JOHN, , ,	Initial) or Full C	organization Name	Date of R	eceipt							
Mailing Address 45 WESTMORELAND LN			м м 07								
City NAPERVILLE	State IL	Zip Code 60540-5817	Transaction ID : PR2225819665821 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) sion CEO	Merr	no Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduc	tion (\$192.30 Bi-\	.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. GREENMAN, DEE, , ,	Initial) or Full C	organization Name	Date of R	eceipt							
Mailing Address 536 HIGH DR			07	31	2022	Ŷ					
City CARMEL	State IN	Zip Code 46033-2338		tion ID : PR2231 f Each Receipt t							
FEC ID number of contributing federal political committee.	С		28.08								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs	Merr	no Item							
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify) ▼		210.60	P/R Deduct	tion (\$14.04 Bi-W	/eekly)						
Full Name of Individual (Last, First, Middle CARCIONE, JOSEPH, , ,	Initial) or Full C	organization Name	Date of R	eceipt							
Mailing Address 11 CARRIAGE WAY			07	31	2022						
City WHITE PLAINS	State NY	Zip Code 10605-5424		tion ID : PR2247 f Each Receipt t							
FEC ID number of contributing federal political committee.	С			5 5	115.4	0					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Dir/CMO	Mem	no Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 865.50									
SUBTOTAL of Receipts This Page (optional)				, , , ,	528.0	8					
TOTAL This Period (last page this line numb	er only)			* *							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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PAGE 23 OF

			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
An or	y information copied from such Reports and Stat for commercial purposes, other than using the n	tements ma ame and a	ay not be sold or used by any pendotress of any political committee	erson for the purpose of soliciting contributions							
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (I	UnitedHealth Group PA	.C)							
A.	Full Name of Individual (Last, First, Middle Initial KANTOLA, KEVIN, , ,	l) or Full C	organization Name	Date of Receipt							
	Mailing Address 7031 HALSTEAD DRIVE										
	City MINNETRISTA	State MN	Zip Code 55364-3201	Transaction ID : PR2247627065821							
	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	Occ VP	upation (for Individual) IT	Memo Item							
	Receipt For:	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)							
B.	Full Name of Individual (Last, First, Middle Initial OBRIEN, DENNIS, , ,	l) or Full C	Organization Name	Date of Receipt							
	Mailing Address 61 LOUGHLIN AVE			07 31 Y Y Y Y Y 2022							
	City COS COB	State CT	Zip Code 06807-2621	Transaction ID : PR2247627365821 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) gn CEO	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initial GARODIA, SANJAY, , ,	l) or Full C	Organization Name	Date of Receipt							
	Mailing Address 110 COVINGTON COURT	1		07 / D D / Y Y Y Y Y 2022							
	City OAK BROOK	State IL	Zip Code 60523-2574	Transaction ID : PR2247627865821							
	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) Unit COO	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)		••••••	846.12							
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	EMIZED RECEIPTS		for each category of the Detailed Summary Page		11a 13		11b	11c	12	17		
	y information copied from such Reports and Sta for commercial purposes, other than using the				for the		oose of	soliciting	contribu	tions		
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group P	AC)								
A.	Full Name of Individual (Last, First, Middle Initi PRINCE, JOHN, , ,	al) or Full O	rganization Name		Date of Receipt							
	Mailing Address 546 HARRINGTON ROAD				м м 07	/	D D 31	/ Y	ү ү 2022	Y		
	City WAYZATA	State MN	Zip Code 55391-1550		Transaction ID : PR2259738465821 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 Pres & COO		Me	emo	ltem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$192.30 Bi-Weekly)									
B.	Full Name of Individual (Last, First, Middle Initi CRONN, CHRISTOPHER, , ,	al) or Full O	rganization Name		Date of	Re	ceipt					
	Mailing Address 1122 COLORADO STREET SUITE 2399	Otata	Zin Oode		^M 07	/	D D 31	/ Y	2022	Y		
	City AUSTIN	State TX	Zip Code 78701-2132	-			-		2296582 is Period			
	FEC ID number of contributing federal political committee.	С						115.				
	Name of Employer (for Individual) United HealthCare Services Inc	Occi Gov	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 865.35] F	P/R Deduction (\$57.69 Bi-Weekly)							
С.	Full Name of Individual (Last, First, Middle Initi FRASCINO, MJ, , ,	al) or Full O	rganization Name		Date of	Re	ceipt					
	Mailing Address 4575 SOUTH ATLANTIC AVER # 6311 City	NUE	Zip Code		07	′	31	L	2022			
	PONCE INLET	FL	32127-7096				-		31656582 is Period	.1		
	FEC ID number of contributing federal political committee.	С			<u> </u>		y		28.	00		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Iktg Comm		M	emo	Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.00] f	P/R Ded	uctio	on (\$14.	00 Bi-We	ekly)			
	UBTOTAL of Receipts This Page (optional)		,	► _		_	, . , .		527.	98		
T	OTAL This Period (last page this line number of	ority)	······]			-	,	-				

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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			tor each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
An or	y information copied from such Reports and Stat for commercial purposes, other than using the n	tements ma ame and a	ay not be sold or used by any pe ddress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.								
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	NC)								
Α.	Full Name of Individual (Last, First, Middle Initial KEPLEYCARRIER, ANGELA, , ,	l) or Full O	rganization Name	Date of Receipt								
	Mailing Address 3219 PENINSULA DRIVE	1		07 / D D / Y Y Y Y 07 31 2022								
		State NC	Zip Code	Transaction ID : PR2402317765821								
	JAMESTOWN		27282-8717	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		40.00								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Memo Item								
	Dessint For:		Year-to-Date ▼									
	Primary General Other (specify) ▼		300.00	P/R Deduction (\$20.00 Bi-Weekly)								
В.	Full Name of Individual (Last, First, Middle Initial MCGRATH, STACY, , ,	l) or Full O	rganization Name	Date of Receipt								
	Mailing Address 5801 CHOWEN AVE S			07 31 2022								
	City	State	Zip Code	Transaction ID : PR2402318565821								
	EDINA	MN	55410-2759	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		40.00								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	P/R Deduction (\$20.00 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initial ROSSI, DAVID, , ,	l) or Full O	rganization Name	Date of Receipt								
	Mailing Address 510 BUFFALO TOM DRIVE			07 31 2022								
	City	State	Zip Code	Transaction ID : PR2402319665821								
	GREENSBORO	NC	27455-8344	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		28.08								
	Name of Employer (for Individual) United HealthCare Services Inc	Occi	upation (for Individual) c Dir	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)			108.08								
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IT.			Use separate schedule(s)	(check only one)									
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1									
	y information copied from such Reports and Sta for commercial purposes, other than using the r			erson for the purpose of soliciting contributions									
<u> </u>	NAME OF COMMITTEE (In Full)												
\rangle	UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	NC)									
A.	Full Name of Individual (Last, First, Middle Initia HIGA, JOY, , ,	l) or Full Oi	rganization Name	Date of Receipt									
	Mailing Address 2208 ELM AVENUE			07 31 2022									
	City MANHATTAN BEACH	State CA	Zip Code 90266-2809	Transaction ID : PR2402446265821 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) If Compl Off & SVP Reg Affs	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initia ALEXANDER, CORY, , ,	l) or Full O	rganization Name	Date of Receipt									
	Mailing Address 4901 HAMPDEN LANE UNIT 405	01-1-	7.0.1	07 / 31 / 2022									
	City BETHESDA	State MD	Zip Code 20814-7918	Transaction ID : PR2405428865821 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 ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initia	l) or Full O	rganization Name	Date of Receipt									
	Mailing Address 2225 46TH ST NW	Otata	Zin Oode	07 / D D / Y Y Y Y 31 2022									
	City WASHINGTON	State DC	Zip Code 20007-1032	Transaction ID : PR2408545065821 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		ıpation (for Individual) Plan CEO	Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)			1153.80									
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	EMIZED RECEIPIS		for each cate Detailed Sum		×	11a		11b	11c	12	47					
	y information copied from such Reports and State for commercial purposes, other than using the na															
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealt	h Group PA	C)											
A.	Full Name of Individual (Last, First, Middle Initial) BALTHAZOR, PAUL, , ,	or Full O	rganization Nam	e	[Date of Receipt										
	Mailing Address 2002 SUGARWOOD DRIVE															
	City ORONO	State MN	Zip Code 55356-933	39	-					12076582						
		C				Amount of Each Receipt this Period 384.60										
	Name of Employer (for Individual) Optum Services, Inc Receipt For:		pation (for Indiv Segment COO	idual)		Me	emo	Item								
	Primary General A Other (specify) ▼	ggregate	Year-to-Date ▼	2884.50	P/	R Dedi	uctic	on (\$192	.30 Bi-W	/eekly)						
В.	Full Name of Individual (Last, First, Middle Initial) NESS, LAURA, , ,	or Full O	rganization Nam	e		Date of	Re	ceipt								
	Mailing Address 10550 PINNACLE WAY				07 31 20											
	City WOODBURY	State MN	Zip Code 55129-428	2		Transaction ID : PR2437121565821 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 Indiv Segment COO	Memo Item												
	Receipt For: A Primary General Other (specify) ▼	ggregate	regate Year-to-Date ▼ 2884.50					P/R Deduction (\$192.30 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initial)	or Full O	rganization Nam	e		Date of	Re	ceipt								
	Mailing Address 1875 HUNTER LANE					м м 07	/	31	/ Y	ү ү 2022	Y					
	City MENDOTA HEIGHTS	State MN	Zip Code 55118-411	0	A					12166582 iis Period						
	FEC ID number of contributing federal political committee.	С						,		384.	_					
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Indiv Unit CEO	idual)		Memo Item										
	Receipt For: A Primary General Other (specify)	ggregate	Year-to-Date ▼	2884.50	P/	'R Ded	uctio	on (\$192	.30 Bi-V	Veekly)						
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SCHEDULE A (FEC Form 3X) DEOFIDTO

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page		1 1a		11b	11c	12	_ 47		
	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 EDELSON, BRETT, , ,	al) or Full Oi	rganization Name		Date of	Re	ceipt					
	Mailing Address 4600 DREXEL AVENUE				07 31 Y Y Y Y Y 2022							
	City EDINA	State MN	Zip Code 55424-1132	_	Transaction ID : PR2437127165821 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		Me	emo	ltem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	F	P/R Dedu	uctio	on (\$192	2.30 Bi-W	/eekly)			
B.	Full Name of Individual (Last, First, Middle Initia RAINEY, PETER, , ,	al) or Full O	rganization Name		Date of	Re	ceipt					
	Mailing Address 8850 COUNTY ROAD 26	State		07 31 2022 Transaction ID : PR2437127565821								
	MINNETRISTA	MN	Zip Code 55359-9445					PR24371 leceipt th				
	FEC ID number of contributing federal political committee.	C						і уг.	384.	60		
	Name of Employer (for Individual) United HealthCare Services Inc	Occu SVF	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	F	P/R Dedu	uctio	on (\$192	2.30 Bi-W	′eekly)			
С.	Full Name of Individual (Last, First, Middle Initia HEYMAN, STEPHEN, , ,	al) or Full Oi	rganization Name		Date of	Re	ceipt					
	Mailing Address 5300 SHERRILL AVENUE				м м 07	1	31		ү ү 2022			
	City CHEVY CHASE	State MD	Zip Code 20815-3720					PR24442 leceipt th				
	FEC ID number of contributing federal political committee.	С			<u> </u>		,	,	384.	60		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Strategy & Partnerships		Me	emc	tem					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)		•	<u> </u>			, .	. ,	1153.	80		
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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	WIZED RECEIPTS		Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
or fo	r commercial purposes, other than using the n			ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
	AME OF COMMITTEE (In Full) InitedHealth Group Incorporated	PAC (l	UnitedHealth Group	PAC)
	II Name of Individual (Last, First, Middle Initial ANGER, DONALD, , ,) or Full O	Organization Name	Date of Receipt
	ailing Address 5110 OAK RAMBLING DRIVE	1		07 / D D / Y Y Y Y 2022
	ty ATT	State TX	Zip Code	Transaction ID : PR2445015465821
	ATY		77494-1971	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	С		384.60
	ame of Employer (for Individual) nited HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item
R	eceipt For:	Aggregate	Year-to-Date V	
	Primary General Other (specify) V		2884.50	P/R Deduction (\$192.30 Bi-Weekly)
	II Name of Individual (Last, First, Middle Initial) or Full O	Organization Name	Date of Receipt
M	ailing Address 675 THALIA POINT RD			07 31 2022
C	ity	State	Zip Code	Transaction ID : PR2445016865821
V	IRGINIA BEACH	VA	23452-1815	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	С		384.60
	ame of Employer (for Individual) nited HealthCare Services Inc		upation (for Individual) Sales	Memo Item
R	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)
	II Name of Individual (Last, First, Middle Initial SIEGEL, DAVID, , ,) or Full O	Organization Name	Date of Receipt
M	ailing Address 264 LAKEWOOD DRIVE			07 31 2022
	ty	State	Zip Code	Transaction ID : PR2445017165821
	BLOOMFIELD HILLS	MI	48304-3531	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	С		28.08
	ame of Employer (for Individual) ptum Services, Inc	Occi Med	upation (for Individual) I Dir	Memo Item
R	eceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 1	- H	11b	11c	12					
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or for commercial purposes, other than using t	ne name and a	adress of any political committee	e to solici	i contr	loution	s from su	ch commit	tee.				
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle I WALKOWSKI, KAREN, , ,	nitial) or Full C	organization Name	Dat	te of F	Receipt							
Mailing Address 6359 COUNTRY ROAD				07 31 2022								
City EDEN PRAIRIE	State MN	Zip Code 55346-1342					372346582 this Perioc					
FEC ID number of contributing federal political committee.	С				-gr.		28	.08				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Director Data Analytics		Men	no Item	1						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R	Deduc	ction (\$^	14.04 Bi-W	/eekly)					
Full Name of Individual (Last, First, Middle I B. MCMAHON, DIRK, , ,	nitial) or Full C	organization Name	Dat	te of F	Receipt							
Mailing Address 60 WILDHURST ROAD			07 / D D / Y Y Y Y Y 2022									
City EXCELSIOR	State MN	Zip Code 55331-8461					145706582					
FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) sident UHG & COO		Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R	Deduc	tion (\$1	192.30 Bi-'	Weekly)					
Full Name of Individual (Last, First, Middle I NATHAN, DONALD, , ,	nitial) or Full C	organization Name	Dat	te of F	Receipt							
Mailing Address 1643 SPRING CREEK DRI				07 [™]	3	31	2022					
City SARASOTA	State FL	Zip Code 34239-5046					145736582 this Perioc					
FEC ID number of contributing federal political committee.	С			_	, ,	y	454	.00				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9, Senior Advisor		Men	no Iterr	1						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2497.00	P/R	Deduc	ction (\$2	227.00 Bi-	Weekly)					
SUBTOTAL of Receipts This Page (optional)		••••••			,		866.	.68				
TOTAL This Period (last page this line number	er only)	••••••										

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PAGE 31 OF

IT.			Use separate schedule(s)	(check	only	one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page			1a 3	11b	11c		12 16	17		
Ar or	ny information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	L ay not be sold or used by any po ddress of any political committee	erson for	the p	ourpose c	of soliciting	g con	tributi	ons		
	NAME OF COMMITTEE (In Full)											
	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group PA	NC)								
Α.		al) or Full O	rganization Name	Da	Date of Receipt							
	Mailing Address 3917 TERRY PLACE			07 / D D / Y Y Y Y 2022								
	City ALEXANDRIA	State VA	Zip Code 22304-1737	Transaction ID : PR2540175365821 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			_				384.6	0		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs		Me	mo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R	Dedu	ction (\$1	92.30 Bi-V	Veekl	y)			
в.	Full Name of Individual (Last, First, Middle Initi PURDY, PATRICIA, , ,	al) or Full O	rganization Name	Da	te of	Receipt						
	Mailing Address 3615 THORNAPPLE STREET			07 31 2022								
	City	State MD	Zip Code				: PR2541					
	CHEVY CHASE FEC ID number of contributing federal political committee.	C	20815-4113	Am	iount	of Each	Receipt th		eriod 384.6	0		
	Name of Employer (for Individual) Optum Services, Inc	Occ	Memo Item									
	Receipt For: Primary General Other (specify) ▼		P Strategy Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)								
<u> </u>	Full Name of Individual (Last, First, Middle Initi RAMSAY, RICHARD, , ,	al) or Full O	rganization Name	Da	te of	Receipt						
	Mailing Address 543 E LURAY AVE			_ L	07 ^M	/ D 3	1	202	1. Alt			
	City ALEXANDRIA	State VA	Zip Code 22301-1605				: PR2542 Receipt th					
	FEC ID number of contributing federal political committee.	С			_	,	. ,		100.0	0		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 750.00	P/R	Dedu	ction (\$5	0.00 Bi-W	eekly)			
F	UBTOTAL of Receipts This Page (optional)		r		-	y 1	· · ·		869.20	0		

SCHEDULE A (FEC Form 3X) DEOFIDTO

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	EMIZED RECEIPTS			K 11a 13		11b 14	11c	12	17					
	y information copied from such Reports and Sta for commercial purposes, other than using the r				for the		oose of	soliciting	contribu	tions				
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	InitedHealth Group PA	۰ ۲C)										
A.	Full Name of Individual (Last, First, Middle Initia DAVENPORT, ALLISON, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt							
	Mailing Address 141 PELHAM ROAD				07 31 2022									
	City PHILADELPHIA	State PA	Zip Code 19119-2661		Transaction ID : PR2552313665821 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		pation (for Individual) Gen Mgmt		Me	emo	Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 2884.50]	P/R Dedu	uctio	on (\$192	2.30 Bi-W	/eekly)					
в.	Full Name of Individual (Last, First, Middle Initia BRYANT, JEREMY, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt							
	Mailing Address 4534 MYSTIQUE WAY			07 / D D / Y Y Y Y 2022										
	City ROSWELL	State GA	Zip Code 30075-2087		Transaction ID : PR2552961365821 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		76.92										
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP (Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90] F	P/R Deduction (\$38.46 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initia	l) or Full Or	ganization Name		Date of	Re	ceipt							
	Mailing Address 842 NAGLE STREET				^M 07	/	31		ү ү 2022					
	City HOUSTON	State TX	Zip Code 77003-1266						96146582 is Period	1				
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .	,	76.	92				
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) ien Mgmt		Me	emo	tem							
	Receipt For: Primary General Other (specify)	Aggregate Y	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			<u> </u>			, .		538.4	14				
т	OTAL This Period (last page this line number or	ıly)		- •			,							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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				h category of the I Summary Page	×	11a 13		11b		11c 15	12	17							
	y information copied from such Reports and State for commercial purposes, other than using the na					for the		pose		oliciting	g contribu	utions							
$\Big\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedH	ealth Group P															
Α.	Full Name of Individual (Last, First, Middle Initial) EHLMAN, MICHAEL, , ,										Date of Receipt								
	Mailing Address 10051 VALLEY RIDGE COURT				07 / D D / Y Y Y Y 07 31 2022														
	City LAS VEGAS	State NV	Zip C	ode 48-7602		Transaction ID : PR2552962265821 Amount of Each Receipt this Period													
	EFC ID number of contribution	C				Amoun	t of	Eacr	i Rec	ceipt th		.00							
	Name of Employer (for Individual) Optum Services, Inc		ipation (fo	r Individual) hnology		M	emo	lten	١										
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Year-to-Da	te ▼ 210.00	P	/R Ded	luctio	on (\$	14.00	0 Bi-We	ekly)								
в.	Full Name of Individual (Last, First, Middle Initial) FLANNERY, SCOTT, , ,	or Full O	rganization	Name		Date of	f Re	ceipt											
	Mailing Address 8508 TRELADY CT					07 31 / Y Y Y Y 2022													
	City PLANO	State TX	Zip C 7502	ode 24-6827		Transaction ID : PR255296236582 Amount of Each Receipt this Period													
	FEC ID number of contributing federal political committee.	С				192.30													
	Name of Employer (for Individual) United HealthCare Services Inc		upation (fo Plan CEO	r Individual)		Memo Item													
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Year-to-Da	te ▼ 1442.25	P	P/R Deduction (\$96.15 Bi-Weekly)													
с.	Full Name of Individual (Last, First, Middle Initial) JAMES, GREGORY, , ,	or Full O	rganization	Name		Date of	f Re	eceipt											
	Mailing Address 2323 KINGS POINT DRIVE		1			м м 07	1		31	/ Y	ү ү 2022	Ŷ							
	City LARGO	State FL	Zip C	ode 4-1009				-			9632658								
	FEC ID number of contributing	C				Amoun	t of	Eacr		seipt th		.92							
	Name of Employer (for Individual) Optum Services, Inc		pation (for ed Dir	r Individual)		М	emo	lten	n										
	Receipt For: A Primary General Other (specify)	Aggregate	Year-to-Da	te ▼ 576.90	P	P/R Ded	luctio	on (\$	38.46	6 Bi-We	ekly)								
s	UBTOTAL of Receipts This Page (optional)				►			7		9	297.	.22							
т	OTAL This Period (last page this line number only	/)						-											

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11			for each category of the Detailed Summary Page		1 1a		11b	11c	12	47			
	y information copied from such Reports and Si for commercial purposes, other than using the												
	NAME OF COMMITTEE (In Full)												
\rangle	UnitedHealth Group Incorporate	ed PAC (l	UnitedHealth Group P	AC)									
Α.	Full Name of Individual (Last, First, Middle Init KIDAMBI, NARASIMHAN, , ,	ial) or Full O	Organization Name		Date of Receipt								
	Mailing Address 18477 85TH AVE N				07 31 2022								
	City MAPLE GROVE	State MN	Zip Code 55311-1663						6386582 is Period	1			
	FEC ID number of contributing federal political committee.	С			<u> </u>		7		40.	00			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Bus Anlys		M	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00]	P/R Ded	uctic	on (\$20.0	00 Bi-We	ekly)				
в.	Full Name of Individual (Last, First, Middle Init LOVELADY, JOHN, , ,	ial) or Full O	Organization Name		Date of Receipt								
	Mailing Address 5378 BUENA VISTA DR	Ototo		07 / 31 / 2022 Transaction ID : PR2552964265821									
	City FRISCO	State TX	Zip Code 75034-2253	-						1			
	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	Occ SVF		Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884,50] F	P/R Ded	uctic	on (\$192	30 Bi-W	Bi-Weekly)				
С.	Full Name of Individual (Last, First, Middle Init MORRIS, MICHAEL, , ,	ial) or Full O	Organization Name		Date of	Re	ceipt						
	Mailing Address 2624 N HARTLAND COURT				07	1	D D D 31	/ Y	y y 2022	Y			
	City CHICAGO	State IL	Zip Code 60614-4955				-		96506582 is Period	1			
	FEC ID number of contributing federal political committee.	С			<u> </u>		9	, ,	30.	76			
	Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	SB F	upation (for Individual) KA VP SIs Acct Mgt		M	emo	Item						
	Primary General Other (specify)	Aggregate	P/R 230.70				P/R Deduction (\$15.38 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)			•			,	. ,	455.3	36			
т	OTAL This Period (last page this line number of	only)		•				-					

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111	TEMIZED RECEIPTS for each category of the Detailed Summary Page				K 11a		11b	11c	12					
	y information copied from such Reports and Stat for commercial purposes, other than using the n													
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	InitedHealth Group PA	NC)										
A.	Full Name of Individual (Last, First, Middle Initial PAULUS, LESLIE, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt							
	Mailing Address 305 E TUCKEY LN				07 31 2022									
	City PHOENIX	State AZ	Zip Code 85012-1048						9 6526582 is Period					
	FEC ID number of contributing federal political committee.	С						y	76.	92				
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Med	pation (for Individual) Dir		Me	emo	Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 576.90	I F	P/R Dedu	uctio	on (\$38.	.46 Bi-We	eekly)					
в.	Full Name of Individual (Last, First, Middle Initial POTTER, DONALD, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt							
	Mailing Address 116 FULLER LANE	1			07 / D D / Y Y Y Y 2022									
	City WINNETKA	State IL	Zip Code 60093-4213						6546582 is Period					
	FEC ID number of contributing federal political committee.	С			69.22									
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) /P CInt Relationship Prd		Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ , 519.15	F	P/R Dedu	uctic	on (\$34.	61 Bi-We	ekly)					
с.	Full Name of Individual (Last, First, Middle Initia SAMSEL, KRISTINE, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt							
	Mailing Address 91 WAVERLY RD				07	/	31		y y 2022					
	City HUNTINGTON	State CT	Zip Code 06484-5835	_					96576582 is Period					
	FEC ID number of contributing federal political committee.	С			<u> </u>		, .	, ,	28.	00				
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) en Mgmt		Me	emo	ttem							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.00		P/R Ded	uctio	on (\$14	.00 Bi-We	eekly)					
s	UBTOTAL of Receipts This Page (optional)		•	•			, .	. ,	174.	14				
т	OTAL This Period (last page this line number on	ly)	••••••	-										

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111	EMIZED RECEIPTS			X 11a		11b	11c	12						
	y information copied from such Reports and Sta for commercial purposes, other than using the r													
$\left\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (L	InitedHealth Group PA	AC)										
A.	Full Name of Individual (Last, First, Middle Initia TINKER, ANN, , ,	al) or Full Or	ganization Name		Date of	Re	ceipt							
	Mailing Address 137 AMOHI WAY				07 31 2022									
	City LOUDON	State TN	Zip Code 37774-3009	_					96686582 is Period	1				
	FEC ID number of contributing federal political committee.	С			<u> </u>				28.	00				
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Compli		Me	emo	Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00		P/R Ded	uctio	on (\$14.	00 Bi-We	ekly)					
в.	Full Name of Individual (Last, First, Middle Initia WACKER, AARON, , ,	al) or Full Or	ganization Name		Date of	Re	ceipt							
	Mailing Address 4704 CAVAN ROAD	01-1-	The Oak		07 / 31 / 2022 Transaction ID : PR2552967065821									
	City MOUND	State MN	Zip Code 55364-1877						6706582 is Period	1				
	FEC ID number of contributing federal political committee.	С				. 01			28.	00				
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) rincipal Engineer, TLCP	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 210.00]	P/R Dedu	uctic	on (\$14.)	00 Bi-We	ekly)					
C.	Full Name of Individual (Last, First, Middle Initia PROSKAUER, DANIEL, , ,	al) or Full Or	ganization Name		Date of	Re	ceipt							
	Mailing Address 240 DERBY STREET				м м 07	/	31	/ Y	y y 2022	Y				
	City NEWTON	State MA	Zip Code 02465-1006						47506582 is Period	1				
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .	, ,	38.	46				
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) rchitecture	Memo Item										
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 288.45	P/R Deduction (\$19.23 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			•			, .		94.4	46				
т	OTAL This Period (last page this line number or	nly)	••••••	•				1.45						

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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 PA	AC)						
Full Name of Individual (Last, First, Middle I ZERAFA, DANIEL, , ,	nitial) or Full O	rganization Name	Date	of Re	eceipt				
Mailing Address 61234 ADMIRAL DRIVE			07	M /	D D 31	/ Y	ү ү 2022	Y	
City WASHINGTON TOWNSHIP	State MI	Zip Code 48094-1242					17576582 is Period	1	
FEC ID number of contributing federal political committee.	С				-	-	28.0	00	
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) IT	- D 1	Memo	o Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R De	educti	on (\$14.	00 Bi-We	ekly)		
Full Name of Individual (Last, First, Middle I B. REIDY, GREGORY, , ,	nitial) or Full O	rganization Name	Date	of Re	eceipt				
Mailing Address 1005 BLAKEFIELD DRIVE			07	M /	, 31	/ Y	y y 2022	Y	
City BRENTWOOD	State TN	Zip Code 37027-8479		Transaction ID : PR2554013365821 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	- D 1	Memo	tem				
Receipt For: Primary General	Aggregate	Year-to-Date ▼	P/R De	ducti	on (\$192	2.30 Bi-W	eekly)		
Other (specify) ▼		, 2884.50							
Full Name of Individual (Last, First, Middle I ALEXANDER, JOY, , ,	nitial) or Full O	rganization Name	Date	of Re	eceipt				
Mailing Address 5116 NORTH TIOGA WAY			M 07		D D D 31		2022 Y		
City LAS VEGAS	State NV	Zip Code 89149-5830					06416582 is Period	1	
FEC ID number of contributing federal political committee.	С				, .	. ,	28.0	00	
Name of Employer (for Individual) Health Plan of Nevada	Occi Dir N	upation (for Individual) Aktg		Memo	o Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.00	P/R De	educti	on (\$14.	00 Bi-We	ekly)		
SUBTOTAL of Receipts This Page (optional)							440.6	60	
TOTAL This Period (last page this line numbe	r only)								

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

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	Use separate schedule(s)		(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
			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. CLUTE, DANIEL, , ,	e Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 7756 N 85TH STREET			07 31 2022
City OMAHA	State NE	Zip Code 68122-1281	Transaction ID : PR2560064465821 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		76.92
Name of Employer (for Individual) Optum Services, Inc	Occ	upation (for Individual) I Dir	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)
Full Name of Individual (Last, First, Middle B. GAZELEY, PAULA, , ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 36 MAYFAIR ROAD			07 / D D / Y Y Y Y Y 2022
City WYNANTSKILL	State NY	Zip Code 12198-8018	Transaction ID : PR2560064865821 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) CInt Svc Acct Mgt	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. GIANCURSIO, DONALD, , ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 72 MIDNIGHT RIDGE DR			07 / D D / Y Y Y Y Y 2022
City LAS VEGAS	State NV	Zip Code 89135-1680	Transaction ID : PR2560064965821 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 ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)		489.52
TOTAL This Period (last page this line numl	per only)		

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using			erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group PA	NC)
Full Name of Individual (Last, First, Middle A. LIPPMAN, SHELDON, , ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 55 CLIFFIELD ROAD			07 / D D / Y Y Y Y 2022
City BEDFORD	State NY	Zip Code 10506-1210	Transaction ID : PR2560065465821
		10300-1210	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		194.00
Name of Employer (for Individual) United HealthCare Services Inc	Occi Mec	upation (for Individual) I Dir	Memo Item
Receipt For:	Aggregate	Year-to-Date V	
Primary General Other (specify) ▼		1455.00	P/R Deduction (\$97.00 Bi-Weekly)
Full Name of Individual (Last, First, Middle B. LOBERG, ANGELA, , ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 2837 EAST PARK PLACE			07 31 2022
City	State	Zip Code	Transaction ID : PR2560065565821
MILWAUKEE	WI	53211-3845	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		76.92
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs Acct Mgt	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. MARONEY, KEVIN, , ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 5052 NORMAN DRIVE			07 31 2022
City	State	Zip Code	Transaction ID : PR2560065765821
MINNETONKA	MN	55345-4636	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		28.00
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Gen Counsel	Memo Item
Receipt For:			
Primary General Other (specify)	Aggregale	Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)			298.92

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the n			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	(C)
Α.	Full Name of Individual (Last, First, Middle Initia MILICH, DAVID, , ,	l) or Full O	rganization Name	Date of Receipt
	Mailing Address 2702 BIRCHMERE COURT			07 31 / Y Y Y Y Y 2022
	City KATY	State TX	Zip Code 77450-1303	Transaction ID : PR2560066065821
			11430-1303	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) ▼		2884.50	P/R Deduction (\$192.30 Bi-Weekly)
В.	Full Name of Individual (Last, First, Middle Initia VAIL, DENISE, , ,	l) or Full O	rganization Name	Date of Receipt
	Mailing Address 35 CLEVELAND AVENUE			07 31 2022
	City	State	Zip Code	Transaction ID : PR2560066865821
	SAYVILLE	NY	11782-1322	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		28.00
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) CInt Svc Acct Mgt	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi-Weekly)
с.	Full Name of Individual (Last, First, Middle Initia DICKMAN, KRISTA, , ,	l) or Full O	rganization Name	Date of Receipt
	Mailing Address 2533 ONYX DRIVE			07 31 Y Y Y Y Y
	City	State	Zip Code	Transaction ID : PR2560398165821
	SHAKOPEE	MN	55379-2770	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		28.00
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 'roj Mgr III	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)			440.60
т	OTAL This Period (last page this line number on	ıly)		

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

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	EMIZED RECEIPTS		for each cat Detailed Sur		X 11a 11b 11c 12 13 14 15 16 17							
	y information copied from such Reports and S for commercial purposes, other than using the				erson for the purpose of soliciting contributions							
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	JnitedHeal	th Group PA	.C)							
<u>А.</u>	Full Name of Individual (Last, First, Middle Ini NOEL, TIMOTHY, , ,	tial) or Full C	organization Nar	ne	Date of Receipt							
	Mailing Address 4316 FREMONT AVENUE SC	DUTH			07 31 2022							
	City MINNEAPOLIS	State MN	Zip Code 55409-17	721	Transaction ID : PR2560398865821 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 Indi Segment CEO	ividual)	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	2884.50	P/R Deduction (\$192.30 Bi-Weekly)							
в.	Full Name of Individual (Last, First, Middle Ini WULF, ROBERT, , ,	tial) or Full C	organization Nar	ne	Date of Receipt							
	Mailing Address 622 N 11TH ST				07 / D D / Y Y Y Y 2022							
	City WAUSAU	State WI	Zip Code 54403-50	04	Transaction ID : PR2560398965821 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С			28.08							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Ind Gen Mgmt	ividual)	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	210.60	P/R Deduction (\$14.04 Bi-Weekly)							
С.	Full Name of Individual (Last, First, Middle Ini OBRIEN, PATRICK, , ,	tial) or Full C	organization Nar	ne	Date of Receipt							
	Mailing Address 33 BARRINGTON DRIVE				07 / D D / Y Y Y Y Y 2022							
	City BEDFORD	State NH	Zip Code 03110-56	01	Transaction ID : PR2560821465821 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С			28.00							
	Name of Employer (for Individual) United HealthCare Services Inc	Occ VP 0	upation (for Indi Ops	ividual)	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼	210.00	P/R Deduction (\$14.00 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)			•••••	440.68							
т	OTAL This Period (last page this line number	only)		•••••								

Use separate schedule(s)

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			Use separate schedule(s)	(check only one)						
	ZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12	
	mation copied from such Reports and Stat mmercial purposes, other than using the na									
<u></u>	E OF COMMITTEE (In Full)			10 50		uno			T COMMIN	ee.
\ \	tedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)						
	ame of Individual (Last, First, Middle Initial O, MARIE, , ,) or Full Or	rganization Name		Date of	Re	ceipt			
	g Address 28012 CAPTIVA SHELL LOOP				м м 07	/	D 31) / Y	Y Y 2022	Y
City BON	TA SPRINGS	State FL	Zip Code 34135-8624						82156582 iis Period	1
	D number of contributing al political committee.	C					7		28.	00
United	of Employer (for Individual) HealthCare Services Inc		upation (for Individual) CInt Svc Acct Mgt		Me	mo	Item			
	pt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P	/R Dedu	uctic	on (\$14.	.00 Bi-We	eekly)	
	lame of Individual (Last, First, Middle Initial ID, BRIAN, , ,) or Full Or	rganization Name		Date of	Re	ceipt			
Mailin	g Address 11471 NORTH SHORE DRIVE	1			м м 07	/	31		y y 2022	Y
City GRAI	NTSBURG	State WI	Zip Code 54840-8059						15766582 iis Period	1
	D number of contributing al political committee.	С					7		78.	00
	e of Employer (for Individual) I HealthCare Services Inc	Occu Dir T	upation (for Individual) Tax	_	Me	mo	ltem			
Recei	pt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 585.00	P	/R Dedu	ictio	ın (\$39.	00 Bi-We	ekly)	
	lame of Individual (Last, First, Middle Initial) or Full Or	rganization Name		Date of	Re	ceipt			
	g Address 201 ADAMS CT	1-			м м 07	/	31		y y 2022	
City COL	EYVILLE	State TX	Zip Code 76034-6811				-		80256582 iis Period	1
	D number of contributing al political committee.	С					y	, ,	76.	92
Unite	of Employer (for Individual) d HealthCare Services Inc		upation (for Individual) SLS SB and Spec Ben		Me	emo	ltem			
	pt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P	/R Dedu	uctio	on (\$38	.46 Bi-We	eekly)	
SUBTO	TAL of Receipts This Page (optional)		•				,	.,	182.	92
TOTAL	This Period (last page this line number on	y)	▶				,			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 12 14 15 16 17						
			13 14 15 16 17 version for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpo	orated PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Midd CARLSON, CHRISTOPHER, , ,	lle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 10618 WEST RIVER RC	DAD		07 31 2022						
City BROOKLYN PARK	State MN	Zip Code 55443-1233	Transaction ID : PR2564802665821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		192.30						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Innovation	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1442.25	P/R Deduction (\$96.15 Bi-Weekly)						
Full Name of Individual (Last, First, Midd B. HANSEN, PAUL, , ,	lle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 4960 SHADY ISLAND C	IRCLE		07 31 2022						
City	State MN	Zip Code	Transaction ID : PR2564802765821						
		55364-9218	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		194.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Grp Controller	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1455.00	P/R Deduction (\$97.00 Bi-Weekly)						
Full Name of Individual (Last, First, Midd GOODWIN, MARYELLEN, , ,	lle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3216 PLAYERS VIEW C	1		07 31 2022						
City LONGWOOD	State FL	Zip Code 32779-3154	Transaction ID : PR2564802965821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) /P SIs Acct Mgmt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (option	al)		414.30						
TOTAL This Period (last page this line nur	mber only)								

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(cheo	(check only one)						
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b 14	11c	12	17
	y information copied from such Reports and Sta for commercial purposes, other than using the r				or the p		oose of	soliciting	contribu	itions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	AC)						
A.	Full Name of Individual (Last, First, Middle Initia MARDEN, PAUL, , ,	l) or Full Or	rganization Name	D	ate of	Re	ceipt			
	Mailing Address 9 VAN MULEN STREET				^M 07	/	D 31	/ Y	ү ү 2022	Ŷ
	City MAHWAH	State NJ	Zip Code 07430-2977					PR25648 eceipt th		
	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		Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/I	R Dedu	uctio	on (\$192	2.30 Bi-W	/eekly)	
в.	Full Name of Individual (Last, First, Middle Initia MOQUIST, DARREN, , ,	l) or Full Or	rganization Name	D	ate of	Re	ceipt			
	Mailing Address 5313 MINNEHAHA BLVD	01-1-	7		м м 07	/	31	/ Y	y y 2022	Ŷ
	City EDINA	State MN	Zip Code 55424-1406				-	PR25648 eceipt th		
	FEC ID number of contributing federal political committee.	С					1		384.	_
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) I Regnl Pres	1	Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/F	R Dedu	uctic	on (\$192	2.30 Bi-W	'eekly)	
С.	Full Name of Individual (Last, First, Middle Initia BELLMAN, MARK, , ,	l) or Full Or	rganization Name	D	ate of	Re	ceipt			
	Mailing Address 9120 BRANCH HOLLOW DR				^M 07	/	D 31	/ Y	ү ү 2022	Ŷ
	City DALLAS	State TX	Zip Code 75243-7510					PR2564		
	FEC ID number of contributing federal political committee.	С					y	, y	28.	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) /P SIs Acct Mgmt		Me	emo	Item			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.00	P/I	R Dedu	uctio	on (\$14.	00 Bi-We	ekly)	
s	UBTOTAL of Receipts This Page (optional)						9		797.	20
т	OTAL This Period (last page this line number or	nly)	••••••	. [7	-		

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 45 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			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle CARTER, WILLIAM, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1363 CHIPPENDALE RD			07 31 Y Y Y Y Y 07 31 2022						
City HOUSTON	State TX	Zip Code 77018-5257	Transaction ID : PR2565448765821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs Acct Mgt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. KUNST, THOMAS, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 4872 103RD STREET			07 31 Y Y Y Y Y						
City PLEASANT PRAIRIE	State WI	Zip Code 53158-6516	Transaction ID : PR2566302165821						
FEC ID number of contributing	_	33138-0310	Amount of Each Receipt this Period						
federal political committee.	C		153.84						
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 ▼ 1153,80	P/R Deduction (\$76.92 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. MANSUKHANI, NEIL, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2681 N FLAMINGO RD # 1006S	1-		07 / D D / Y Y Y Y Y 2022						
City PLANTATION	State FL	Zip Code 33323-1766	Transaction ID : PR2567129465821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Dir SIs Acct Mgmt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			258.76						
TOTAL This Period (last page this line number	er only)								

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 46 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
	y information copied from such Reports and Stater for commercial purposes, other than using the nar									
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I	PAC (L	JnitedHealth Group PA	.C)						
Α.	Full Name of Individual (Last, First, Middle Initial) STEARNS, MATTHEW, , ,	or Full Or	rganization Name	Date of Receipt						
	Mailing Address 5118 FAIRGLEN LANE			07 / D D / Y Y Y Y Y 2022						
	City CHEVY CHASE	State MD	Zip Code 20815-6517	Transaction ID : PR2571777965821						
	CHEVICHASE		20013-0317	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) Comm	Memo Item						
	Receipt For: A	garegate	Year-to-Date 🔻							
	Primary General Other (specify) ▼		2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
В.	Full Name of Individual (Last, First, Middle Initial) PARRILLO, CHRISTOPHER, , ,	or Full Or	rganization Name	Date of Receipt						
	Mailing Address 12 WOODSUM DRIVE	07 / D D / Y Y Y Y 2022								
	5	State	Zip Code	Transaction ID : PR2571778265821						
	NEWBURY	NH	03255-6232	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		154.00						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item						
	Receipt For: A Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 1155.00	P/R Deduction (\$77.00 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Initial)	or Full Or	rganization Name	Date of Receipt						
	Mailing Address 6890 CANTERBURY LANE			07 31 2022						
	3	State	Zip Code	Transaction ID : PR2571778365821						
	EDEN PRAIRIE	MN	55346-2904	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		78.00						
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
	Receipt For: A	aareaate `	Year-to-Date ▼							
	Primary General Other (specify)		585.00	P/R Deduction (\$39.00 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)			616.60						
т	OTAL This Period (last page this line number only)	·····							

SCHEDULE A (FEC Form 3X) _____ _

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11		11b	11c	12	_		
Any information copied from such Reports and or for commercial purposes, other than using the				he pu						
NAME OF COMMITTEE (In Full)				COILLI	DULIONS	ITOITI SUCI	1 commu			
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	e of R	eceipt					
Mailing Address W132N6475 MARACH RD			М 0		/ D 31	D / Y	y y 2022	Y		
City MENOMONEE FALLS	State WI	Zip Code 53051-6085					97876582 is Period	1		
FEC ID number of contributing federal political committee.	С				-y 1		384.6	50		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Mem	o Item					
Receipt For: Primary General Other (specify) ▼	Year-to-Date ▼ 2884.50	P/R D	educt	ion (\$19	2.30 Bi-W	/eekly)				
Full Name of Individual (Last, First, Middle I ROBINSON, MARCUS, , ,	nitial) or Full C	rganization Name	Date	e of R	eceipt					
Mailing Address 590 SPENDER TRACE			0		31		y y 2022	Y		
	State GA	Zip Code					58896582 [,]	I		
	GA 30350-5018			Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С						28.0	00		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Sales IFP		Mem	o Item					
Receipt For:	Aggregate	Year-to-Date 🔻		-						
Other (specify) ▼		210.00	P/R Deduction (\$14.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I JACQUET, SHAUN, , ,	nitial) or Full C	rganization Name	Date	of R	eceipt					
Mailing Address 4332 FOREST RIDGE DRIN		Zie Oode		7	31		үүү 2022			
City SUAMICO	State WI	Zip Code 54313-8557					58936582 is Period	1		
FEC ID number of contributing federal political committee.	С				y	. ,	28.0	00		
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		Mem	io Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.00	P/R [)educt	tion (\$14	.00 Bi-We	eekly)			
SUBTOTAL of Receipts This Page (optional)					,	. ,	440.6	50		
TOTAL This Period (last page this line numbe	r only)					. .				

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 11						
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 (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle CARLSON, KEVIN, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 4511 BROWNDALE AVEN	UE		M M / D D / Y Y Y Y Y 07 31 2022						
City EDINA	State MN	Zip Code 55424-1142	Transaction ID : PR2572590065821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		192.30						
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 ▼ 1442.25	P/R Deduction (\$96.15 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. BECK, JOANNE, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 117 GLORIA LANE			07 / D D / Y Y Y Y Y 07 31 2022						
City	State	Zip Code	Transaction ID : PR2572590365821						
CADIZ	KY	42211-8824	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.08						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item						
Receipt For: Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$14.04 Bi-Weekly)						
Other (specify)		210.60							
Full Name of Individual (Last, First, Middle OBRIEN, CHRISTINE, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 931 FRENCH ST			07 / D D / Y Y Y Y 2022						
City NEW ORLEANS	State LA	Zip Code 70124-3806	Transaction ID : PR2572590665821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			248.38						
TOTAL This Period (last page this line number	er only)								

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12									
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)		duress of any political committee										
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle MILLER, KIMBERLEY, , ,	e Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 16 CELONOVA PLACE			07 / D D / Y Y Y Y 2022									
City FOOTHILL RANCH	State CA	Zip Code 92610-1942	Transaction ID : PR2572591265821 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		28.00									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Underwriting	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi-Weekly)									
Full Name of Individual (Last, First, Middle WIFFLER, THOMAS, , ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 1421 SOMERFIELD DRIV			07 / D D / Y Y Y Y Y 2022									
City BOLINGBROOK	State	Zip Code 60490-3207	Transaction ID : PR2572992765821									
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)	Memo Item									
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle C. QUINN, PATRICK, , ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 16933 TODD EVAN TRAI			07 / D D / Y Y Y Y 31 2022									
City CHESTERFIELD	State MO	Zip Code 63005-4641	Transaction ID : PR2573518765821 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		96.15									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item									
Receipt For: Primary General Other (specify)												
SUBTOTAL of Receipts This Page (optional))		508.75									
TOTAL This Period (last page this line numb	per only)											

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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(check only one)

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			for each category of the Detailed Summary Page	×	11a 13	\square] 11b 14		11c 15	12	17	
	y information copied from such Reports and State for commercial purposes, other than using the na				or the		pose		oliciting	contribu	tions	
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	UnitedHealth Group PA	C)	_	_	_	_	_	_	_	
Α.	Full Name of Individual (Last, First, Middle Initial) BENSON, MICHAEL, , ,	or Full C	Organization Name	D	Date of Receipt							
	Mailing Address 2206 EAGLE VALLEY LN			07 31 2022 Transaction ID : PR2573518965821 Amount of Each Receipt this Period								
	City	State	Zip Code									
	WAUSAU	WI	54403-8154									
	FEC ID number of contributing federal political committee.	С		28.84								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) to Dir SIs Ops	1[Me	Memo Item						
	Receipt For:		•	-								
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 216.30	P/R Deduction (\$14.42 Bi-Weekly)								
В.	Full Name of Individual (Last, First, Middle Initial) SHAW, AMY, , ,	or Full C	Organization Name	D	ate of	Re	eceip	ot				
	Mailing Address 11844 DUNHILL ROAD		1	м м 07	/	D	31	/ Y	y y 2022	Y		
	City EDEN PRAIRIE	State MN	Zip Code 55344-3238							7136582 is Period		
	FEC ID number of contributing federal political committee.	C				-		-g	28.	08		
	Name of Employer (for Individual) United HealthCare Services Inc	Occ Bus	Memo Item									
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initial) HARE, LESLIE, , ,	or Full C	Organization Name	D	ate of	Re	eceip	ot				
	Mailing Address 9029 SHEEP RANCH CT				^M 07	/	D	31	/ Y	y y 2022	Y	
	City LAS VEGAS	State NV	Zip Code 89143-5432				-			97946582		
		С			mount	υſ	⊏ac		Jeipt th	is Period 28.	_	
	Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) Gen Mgmt		Me	emo	o Itei	m				
	Receipt For: A Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)			ſ						84.	92	
	OTAL This Period (last page this line number only			Ī					- 7 - 7			

Use separate schedule(s)

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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. MASTERS, SCOTT, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 1894 VILLAGE GLEN DRI	/E		07 31 Y Y Y Y Y 07 31 2022								
City SAINT JOHNS	State FL	Zip Code 32259-9215	Transaction ID : PR2574979665821 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		77.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clms	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 577.50	P/R Deduction (\$38.50 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. WOHNOUTKA, CHRISTOPHER,		rganization Name	Date of Receipt								
Mailing Address 17597 HIBISCUS AVE			07 31 Y Y Y Y Y 2022								
City LAKEVILLE	State MN	Zip Code 55044-3906	Transaction ID : PR2574981965821 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.92								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Tax	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼	P/R Deduction (\$38.46 Bi-Weekly)								
Other (specify)	L	576.90									
C. SIMPSON, TRENT, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 3111 NORCREST AVE N			07 / D D / Y Y Y Y 31 2022								
City STILLWATER	State MN	Zip Code 55082-1779	Transaction ID : PR2574985065821 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		76.92								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			230.84								
TOTAL This Period (last page this line numb	er only)										

Use separate schedule(s)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
or for commercial purposes, other that			erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)	orporated PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, A. CIANFROCCO, HEATHER, , ,	, Middle Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 913 CHAMPLAIN	PLACE		07 31 Y Y Y Y Y 07 31 2022							
City	State	Zip Code	Transaction ID : PR2574986265821							
GIBSONIA		15044-8079	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:	Aggregate	Year-to-Date ▼								
Primary General Other (specify) ▼		2884.50	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, B. BURNETT, JAMIE, , ,	, Middle Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 4625 EWING AVE	NUE SOUTH		07 31 2022							
City	State	Zip Code	Transaction ID : PR2574988265821							
MINNEAPOLIS	MN	55410-1745	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		78.00							
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) IT	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 585.00	P/R Deduction (\$39.00 Bi-Weekly)							
Full Name of Individual (Last, First, C. STRAIT, DENISE, , ,	, Middle Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 4362 SPORTSMA	N CLUB RD		07 31 2022							
City	State	Zip Code	Transaction ID : PR2574989365821							
JOHNSTOWN	OH	43031-9461	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		28.06							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	P/R Deduction (\$14.03 Bi-Weekly)								
SUBTOTAL of Receipts This Page (pptional)		490.66							
TOTAL This Period (last page this lir	ne number only)	•								

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
			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 A. LANG, HEATHER, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 1210 RIVER TERRACE I	DRIVE		07 31 2022								
City BLOOMINGTON	State MN	Zip Code 55431-4230	Transaction ID : PR2574991465821 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		76.92								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) uty Gen Counsel Mgr	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middl B. NEWKIRK, MEGHAN, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 10162 BEAVER CIR			07 31 Y Y Y Y Y 2022								
City CYPRESS	State CA	Zip Code 90630-4113	Transaction ID : PR2575008765821								
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In Growth Off	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)								
Full Name of Individual (Last, First, Middl C. SJOBLAD, BETHANY, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 100 2ND STREET NE #5			07 / D D / Y Y Y Y 2022								
City MINNEAPOLIS	State MN	Zip Code 55413-2541	Transaction ID : PR2575009165821 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) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify)	P/R Deduction (\$192.30 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optiona	l)		489.60								
TOTAL This Period (last page this line num	ber only)										

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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				n category of t d Summary Pa		×	11a 13		11b 14		11c 15	12	17	
	y information copied from such Reports and State for commercial purposes, other than using the na						or the		oose		oliciting	contribu	tions	
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	JnitedH	lealth Grou	up PAC	C)								
Α.	Full Name of Individual (Last, First, Middle Initial) FLOWER, MARTIN, , ,		rganization	Date of Receipt										
	Mailing Address N54W20825 CARTERS CROSSI		Zin O	07 / D D / Y Y Y Y Y 07 31 2022										
	City MENOMONEE FALLS	State WI	Zip Co 530	51-6281		Transaction ID : PR2575011665821 Amount of Each Receipt this Period								
	FFO ID number of contribution	C				30.76								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Dir Acct Mg	r Individual) gmt			Me	emo	Iter	m				
	Receipt For: A Primary General Other (specify) ▼	\ggregate	Year-to-Da	P/R Deduction (\$15.38 Bi-Weekly)										
B.	Full Name of Individual (Last, First, Middle Initial) KEMMER, HEIDI, , ,	or Full C	organization	Name		Date of	Re	ceip	ot					
	Mailing Address 2211 WEST ROCKROSE PLACE						™ _ M 07	/	D	а 31	/ Y	y y 2022	Y	
	City CHANDLER	State AZ	Zip Co 8524	ode 18-4208					-			2136582 is Period	1	
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) Dir, Health Plan Operations							,		-	28.	28	
	Name of Employer (for Individual) United HealthCare Services Inc							emo	Iter	m				
	Receipt For: µ Primary General Other (specify) ▼	Aggregate	Year-to-Da	te ▼ 212	.10	P/	R Dedu	uctio	on (\$	\$14.14	4 Bi-We	ekly)		
с.	Full Name of Individual (Last, First, Middle Initial) MADDOX, JEFFREY, , ,	or Full C	rganization	Name			Date of	Re	ceip	ot				
	Mailing Address 7810 HANOVER ST									31	/ Y	y y 2022	Y	
	City DALLAS	State TX	Zip Co 7522	ode 5-8220		_						03956582	1	
		C					anount	of	⊏aC	II Ke	ceipt th	is Period 384.	60	
	Name of Employer (for Individual) United HealthCare Services Inc	Occ Hlth		Me	emo	Ite	m							
	Receipt For: A Primary General Other (specify)	Aggregate	Year-to-Da	te ▼ 2884.		P/	R Ded	uctic	on (S	\$192.	30 Bi-W	/eekly)		
s	UBTOTAL of Receipts This Page (optional)				····· ►	[7		9	443.	64	
т	OTAL This Period (last page this line number only	/)			►				,		-	4		

SCHEDULE A (FEC Form 3X) DEOFIDTO

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IT.			Use separate schedule(s)	(ch	eck only	y or	ne)						
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page		11a		11b	11c	12	Г	_، _		
	y information copied from such Reports and Sta for commercial purposes, other than using the n									butio			
	NAME OF COMMITTEE (In Full)												
\rangle	UnitedHealth Group Incorporated	I PAC (L	UnitedHealth Group PA	NC)									
A.	Full Name of Individual (Last, First, Middle Initia HEATH, SEAN, , ,	l) or Full Or	Organization Name		Date of	Re	ceipt						
	Mailing Address 1292 CASTLE CT				07 31 2022								
	City GOLDEN VALLEY	State MN	Zip Code 55427-4453	_	Transaction ID : PR2575048765821 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С							2	28.08			
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Compli		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initia FITZPATRICK, JOSEPH, , ,	l) or Full Or	Organization Name		Date of	Re	ceipt						
	Mailing Address 3936 CAMPELLO CURVE	1			м м 07	1	31	/ Y	y 2022				
	City CHASKA	State MN	Zip Code 55318-4639	-				PR25750		-			
	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	Occu VP F	upation (for Individual) Fin		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)									
С.	Full Name of Individual (Last, First, Middle Initia	l) or Full Or	Organization Name		Date of	Re	ceipt						
	Mailing Address 14930 SW 39 ST	-			07 ^M	1	31	/ Y	2022]		
	City DAVIE	State FL	Zip Code 33331-2767					PR2575					
	FEC ID number of contributing federal political committee.	С			<u> </u>		y		38	34.60			
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		M	emo	ltem						
	Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 2884.50					uctio	on (\$192	2.30 Bi-V	/eekly)				
s	UBTOTAL of Receipts This Page (optional)						,		79	7.28			
т	OTAL This Period (last page this line number or	lly)	••••••	-						-			

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	·	Use separate schedule(s)	(check only one)								
	5	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 (Ir UnitedHealth Grou		JnitedHealth Group PA	AC)								
Full Name of Individual (La CLACKO, MARY ANN,	st, First, Middle Initial) or Full O , ,	rganization Name	Date of Receipt								
Mailing Address 6358 COT	EAU TRAIL		07 31 Y Y Y Y Y 2022								
City EDEN PRAIRIE	State MN	Zip Code 55344-5205	Transaction ID : PR2575057965821 Amount of Each Receipt this Period								
FEC ID number of contribut federal political committee.	ing C		115.38								
Name of Employer (for Indi Optum Services, Inc	,	upation (for Individual) Compli	Memo Item								
Receipt For: Primary Ger Other (specify) ▼		Year-to-Date ▼ 519.21	P/R Deduction (\$57.69 Bi-Weekly)								
Full Name of Individual (La B. MCCARTY, CARY, ,	st, First, Middle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 8800 RUM			07 / D D / Y Y Y Y Y 2022								
City NORTH RICHLAND HILLS	State TX	Zip Code 76182-6131	Transaction ID : PR2575059465821								
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period								
Name of Employer (for Indi United HealthCare Services	laa '	upation (for Individual) Gen Mgmt	Memo Item								
Receipt For: Primary Ger Other (specify) ▼		Year-to-Date ▼ 585.00	P/R Deduction (\$39.00 Bi-Weekly)								
Full Name of Individual (La C. ALLEN, MARK, , ,	st, First, Middle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 11359 EN			07 / D D / Y Y Y Y Y 2022								
City EDEN PRAIRIE	State MN	Zip Code 55347-2862	Transaction ID : PR2575060265821 Amount of Each Receipt this Period								
FEC ID number of contribut federal political committee.	ing		153.84								
Name of Employer (for Indi Optum Services, Inc	vidual) Occu M A	upation (for Individual) VP	Memo Item								
Receipt For: Primary Ger Other (specify)	eral Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$76.92 Bi-Weekly)								
SUBTOTAL of Receipts This	Page (optional)	••••••	347.22								
TOTAL This Period (last page	this line number only)										

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	EMIZED RECEIPTS			or each category of the Detailed Summary Page	3	_	11a 13] 11 14	ŀ	11	1c 5		12 16	17
	y information copied from such Reports and Sta for commercial purposes, other than using the										solic	citing	, con	tribut	ions
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (I	Uni	tedHealth Group PA	C)										
۲ <u>ــــــــــــــــــــــــــــــــــــ</u>	Full Name of Individual (Last, First, Middle Initia MCEVOY, AMY, , ,	al) or Full C	Drgai	nization Name		Date of Receipt									
	Mailing Address 11230 CEDAR POINTE DR S					Mark / D / Y							Y		
	City MINNETONKA	State MN		Zip Code 55305-2983											
	FEC ID number of contributing federal political committee.	С	40.00												
	Name of Employer (for Individual) United HealthCare Services Inc			ion (for Individual) Mgmt	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 300.00	P/R Deduction (\$20.00 Bi-Weekly)										
в.	Full Name of Individual (Last, First, Middle Initia CURRIE, ULYSSES, , ,	al) or Full C	Drgar	nization Name	Date of Receipt										
	Mailing Address 8232 GUNNAR DRIVE	State Zin Code						/		D 0) /	Y	y 202	Y 22	Y
	City FULTON	State MD		Zip Code 20759-2218	Transaction ID : PR257506416 Amount of Each Receipt this Pe							1			
	FEC ID number of contributing federal political committee.	C							-	_		,		60.0	00
	Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	Memo Item												
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00						P/R Deduction (\$30.00 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initia ZAETTA, CHRISTOPHER, , ,	al) or Full Organization Name					ate of	f Re	ecei	ipt					
	Mailing Address 214 PRINCE STREET					N	07	1	Ľ	31		Y	202	22 [°]	Y
	City ALEXANDRIA	State VA		Zip Code 22314-3314							PR2				1
	FEC ID number of contributing federal political committee.	С				Ē			,	_		5	Ξ	384.6	60
	Name of Employer (for Individual) Optum Services, Inc	Occ Mkt			М	emo) Ite	em							
	Receipt For: Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 2884.50		P/R	2 Ded	luctio	on	(\$19	2.30	Bi-W	/eekl	y)	
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SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
or for commercial purposes, other than using			erson for the purpose of soliciting contributions to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group PA	νC)							
Full Name of Individual (Last, First, Middle A. VERCHICK, TAMI, , ,	e Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 9916 DUSTY WINDS AV			07 / D D / Y Y Y Y Y 2022							
City LAS VEGAS	State NV	Zip Code 89117-5986	Transaction ID : PR2575068965821							
FEC ID number of contributing federal political committee.	C	09117-0900	Amount of Each Receipt this Period							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ector Technology	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. ISMERT, JENNY, , ,	e Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 8494 E HAWAII LN			07 31 Y Y Y Y Y 2022							
City DENVER	State CO	Zip Code 80231-2732	Transaction ID : PR2575070065821 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		76.92							
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 ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. ENLOW, MARGARET, , ,	e Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 196 SOMERSLY PL			07 / D D / Y Y Y Y Y 2022							
City LEXINGTON	State KY	Zip Code 40515-5717	Transaction ID : PR2575071065821 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.08							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional			181.92							
TOTAL This Period (last page this line num	ber only)	•								

Use separate schedule(s)

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Any in or for NA UI A. NI Mai City DE FEC fed	commercial purposes, other than using the ME OF COMMITTEE (In Full) nitedHealth Group Incorporate Name of Individual (Last, First, Middle In CHOLS, SANDRA, , ,	e name and ac ed PAC (L itial) or Full Or IVE State FL C Occu SVP	InitedHealth Group PA ganization Name Zip Code 33446-2407	X 11a 11b 11c 12 13 14 15 16 erson for the purpose of soliciting contributions is to solicit contributions from such committee. 16 AC) Date of Receipt 7 07 31 2022 Transaction ID : PR2575074565821 Amount of Each Receipt this Period 384.60 384.60 Memo Item							
A. NI Full A. NI Mai City FEC fed Nar Uni	commercial purposes, other than using the ME OF COMMITTEE (In Full) nitedHealth Group Incorporate I Name of Individual (Last, First, Middle In CHOLS, SANDRA, , , iling Address 16900 CROWN BRIDGE DRI	e name and ac ed PAC (L itial) or Full Or IVE State FL C Occu SVP	InitedHealth Group PA ganization Name Zip Code 33446-2407	Date of Receipt 07 / 31 / 2022 Transaction ID : PR2575074565821 Amount of Each Receipt this Period							
A. NA Full A. NI Mai City DE FEC fed	ME OF COMMITTEE (In Full) nitedHealth Group Incorporate Name of Individual (Last, First, Middle In CHOLS, SANDRA, , , iling Address 16900 CROWN BRIDGE DRI CHOLS ADDRA 16900 CROWN BRIDGE DRI C	ed PAC (L itial) or Full Or IVE State FL C Occu SVP	JnitedHealth Group PA ganization Name Zip Code 33446-2407 pation (for Individual)	Date of Receipt 07 ' 31 ' 2022 Transaction ID : PR2575074565821 Amount of Each Receipt this Period 384.60							
A. NI Mai City DE FEC fed	hitedHealth Group Incorporate Name of Individual (Last, First, Middle In CHOLS, SANDRA, , , iling Address 16900 CROWN BRIDGE DRI CLRAY BEACH C ID number of contributing eral political committee. me of Employer (for Individual) ted HealthCare Services Inc ceipt For: Primary General	itial) or Full Or VE State FL C Occu SVP	Zip Code 33446-2407	Date of Receipt 07 ' 31 ' 2022 Transaction ID : PR2575074565821 Amount of Each Receipt this Period 384.60							
A. NI Mai City DE FEC fed Nar Uni	CHOLS, SANDRA, , , ling Address 16900 CROWN BRIDGE DRI CLRAY BEACH C ID number of contributing eral political committee. me of Employer (for Individual) ted HealthCare Services Inc ceipt For: Primary General	VE State FL C Occu SVP	Zip Code 33446-2407 pation (for Individual)	Month / Do / Y YYY Y 07 31 2022 Transaction ID : PR2575074565821 Amount of Each Receipt this Period 384.60							
City DE FE0 fed Nar Uni	C ID number of contributing eral political committee. me of Employer (for Individual) ted HealthCare Services Inc ceipt For: Primary General	State FL C Occu SVP	pation (for Individual)	07 31 2022 Transaction ID : PR2575074565821 Amount of Each Receipt this Period 384.60							
DE FE0 fed	ELRAY BEACH C ID number of contributing eral political committee. me of Employer (for Individual) ted HealthCare Services Inc ceipt For: Primary General	FL C Occu SVP	pation (for Individual)	Amount of Each Receipt this Period 384.60							
fed Nar Uni	eral political committee. ne of Employer (for Individual) ted HealthCare Services Inc ceipt For: Primary General	Occu SVP									
Uni	ted HealthCare Services Inc ceipt For: Primary General	SVP		Memo Item							
Red	Primary General	Aggregate `									
			Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)							
	I Name of Individual (Last, First, Middle In ECK, RALPH, , ,	ganization Name	Date of Receipt								
	iling Address W155 N5314 SHARPTAIL CC			07 / D D / Y Y Y Y 2022							
City		State WI	Zip Code	Transaction ID : PR2575074965821							
			53051-6771	Amount of Each Receipt this Period							
	C ID number of contributing eral political committee.	С		28.08							
Uni	me of Employer (for Individual) ted HealthCare Services Inc		ipation (for Individual) Health Plan Operations	Memo Item							
	ceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 210.60	P/R Deduction (\$14.04 Bi-Weekly)							
	Name of Individual (Last, First, Middle In URNAM, DEBRA, , ,	itial) or Full Or	ganization Name	Date of Receipt							
Mai	iling Address 377 CALABRIA BEACH ST			07 / D D / Y Y Y Y 07 31 2022							
City HE	/ ENDERSON	State NV	Zip Code 89015-2430	Transaction ID : PR2575076265821 Amount of Each Receipt this Period							
	C ID number of contributing eral political committee.	С		28.08							
Op	me of Employer (for Individual) tum Services, Inc		pation (for Individual) lin Ops	Memo Item							
	ceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)							
SUB	TOTAL of Receipts This Page (optional)		•••••	440.76							

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
or for commercial purposes, other than using			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle A. ONEILL, AUDREY, , ,		organization Name	Date of Receipt							
Mailing Address 71 CHESTNUT RIDGE RE			07 / D D / Y Y Y Y Y 2022							
City QUEENSBURY	State NY	Zip Code 12804-7317	Transaction ID : PR2575089465821 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		38.46							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.45	P/R Deduction (\$19.23 Bi-Weekly)							
Full Name of Individual (Last, First, Middle VIESTA, RICHARD, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 1 COMPASS COURT			07 31 Y Y Y Y Y 2022							
City OYSTER BAY	State NY	Zip Code 11771-1602	Transaction ID : PR2575098565821 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		76.92							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Actuary	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle BENARDETTE, DANIEL, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 175 W 60TH ST APT 30C			07 / D D / Y Y Y Y 2022							
City NEW YORK	State NY	Zip Code 10023-7559	Transaction ID : PR2575102865821 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		192.30							
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 ▼ 1442.25	P/R Deduction (\$96.15 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			307.68							
TOTAL This Period (last page this line numb	per only)									

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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(check only one)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
or for commercial purposes, other that			erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)	orporated PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First A. CHAMPION, PHEBE, , ,	, Middle Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 2763 THUNDER E	AY AVE		07 31 Y Y Y Y Y							
City	State NV	Zip Code	Transaction ID : PR2575108365821							
HENDERSON	INV	89052-7001	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		50.00							
Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) Cust Service	Memo Item							
Receipt For:	Aggregate	Year-to-Date V								
Primary General Other (specify) ▼		375.00	P/R Deduction (\$25.00 Bi-Weekly)							
Full Name of Individual (Last, First B. HAYDEN, KARI, , ,	, Middle Initial) or Full C	Prganization Name	Date of Receipt							
Mailing Address 6109 BANEY COU	RT		07 31 2022							
City MINNETONKA	State MN	Zip Code 55345-6301	Transaction ID : PR2575110365821 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		76.92							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ops	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 538.44	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, MADDIGAN, DANIEL, , ,	, Middle Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 25131 TERRACE	LANTERN		07 31 2022							
City	State	Zip Code	Transaction ID : PR2575114865821							
DANA POINT	CA	92629-2864	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		28.08							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Dir Software Engineering	Memo Item							
Receipt For: Primary General Other (specify)	I	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)							
SUBTOTAL of Receipts This Page (pptional)		155.00							
TOTAL This Period (last page this lir	ne number only)	······								

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using	d Statements ma the name and a	∟ ay not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle A. HUNT, ZOE, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 4030 SERANGO COURT			07 31 2022							
City WEST LINN	State OR	Zip Code 97068-2840	Transaction ID : PR2575136265821 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		28.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. MCDONNEL, LISA, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 9664 LAFORET DRIVE			07 / D D / Y Y Y Y Y 2022							
City EDEN PRAIRIE	State MN	Zip Code 55347-3538	Transaction ID : PR2575136365821 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Ntwk	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. DEWALL, PATRICK, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 7662 RIDGEVIEW WAY			07 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
City CHANHASSEN	State MN	Zip Code 55317-4507	Transaction ID : PR2575145365821 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		192.30							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) uty Gen Counsel Mgr	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 865.35	P/R Deduction (\$8.41 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			248.38							
TOTAL This Period (last page this line numb	per only)									

Use separate schedule(s)

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PAGE 63 OF

		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	× 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	ddress of any political committee	e 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. MCGANN, JEAN, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 4 VILLAGE ROAD			07 31 2022						
City FLORHAM PARK	State NJ	Zip Code 07932-2415	Transaction ID : PR2575146965821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		28.08						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Acct Mgmt SB KA	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Middle PETERSOHN, PATRICK, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 16413 BIRCH STREET			07 / D D / Y Y Y Y Y 2022						
City OVERLAND PARK	State KS	Zip Code 66085-7842	Transaction ID : PR2575148365821						
FEC ID number of contributing federal political committee.	C	00003-7042	Amount of Each Receipt this Period 384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual)	Memo Item						
Receipt For:		Reg VP of SIs Year-to-Date ▼							
Primary General Other (specify) ▼	Aggregate	2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle PELNER, DAVID, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1200 WEST MINNEHAHA	1		07 / D D / Y Y Y Y Y 2022						
City MINNEAPOLIS	State MN	Zip Code 55419-1163	Transaction ID : PR2575155965821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		38.46						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Real Estate Svs	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 288.45	P/R Deduction (\$19.23 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			451.14						
TOTAL This Period (last page this line numb	er only)								

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	11b	11c	12	□ . 			
Any information copied from such Reports and or for commercial purposes, other than using the										
NAME OF COMMITTEE (In Full)					ITOITI SUCI	COMMIT				
UnitedHealth Group Incorporat	ted PAC (I	JnitedHealth Group PA	(C)							
Full Name of Individual (Last, First, Middle In THOMAS, DIANE, , ,	nitial) or Full C	rganization Name	Date o	f Receipt						
Mailing Address 2701 KING JAMES AVE			м м 07	/ D 31		y y 2022	Y			
City SAINT CHARLES	State IL	Zip Code 60174-7827		saction ID t of Each			<u> </u>			
FEC ID number of contributing federal political committee.	С			· · · ·		153.8	34			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Pres	M	emo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Dec	luction (\$76	6.92 Bi-We	ekly)				
Full Name of Individual (Last, First, Middle In B. RAZVI, NIGHET, , ,	nitial) or Full C	rganization Name	Date o	f Receipt						
Mailing Address 1015 S CLINTON AVENUE			07	/ D		y y 2022	Y			
City OAK PARK	State	Zip Code 60304-1823		action ID						
FEC ID number of contributing federal political committee.	С			t of Each	Receipt in	28.4	6			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) d Dir	M	emo Item						
Receipt For:	1	Year-to-Date ▼	_							
Primary General Other (specify) ▼		213.45	P/R Ded	P/R Deduction (\$14.23 Bi-Weekly)						
Full Name of Individual (Last, First, Middle In HAMANN, CHAD, , ,	nitial) or Full C	rganization Name	Date o	f Receipt						
Mailing Address 7638 RIDGEVIEW WAY			07	31	1	2022				
City CHANHASSEN	State MN	Zip Code 55317-4507		saction ID t of Each			1			
FEC ID number of contributing federal political committee.	С			. , .		72.1	2			
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) Fax	N	lemo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2103.30	P/R Dec	duction (\$3	6.06 Bi-We	eekly)				
SUBTOTAL of Receipts This Page (optional)						254.4	2			
TOTAL This Period (last page this line numbe	r only)									

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12								
			13 14 15 16 17 berson for the purpose of soliciting contributions a to collect contributions from such committee								
	ig the name and a	ddress of any political committe	e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (l	JnitedHealth Group P	4C)								
Full Name of Individual (Last, First, Mide WIELAND, MICHAEL, , ,	lle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 6741 EAST SHADOW L	AKE DRIVE		07 31 Y Y Y Y 2022								
City CIRCLE PINES	State MN	Zip Code 55014-1348	Transaction ID : PR2575181665821 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.08								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Dir I O Engineering	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)								
Full Name of Individual (Last, First, Mido B. MELLO, STEPHANIE, , ,	lle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 179 HILTON LANE			07 31 Y Y Y Y 2022								
City	State MA	Zip Code	Transaction ID : PR2575191365821								
SWANSEA		02777-3809	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		28.08								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For:	Aggregate	Year-to-Date V									
Other (specify) ▼		210.60	P/R Deduction (\$14.04 Bi-Weekly)								
Full Name of Individual (Last, First, Mide DEMARIS, PETER, , ,	lle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 2301 OLIVER AVE S			07 / D D / Y Y Y Y 31 2022								
City MINNEAPOLIS	State MN	Zip Code 55405-2448	Transaction ID : PR2575191865821 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 eComm	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (option	al)		440.76								
TOTAL This Period (last page this line nu	mber only)										

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle MUELLER, CYNTHIA, , ,	,	Organization Name	Date of Receipt							
Mailing Address 6919 OLD WHISKEY CRE			07 31 Y Y Y Y Y Y 2022							
City FORT MYERS	State FL	Zip Code 33919-1828	Transaction ID : PR2575192265821 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.08							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clms	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)							
Full Name of Individual (Last, First, Middle CONDON, CRAIG, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 268 OAK LANDING WAY			07 / D D / Y Y Y Y Y 2022							
City SEVERNA PARK	State MD	Zip Code 21146-3116	Transaction ID : PR2575203165821							
	_	21140-3110	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 Unit CEO	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify) ▼		2884.50	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle CARRIS, DONNA, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 27 WEST WILLOW LN			07 31 Y Y Y Y Y 2022							
City CHARLESTOWN	State RI	Zip Code 02813-1727	Transaction ID : PR2575212565821 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		76.92							
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 ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			489.60							
TOTAL This Period (last page this line numb	er only)									

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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			for each category of the Detailed Summary Page	×	11a 13] 11k		11c 15	12	17			
	y information copied from such Reports and State for commercial purposes, other than using the na				or the		pose	e of s	oliciting	contribu	tions			
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	UnitedHealth Group PA	C)										
A.	Full Name of Individual (Last, First, Middle Initial) STORDAHL, PAUL, , ,	or Full O	Organization Name	Date of Receipt										
	Mailing Address 7001 W 175TH AVENUE				м м 07	/	D	31	/ Y	ү ү 2022	Y			
	City EDEN PRAIRIE	State MN	Zip Code 55346-2161							21306582				
			55546-2161	_ A	mount	of	Eac	ch Re	ceipt th	is Period				
	FEC ID number of contributing federal political committee.	С					-		-	384	60			
	Name of Employer (for Individual)		upation (for Individual)	10	Me	emo	o Ite	em						
	United HealthCare Services Inc Receipt For:		Chief Actuary	_	_									
	Primary General Other (specify) ▼	vggregate	Year-to-Date ▼ 2884.50	P/I	R Ded	uctio	on ((\$192.	30 Bi-W	/eekly)				
В.	Full Name of Individual (Last, First, Middle Initial) MARTIN, PETER, , ,	or Full O	Organization Name		Date of	Re	eceip	pt						
	Mailing Address 7091 HIGHOVER DRIVE				м м 07									
	City CHANHASSEN	State MN	Zip Code 55317-7572							21366582				
			55517-7572	_ Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	C		Ľ	_	_	-			30.	00			
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Mit CFO		Me	emo	o Ite	em						
	Receipt For: A Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 225.00	P/f	R Dedi	uctic	on (S	\$15.0	0 Bi-We	eekly)				
с.	Full Name of Individual (Last, First, Middle Initial) MEYERHOFER, JEFFREY, , ,	or Full O	Organization Name		Date of	Re	eceip	pt						
	Mailing Address 6624 IROQUOIS TRAIL				^M 07	/	D	31	/ Y	y y 2022	Y			
	City	State	Zip Code							21466582				
	EDINA	MN	55439-1065	A	mount	of	Eac	ch Re	ceipt th	is Period				
	FEC ID number of contributing federal political committee.	С			_		y		y	115	38			
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		M	emo	o Ite	em						
	Receipt For: A Primary General Other (specify)	ggregate	Year-to-Date ▼ 865.35	P/	R Ded	uctio	ion ((\$57.6	9 Bi-We	eekly)				
s	UBTOTAL of Receipts This Page (optional)			ſ						529.	98			
	OTAL This Period (last page this line number only		r	Ī					- 7					

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		Use separate schedule(s)			(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11b	11c	12				
Any information copied from such Reports and or for commercial purposes, other than using t											
NAME OF COMMITTEE (In Full)	ine name anu a	duress of any political committee		Ontric	Julions I	TOTTI SUCI	1 commu	ee.			
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle KOENIG, ERICA, , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt						
Mailing Address 5985 PRESTWICK COURT	-		M 07		31) / Y	y y 2022	Y			
City EXCELSIOR	State MN	Zip Code 55331-4412					21506582 is Period	1			
FEC ID number of contributing federal political committee.	C				-y		384.6	60			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef Talent Officer		Memo	o Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R De	∍ducti	ion (\$192	2.30 Bi-W	/eekly)				
Full Name of Individual (Last, First, Middle B. TRUXAL, WILLIAM, , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt						
Mailing Address 226 HARBOR VIEW LANE			07		31	/ Y	2022	Ŷ			
City LARGO	State FL	Zip Code 33770-4007					21846582				
FEC ID number of contributing federal political committee.	С						is Period 384.6	60			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ision CEO		Memo	o Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. WILSON, ADAM, , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt						
Mailing Address 336 SALEM CHURCH ROA	AD		M 07		31) / Y	2022 Y	Y			
City SUNFISH LAKE	State MN	Zip Code 55118-4719					21866582 is Period	1			
FEC ID number of contributing federal political committee.	С				y .	, y	115.3	38			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) if of Staff		Memo	o Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 865.35	P/R De	∍ducti	ion (\$57.	.69 Bi-We	eekly)				
SUBTOTAL of Receipts This Page (optional).					, .	,	884.5	58			
TOTAL This Period (last page this line number	er only)				-ap.						

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	X 11a	11b 11c	12	_			
Any information copied from such Reports and									
or for commercial purposes, other than using t	ne name and a	ouress of any political committee	to solicit contrib	outions from su	en committe	.			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	(C)						
Full Name of Individual (Last, First, Middle I GOODMAN, CYNTHIA, , ,	nitial) or Full C	rganization Name	Date of Re	eceipt					
Mailing Address 3717 BUCKEYE DRIVE			07 /	31 J	y y y 2022	Ŷ			
City MCKINNEY	State TX	Zip Code 75071-8453		ion ID : PR257 Each Receipt					
FEC ID number of contributing federal political committee.	С				28.8	34			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs	Memo	o Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 216.30	P/R Deducti	on (\$14.42 Bi-V	Veekly)				
Full Name of Individual (Last, First, Middle I B. SHORS, MATTHEW, , ,		rganization Name	Date of Re	eceipt					
Mailing Address 4649 EWING AVENUE SOL			M M /	31 /	2022	Ŷ			
City MINNEAPOLIS	State MN	Zip Code 55410-1745		ion ID : PR257					
FEC ID number of contributing federal political committee.	С				384.6	60			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Deputy Gen Counsel	Memo	o Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I SANTORO, MICHAEL, , ,	initial) or Full C	rganization Name	Date of Re	eceipt					
Mailing Address 18 OLD FIRE ROAD	04-4-	Zin Code	07 /	31	2022				
City TRUMBULL	State CT	Zip Code 06611-1431		ion ID : PR257 Each Receipt		1			
FEC ID number of contributing federal political committee.	С			y	384.6	60			
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP 0	upation (for Individual) Ops	Memo	o Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P/R Deducti	on (\$192.30 Bi-	Weekly)				
SUBTOTAL of Receipts This Page (optional)		•		· · · · ·	798.0	4			
TOTAL This Period (last page this line number	er only)								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 70 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 t			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee						
		unces of any political continue							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle KRUTA, DARLENE, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 9243 GREEN BRIAR RD			07 31 / Y Y Y Y 2022						
City BLOOMINGTON	State MN	Zip Code 55437-1939	Transaction ID : PR2575232565821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		38.46						
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 ▼ 538.44	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle GRUNDHOEFER, BRYAN, , ,		rganization Name	Date of Receipt						
Mailing Address 317 SIDNEY BAKER STRE SUITE 400 PMB 519 City	ET SOUTH	Zip Code	07 / D D / Y Y Y Y 2022						
KERRVILLE	TX	78028-6150	Transaction ID : PR2575232765821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.00						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) O Med Grp Non Physn	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2880.00	P/R Deduction (\$192.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. KIRKPATRICK, SUSAN, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 417 STERLING STREET			M M / D D / Y Y Y Y Y 07 31 2022						
City LANCASTER	State MA	Zip Code 01523-1847	Transaction ID : PR2575233665821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) Optum Services, Inc Receipt For:	SVF	upation (for Individual) PRisk Management	Memo Item						
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			499.38						
TOTAL This Period (last page this line number	er only)								

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle I RUSSELL, THOMAS, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 10205 GROOMSBRIDGE R	OAD		07 / D D / Y Y Y Y 2022						
City JOHNS CREEK	State GA	Zip Code 30022-5645	Transaction ID : PR2575238665821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Empl Rel	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I B. CHOATE, THOMAS, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 8222 STONE MASON CT			07 31 2022						
City WINDERMERE	State FL	Zip Code 34786-5624	Transaction ID : PR2575247865821 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) : Unit CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I C. DIMARTINO, TIMOTHY, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 49605 KEYCOVE ST			07 / D D / Y Y Y Y 07 31 2022						
City CHESTERFIELD	State MI	Zip Code 48047-2361	Transaction ID : PR2575248165821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs Acct Mgt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			489.52						
TOTAL This Period (last page this line number	er only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

PAGE 72 OF

	EMIZED RECEIPTS		Detailed Summary Page	×	11a		111	b	11c	12				
					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	JnitedHealth Group PA	C)										
Α.	Full Name of Individual (Last, First, Middle Initial, DARRAH, JACQUELINE, , ,) or Full O	rganization Name		Date of Receipt									
	Mailing Address 6725 YORK AVENUE SOUTH #6	612			м м 07	/		31	/ Y	y y 2022	Y			
	City	State	Zip Code		Trans	acti	ion	ID : F	R2575	2485658	21			
	EDINA	MN	55435-3238	_ /	Amount	of	Ead	ch Re	ceipt th	is Period	l			
	FEC ID number of contributing federal political committee.	С					-,		-95	76	.92			
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Assc Gen Counsel		Me	emo) Ite	em						
	Receipt For:	Aaareaate	Year-to-Date ▼	-										
	Primary General Other (specify) ▼		576.90	P	/R Ded	uctio	on ((\$38.4	6 Bi-We	eekly)				
	Full Name of Individual (Last, First, Middle Initial) BRANT, PAUL, , ,) or Full O	rganization Name		Date of	Re	ceip	pt						
	Mailing Address 17 ROCKY BROOK ROAD				м м 07	1		31	/ Y	y y 2022	Y			
	City WILTON	State CT	Zip Code 06897-1919				-			2 5026582 iis Period				
	FEC ID number of contributing federal political committee.	С					- -		- 1	76	.92			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs Acct Mgt		Me	emo) Ite	em						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P	/R Dedi	uctic	on (\$38.4	6 Bi-We	eekly)				
	Full Name of Individual (Last, First, Middle Initial) KUETER, DANIEL, , ,) or Full O	rganization Name		Date of	Re	eceip	pt						
	Mailing Address 1500 WINGATE DRIVE				^M 07	/		31	/ Y	y y 2022	Ŷ			
	City DELAWARE	State OH	Zip Code 43015-9200				-			2558658 iis Perioo				
	FEC ID number of contributing federal political committee.	С					J			384	_			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CEO		M	emo) Ite	əm						
	Receipt For:	Aggregate	Year-to-Date ▼ 2884.50	P	/R Ded	uctio	on ((\$192	.30 Bi-V	Veekly)				
S	UBTOTAL of Receipts This Page (optional)		•							538	44			
т	OTAL This Period (last page this line number onl	y)					-							

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	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)	name anu d	and the second sec								
UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle I BACHMANN, ANITA, , ,	nitial) or Full O	rganization Name	Date of Receipt							
Mailing Address 815 NORTHERN SHORES	POINT		07 31 / Y Y Y Y							
City GREENSBORO	State NC	Zip Code 27455-3459	Transaction ID : PR2575258465821 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 ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I BROOMFIELD, ROBERT, , ,	nitial) or Full O	rganization Name	Date of Receipt							
Mailing Address 12501 WEST 156TH STREE			07 31 Y Y Y Y Y							
	State KS	Zip Code	Transaction ID : PR2575260465821							
	r\o	66221-2662	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		92.30							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify) ▼		692.25	P/R Deduction (\$46.15 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I ZARN, MARY, , ,	nitial) or Full O	rganization Name	Date of Receipt							
Mailing Address 11192 BLUESTEM LANE	Otata	Zin Ood-	07 31 2022							
City EDEN PRAIRIE	State MN	Zip Code 55347-4731	Transaction ID : PR2575269165821 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		134.60							
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 ▼ 1009.50	P/R Deduction (\$67.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			611.50							
TOTAL This Period (last page this line numbe	r only)									

Use separate schedule(s)

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111	EMIZED RECEIPTS		for each category of the Detailed Summary Page		K 11a		11b	11c	12	
	y information copied from such Reports and Sta for commercial purposes, other than using the r									
	NAME OF COMMITTEE (In Full)									
	UnitedHealth Group Incorporated	d PAC (L	InitedHealth Group PA	NC)						
A.	Full Name of Individual (Last, First, Middle Initia ZAFFIRIS, NICHOLAS, , ,	al) or Full Or	rganization Name		Date of	Re	ceipt			
	Mailing Address 1241 LAUREL CT				м м 07	/	D D D 31	/ Y	y y 2022	Y
	City	State	Zip Code	_	Trans	acti	ion ID :	PR25752	27066582	1
	MARCO ISLAND	FL	34145-2351	_	Amount	of	Each R	eceipt th	is Period	
	FEC ID number of contributing federal political committee.	С			<u> </u>	_			28.	08
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Plan CEO		Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60		P/R Dedu	uctio	on (\$14.	04 Bi-We	ekly)	
в.	Full Name of Individual (Last, First, Middle Initia HAMBLIN, JILLIAN, , ,	al) or Full Or	ganization Name		Date of	Re	ceipt			
	Mailing Address 3103 BEACON GROVE ST				м м 07	/	D D D 31	/ Y	y y 2022	Y
	City SPRING	State TX	Zip Code 77389-4348	_					9036582	1
	FEC ID number of contributing		11303-4340	_	Amount	OT	Each R	eceipt th	is Period	
	federal political committee.	С			<u> </u>	_	-y		76.	92
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Product		Me	emo	Item			
	Receipt For:	Aggregate	Year-to-Date ▼							
	Other (specify) ▼		, 576.90	F	P/R Dedu	uctio	on (\$38. [,]	46 Bi-We	ekly)	
с.	Full Name of Individual (Last, First, Middle Initia MUELLER, STEVEN, , ,	al) or Full Or	ganization Name		Date of	Re	ceipt			
	Mailing Address 6895 LAKE HARRISON CIRCL	E			м м 07	/	D D D 31	/ Y	2022 Y	Y
	City CHANHASSEN	State MN	Zip Code 55317-4589						2 9456582 is Period	1
	FEC ID number of contributing federal political committee.	С				U	,		76.9	92
	Name of Employer (for Individual) Optum Services, Inc	Occu VP C	pation (for Individual) Ops		Me	emc	tem			
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		P/R Ded	ucti	on (\$38.	.46 Bi-We	ekly)	
	Other (specify)		576.90				-			
s	UBTOTAL of Receipts This Page (optional)						,	,	181.9	92
т	OTAL This Period (last page this line number or	וy)	•	-						

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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 rerson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)		adreed of any pointed commute								
UnitedHealth Group Incorport	ated PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle HEWITT, SCOTT, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1443 RAYMOND AVE			07 31 2022							
City SAINT PAUL	State MN	Zip Code 55108-1430	Transaction ID : PR2575296765821 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		153.84							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Ntwk Prgms	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$76.92 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. CUEVAS, BRANDON, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 8 CLOISTER COURT			07 31 2022							
City LADERA RANCH	State CA	Zip Code	Transaction ID : PR2575305665821							
FEC ID number of contributing	С	92694-1556	Amount of Each Receipt this Period 384.60							
federal political committee. 		upation (for Individual)	Memo Item							
United HealthCare Services Inc		P Prd								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. PEEL, CHAD, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 7185 GUNFLINT TRAIL			07 / D D / Y Y Y Y 07 31 2022							
City CHANHASSEN	State MN	Zip Code 55317-4743	Transaction ID : PR2575329865821 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		153.84							
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 ▼ 1153.80	P/R Deduction (\$76.92 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			692.28							
TOTAL This Period (last page this line numb	per only)									

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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	INIZED RECEIPTS for each category of Detailed Summary P:				×	-	11a		-	1b		11c			
	y information copied from such Reports and Statem for commercial purposes, other than using the nam					for				se c				ibutio	
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F														
Α.	Full Name of Individual (Last, First, Middle Initial) of WHITE, WAYNE, , ,	or Full O	Organ	nization Name		Da	ate of	Re	ece	eipt					
	Mailing Address 8727 W BUCKHORN TRL					07 31 / Y Y Y Y 2022									
	3	State		Zip Code		٦	rans	acti	ior	n ID	: P	R2575	342365	5821	
	PEORIA	AZ		85383-4852	/	An	nount	of	Ea	ach	Re	ceipt th	is Per	iod	
	FEC ID number of contributing federal political committee.)							,			-gr	3	84.60)
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) t Svs			Me	emo	o It	tem					
	Pagaint For:	gregate	Yea	ar-to-Date 🔻											
	Primary General Other (specify) ▼		-	2884.50] P	P/R	Ded	uctio	on	(\$19	92.	30 Bi-W	/eekly)		
в.	Full Name of Individual (Last, First, Middle Initial) c IMDIEKE, PATRICK, , ,	or Full O	Orgai	nization Name		Da	ate of	Re	ece	eipt					
	Mailing Address 15900 WHITE PINE DRIVE					N	07	/	ſ	D 3 [,]		/ Y	y 2022		7
	,	State MN		Zip Code 55391-2125								R25753 ceipt th			_
	FEC ID number of contributing federal political committee.								,			-9-		28.08	3
	Name of Employer (for Individual) Optum Services, Inc			tion (for Individual) Anlys Cnslt			Me	emo	o It	tem					
	Receipt For: Ag Primary General Other (specify) ▼			ar-to-Date ▼ 210.60] Р/	?/R	Dedu	uctio	on	(\$14	4.04	4 Bi-We	ekly)		
с.	Full Name of Individual (Last, First, Middle Initial) c TELESKY, MICHAEL, , ,	or Full O	Orgai	nization Name		Da	ate of	Re	ece	eipt					
	Mailing Address 2602 PENNINGTON PLACE					N	07	1	ľ	D 3'		/ Y	2022		
	5	State IN		Zip Code 46383-9163								R2575 ceipt th			_
	FEC ID number of contributing federal political committee.					Ē			,			y		78.00)
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) /P SIs		L	M	emc	o li	tem					
	Receipt For: Ag Primary General Other (specify) Image: Constraint of the second	gregate	Yea	ar-to-Date ▼ 585.00	P	P/R	2 Ded	ucti	on	(\$3	9.0	0 Bi-We	eekly)		
S	UBTOTAL of Receipts This Page (optional)				,	[ļ				49	90.68	}
т	OTAL This Period (last page this line number only)					Ē			-			-		-	

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11				or each category of the Detailed Summary Page		× 11a 13		11b 14	11c		Г	17		
	y information copied from such Reports and Sta for commercial purposes, other than using the					for the		pose of	soliciting	g conti	ributic	ons		
	NAME OF COMMITTEE (In Full)													
\rangle	UnitedHealth Group Incorporated	d PAC (l	Uni	tedHealth Group PA	(C)									
Α.	Full Name of Individual (Last, First, Middle Initia PHILLIPS, CHRISTINE, , ,	al) or Full O	Organ	ization Name		Date o	f Re	eceipt						
	Mailing Address 63 HERITAGE TRAIL					м м 07	1	31) / Y	y 202	ү ү 2			
	City SUFFIELD	State CT		Zip Code 06078-2376					PR2575					
	FEC ID number of contributing federal political committee.	С						- J -	1 - AP		28.08	}		
	Name of Employer (for Individual) United HealthCare Services Inc		upati Regl	on (for Individual) Affs		М	lemo	tem Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 210.60		P/R Ded	lucti	on (\$14	.04 Bi-We	ekly)				
B.	Full Name of Individual (Last, First, Middle Initia GUSTIN, TODD, , ,	al) or Full O	Organ	ization Name		Date o	f Re	eceipt						
	Mailing Address 5717 AYRSHIRE BLVD	Stata		Zin Codo		^M M	/	31	/ Y	2022				
	City EDINA	State MN		Zip Code 55436-2059					PR25753					
	FEC ID number of contributing federal political committee.	С				Amoun			leceipt th		53.84	ŀ		
	Name of Employer (for Individual) Optum Services, Inc		upat Bus	ion (for Individual) Dev		М	lemo	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 1153.80		P/R Ded	lucti	on (\$76.	92 Bi-We	ekly)				
с.	Full Name of Individual (Last, First, Middle Initia NIELSEN, MICHELE, , ,	al) or Full O	rgan	ization Name		Date o	f Re	eceipt						
	Mailing Address 101 W 11TH STREET			7.0.1		07		31		202	2			
	City SHIP BOTTOM	State NJ		Zip Code 08008-6303	_				PR2575					
	FEC ID number of contributing federal political committee.	С				Ē		,	. ,		76.92	2		
	Name of Employer (for Individual) United HealthCare Services Inc		•	on (for Individual) gn Pres		M	lemo	o Item						
	Receipt For: Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 576.90		P/R Dec	ducti	on (\$38	.46 Bi-We	eekly)				
\vdash	UBTOTAL of Receipts This Page (optional)				-			9 1 7 1	· ·	2	58.84			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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(check only one)

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		Detailed Summary Page	×	11a	\square	11b		11c	12	<u> </u>						
Any information copied from such Reports a	nd Statements ma	A not be sold or used by any p	erson fo	13 or the	purp	14 pose	e of s	15 oliciting	d contribu	tions						
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	-			icit cor	itrib	oution	ns fro	om such		ee.						
Full Name of Individual (Last, First, Middl A. COOK, JORDANA, , ,	le Initial) or Full C	Prganization Name	Date of Receipt													
Mailing Address 46 PALMETTO COVE Co	OURT			07 31 Y Y Y Y Y 2022												
City BLUFFTON	State SC	Zip Code 29910-9580							37166582 his Period	1						
FEC ID number of contributing federal political committee.	federal political committee.							230.76								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Mktg	Memo Item													
Receipt For: Primary General Other (specify) ▼	P/I	R Ded	uctio	on (\$	\$115.3	38 Bi-W	Veekly)									
Full Name of Individual (Last, First, Middl CUNNINGHAM, BRIAN, , ,	-	organization Name		ate of	Re	ceip	t									
Mailing Address 1708 ROLLING HILLS R		м м 07	/		31	/ Y	2022	Y								
City CHARLESTON	State WV	Zip Code 25314-2216							3 7596582 nis Period	1						
FEC ID number of contributing federal political committee.	C		ļļ			- J -		-	76.	92						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Dir Tech Proj-Prgm Mgmt		Me	emo	lter	m									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/I	R Dedu	uctic	on (\$	38.46	6 Bi-We	ekly)							
Full Name of Individual (Last, First, Middl CIAVARELLA, TRACY, , ,	le Initial) or Full C	organization Name		ate of	Re	ceip	t									
Mailing Address 20 LORRAINE DRIVE				^M 07	/		31 ^D	/ Y	2022							
City BEACON FALLS	State CT	Zip Code 06403-1256	A						37796582 nis Period	1						
FEC ID number of contributing federal political committee.	C		1			y		y	28.	08						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Compli		Me	emo	b Iter	m									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.60	P/	R Ded	uctio	on (\$	\$14.0	4 Bi-We	ekly)							
SUBTOTAL of Receipts This Page (optiona	al)		. [y		9	335.	76						
TOTAL This Period (last page this line num	nber only)		. [-		-								

Use separate schedule(s)

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ı ب	EMIZED RECEIPTS		Use separate schedule(s)		(check only one)							
11	EIVILLED REVEILIS		for each category of the Detailed Summary Page		× 11a		11b	11c	12	<i>□.</i> _		
	y information copied from such Reports and S											
or	for commercial purposes, other than using the	e name and a	ddress of any political committee	e to s	olicit cor	ntrib	utions f	rom such	o committe	ee.		
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)								
Α.	Full Name of Individual (Last, First, Middle Ini BRATTEBO, CRAIG, , ,	tial) or Full C	rganization Name		Date of	Re	ceipt					
	Mailing Address 10202 HARMONY CIRCLE				07 31 2022							
	City EDEN PRAIRIE	State MN	Zip Code 55347-5019						9726582 is Period	1		
	FEC ID number of contributing federal political committee.					7		384.6	50			
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) outy Gen Counsel		M	emo	Item					
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 2884.5					P/R Ded	uctic	on (\$192	2.30 Bi-W	/eekly)			
в.	Full Name of Individual (Last, First, Middle Ini FELLER, WILLIAM, , ,	tial) or Full C	rganization Name		Date of	Re	ceipt					
	Mailing Address 3715 HUNTINGTON AVE				м м 07	′	D D D 31	/ Y	y y 2022	Y		
	City ST LOUIS PARK	State MN	Zip Code 55416-4917	-					0036582 ⁴			
	FEC ID number of contributing federal political committee.	С							is Period 76.9	92		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Technology		M	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90]	P/R Ded	uctio	on (\$38.4	46 Bi-We	ekly)			
с.	Full Name of Individual (Last, First, Middle Ini UNDERWOOD, JEFFREY, , ,	tial) or Full C	rganization Name		Date of	Re	ceipt					
	Mailing Address 14625 SW SUNRISE LN				07 ^M	′	D D D 31	/ Y	y y 2022	Y		
	City TIGARD	State OR	Zip Code 97224-1209						10336582 is Period	1		
	FEC ID number of contributing federal political committee.	С			Ľ.		9	9	153.8	34		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		M	emo	Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80]	P/R Ded	uctio	on (\$76.	92 Bi-We	ekly)			
s	UBTOTAL of Receipts This Page (optional)			•			<u>,</u>	9	615.3	86		
Т	OTAL This Period (last page this line number	only)		•								

Use separate schedule(s)

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	Use separate schedule(s)		(check only one)
		for each category of the Detailed Summary Page	X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		duress of any political committee	
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)
Full Name of Individual (Last, First, Middle ANDERSON, BRADLEY, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 4613 W 56TH ST			07 31 2022
City EDINA	State MN	Zip Code 55424-1558	Transaction ID : PR2575405265821 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		76.92
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Strategy	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)
Full Name of Individual (Last, First, Middle VENKATESAN, CHANDRAMOUL			Date of Receipt
Mailing Address 17698 62ND COURT NOR			07 / D D / Y Y Y Y 2022
City MAPLE GROVE	State MN	Zip Code 55311-4619	Transaction ID : PR2575410165821
		55511-4019	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) Seg CIO	Memo Item
Receipt For:	Aggregate	Year-to-Date V	
Other (specify) ▼		2884.50	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle MILLER, ALLISON, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 11671 45TH PLACE NE			07 / D D / Y Y Y Y 07 31 2022
City SAINT MICHAEL	State MN	Zip Code 55376-4536	Transaction ID : PR2575418165821 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		192.30
Name of Employer (for Individual) Optum Services, Inc	Occ VP I	upation (for Individual) T	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1442.25	P/R Deduction (\$96.15 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)			653.82
TOTAL This Period (last page this line numb	er only)		

Use separate schedule(s)

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		Use separate schedule(s)	(check	only	one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 1	- F	11b		1c	12	,
Any information copied from such Reports and or for commercial purposes, other than using th			erson for			e of soli			
NAME OF COMMITTEE (In Full)				CON	Ibutio		Such	commu	ee.
UnitedHealth Group Incorporat	ed PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle Ir GOTHARD, CAROL, , ,	nitial) or Full C	rganization Name	Da	te of I	Receip	ot			
Mailing Address 16492 BROOKLANE BOULE	EVARD			07	/ D	31 /	Y	y y 2022	Y
City NORTHVILLE	State MI	Zip Code 48168-8417						1916582 s Period	1
FEC ID number of contributing federal political committee.	С			_	-7-		-g=	76.3	36
Name of Employer (for Individual) United HealthCare Services Inc	Occ Dir	upation (for Individual) Fin		Mer	no Iter	m			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 572.70	P/R	Deduo	ction (\$	\$38.18 E	3i-We	ekly)	
Full Name of Individual (Last, First, Middle Ir ARMSTRONG, LORI, , ,	nitial) or Full C	rganization Name	Da	te of I	Receip	ot			
Mailing Address 808 CAREN DRIVE	Otata	7. 0.4		07	/ D	31 /	Y	y y 2022	Y
City ELDERSBURG	State MD	Zip Code 21784-8569						2796582 s Period	1
FEC ID number of contributing federal political committee.	С						ipt tills	30.0	00
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP Acct Mgmt		Mer	no Iter	m			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 225.00	P/R	Deduc	tion (\$	\$15.00 E	3i-Wee	ekly)	
Full Name of Individual (Last, First, Middle Ir c. OHARA, KARIN, , ,	nitial) or Full C	rganization Name	Da	te of I	Receip	ot			
Mailing Address 1431 HENRY COURT	1			07 ^M	/ D	31 /	Y	y y 2022	Y
City CHANHASSEN	State MN	Zip Code 55317-2200						2876582 s Period	1
FEC ID number of contributing federal political committee.	С				9		y	192.:	30
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Acctng		Mer	no Itei	m			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1442.25	P/R	Dedu	ction (\$	\$96.15 E	Bi-We	ekly)	
SUBTOTAL of Receipts This Page (optional)					,		,	298.6	6
TOTAL This Period (last page this line number	r only)				-				

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17	
or for commercial purposes, other than using			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group PA	AC)
Full Name of Individual (Last, First, Middl CASTILLO, EFREM, , ,	e Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 630 ELIZABETH ROAD			07 31 / Y Y Y Y Y
City SAN ANTONIO	State TX	Zip Code 78209-6135	Transaction ID : PR2575441365821
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) Care Initiv	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2019.15	P/R Deduction (\$134.61 Bi-Weekly)
Full Name of Individual (Last, First, Middl B. MURLEY, MARY, , ,	e Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 2775 COUNTRYSIDE DF	07 31 YYYYY 2022		
City ORONO	State MN	Zip Code 55356-9675	Transaction ID : PR2575443665821 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) Segment CEO	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middl C. SPILKER, TIMOTHY, , ,	e Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 32 FITCH LANE			07 31 Y Y Y Y Y 2022
City NEW CANAAN	State CT	Zip Code 06840-5051	Transaction ID : PR2575446365821 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 ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)
SUBTOTAL of Receipts This Page (optiona	ul)		1038.42
TOTAL This Period (last page this line num	nber only)		

Use separate schedule(s)

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Use separa		Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
			13 14 15 16 17 erson for the purpose of soliciting contributions
or for commercial purposes, other than using	the name and a	ddress 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 FLOCCO, LOUIS, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 521 SAN BERNARDINO A	VENUE		M M / D D / Y Y Y Y 07 31 2022
City NEWPORT BEACH	State CA	Zip Code 92663-4812	Transaction ID : PR2575448665821 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		200.00
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Underwriting	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1500.00	P/R Deduction (\$100.00 Bi-Weekly)
Full Name of Individual (Last, First, Middle B. RUNICE, PAUL, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 4622 BRUCE AVENUE			07 31 2022
City EDINA	State MN	Zip Code 55424-1123	Transaction ID : PR2575451565821 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		369.00
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Treasury	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify) V		2767.50	P/R Deduction (\$184.50 Bi-Weekly)
Full Name of Individual (Last, First, Middle PEGG, JACK, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 4917 KAMA LANE NE			07 / D D / Y Y Y Y 2022
	State MN	Zip Code 55301-3536	Transaction ID : PR2575456065821 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		28.08
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Underwriting	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)			597.08
TOTAL This Period (last page this line numb	er only)		

Use separate schedule(s)

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(check only one)

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
or for commercial purposes, other than using		erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle GLATT, CHRISTOPHER, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 631 GOODRICH AVE			07 / D D / Y Y Y Y 2022							
City SAINT PAUL	State MN	Zip Code	Transaction ID : PR2575464965821							
FEC ID number of contributing	C	55105-3522	Amount of Each Receipt this Period 38.46							
federal political committee.	U									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Aviation Corp Pilots	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 283.23	P/R Deduction (\$19.23 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. PHINNEY, ASHLEY, , ,	Initial) or Full C	Prganization Name	Date of Receipt							
Mailing Address 5 GATEHOUSE ROAD			07 31 2022							
City	State	Zip Code	Transaction ID : PR2575468465821							
GRANBY	СТ	06035-1922	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.08							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Director Technology	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. SADUSKE, NANETTE, , ,	Initial) or Full C	Prganization Name	Date of Receipt							
Mailing Address 4276 NICOLET DRIVE			07 31 Y Y Y Y Y							
City	State WI	Zip Code	Transaction ID : PR2575470265821							
GREEN BAY	VVI	54311-9798	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		76.92							
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 ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			143.46							
TOTAL This Period (last page this line numb	per only)	······								

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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 Stat or for commercial purposes, other than using the n			rson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (I	UnitedHealth Group PA	C)									
Full Name of Individual (Last, First, Middle Initial HENSEL, KRISTA, , ,	l) or Full C	Organization Name	Date of Receipt									
Mailing Address 2211 HOMEWOOD DRIVE			07 31 2022									
City ANCHORAGE	State KY	Zip Code 40223-1326	Transaction ID : PR2575482665821									
		40225-1520	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									
Pagaint For:	Anareaate	Year-to-Date ▼	-									
Primary General Other (specify) ▼		2884.50	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle Initial B. BARTHEL, THOMAS, , ,	l) or Full C	Organization Name	Date of Receipt									
Mailing Address 9713 HEMLOCK LANE NORTH			07 31 2022									
City MAPLE GROVE	State MN	Zip Code 55369-3665	Transaction ID : PR2575484365821 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		28.08									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Dir Software Engineering	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)									
Full Name of Individual (Last, First, Middle Initial	l) or Full C	Organization Name	Date of Receipt									
Mailing Address 1833 HILLTOP RD			07 31 2022									
City	State	Zip Code	Transaction ID : PR2575492765821									
JENKINTOWN	PA	19046-1538	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		28.08									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Dir Capability	Memo Item									
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			440.76									
TOTAL This Period (last page this line number on		r										

SCHEDULE A (FEC Form 3X) _____ _

Use separate schedule(s)

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	-	Use separate schedule(s)	(check on	ly one)				
I EIVILED RECEIPIS		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	the name and a	aaress of any political committee	e to solicit co	ntributi	ons fro	om such	committe	90.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group PA	AC)					
Full Name of Individual (Last, First, Middle A. VESLEDAHL, MATTHEW, , ,	Initial) or Full O	rganization Name	Date o	f Rece	ipt			
Mailing Address 15598 MICHELE LANE			07	/	D D 31	/ Y	y y 2022	Y
City EDEN PRAIRIE	State MN	Zip Code 55346-2548					9926582 s Period	1
FEC ID number of contributing federal political committee.	C				384.6	80		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ? Network		lemo It	em			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Dec	duction	(\$192.3	30 Bi-W	eekly)	
Full Name of Individual (Last, First, Middle DELREAL, MAGDALENA, , ,	Initial) or Full O	rganization Name	Date o	f Rece	ipt			
Mailing Address 122 WILLOW CREEK LAN			07		31	/ Y	y 2022	Ŷ
City WILLOW SPRINGS	State IL	Zip Code 60480-1274					0776582 s Period	
FEC ID number of contributing federal political committee.	С						28.0)8
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Reg Sales Dir		lemo It	em			
Receipt For:	Aggregate	Year-to-Date ▼	-					
Other (specify) ▼		210.60	P/R Dec	luction	(\$14.04	4 Bi-We	ekly)	
Full Name of Individual (Last, First, Middle HOWELL, NICHOLAS , , ,	Initial) or Full O	rganization Name	Date o	f Rece	ipt			
Mailing Address 300 ORANGE GROVE AV	1		M 07	JL	31		2022	
City SOUTH PASADENA	State CA	Zip Code 91030-1616					1006582 s Period	1
FEC ID number of contributing federal political committee.	С					, ,	384.6	60
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ' Bus Dev		1emo It	em			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P/R Dec	duction	(\$192.:	30 Bi-W	/eekly)	
SUBTOTAL of Receipts This Page (optional)						y	797.2	28
TOTAL This Period (last page this line numb	er only)					-40-		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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	-	Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12									
Any information copied from such Reports an or for commercial purposes, other than using			13 14 15 16 17 erson for the purpose of soliciting contributions from such committee									
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle MUNSON, RICHARD, , ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 4707 HAZELTINE LANE												
City EAGAN	State MN	Zip Code 55123-2172	Transaction ID : PR2575512465821 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		192.30									
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 ▼ 1346.10	P/R Deduction (\$96.15 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. COHEN, SANFORD, , ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 28 CRESCENT LANE			07 / D D / Y Y Y Y Y 2022									
City LEVITTOWN	State NY	Zip Code	Transaction ID : PR2575526165821									
		11756-2506	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		64.60									
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 ▼ 644.50	P/R Deduction (\$32.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle C. HUNTER, ROBERT, , ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 5420 COUNTRYSIDE RO	1		07 / D D / Y Y Y Y Y 2022									
City EDINA	State MN	Zip Code 55436-2524	Transaction ID : PR2575528365821 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) Prd	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			641.50									
TOTAL This Period (last page this line numb	er only)											

Use separate schedule(s)

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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 Sta for commercial purposes, other than using the			person for the purpose of soliciting contributions									
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (L	JnitedHealth Group P	AC)									
A.	Full Name of Individual (Last, First, Middle Initi HERNANDEZ, MAYRENE, , ,	al) or Full O	rganization Name	Date of Receipt									
	Mailing Address 850 SW 189TH AVENUE			M M / D D / Y Y Y Y 07 31 2022									
	City PEMBROKE PINES	State FL	Zip Code 33029-6047	Transaction ID : PR2575529265821 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		76.92									
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) led Dir	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)									
B.	Full Name of Individual (Last, First, Middle Initi HOLOVNIA, KRISTEN, , ,	al) or Full O	rganization Name	Date of Receipt									
	Mailing Address 4610 LAKEVIEW DRIVE	State	Zip Code	07 31 2022									
	EDINA	MN	55424-1518	Transaction ID : PR2575533065821 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) Deputy Gen Counsel	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)									
С.	Full Name of Individual (Last, First, Middle Initi HILL, JANE, , ,	al) or Full O	rganization Name	Date of Receipt									
	Mailing Address 34301 299TH PLACE	Chata	Zin Oode	07 / D D / Y Y Y Y 2022									
	City AITKIN	State MN	Zip Code 56431-5914	Transaction ID : PR2575533165821 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		76.92									
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Compli	Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)									
	UBTOTAL of Receipts This Page (optional)			538.44									
Т	OTAL This Period (last page this line number o	nly)		•									

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Fu	,	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, F MULLANEY, SUSAN, , ,	First, Middle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 169 HUNNEW			07 ^{D D} ⁷ <u>2022</u>									
City NEEDHAM	State	Zip Code 02494-1421	Transaction ID : PR2575535165821									
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 76.92									
Name of Employer (for Individu United HealthCare Services Inc	,	upation (for Individual) Gen Mgmt	Memo Item									
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, F HAMLIN, THOMAS, , ,	First, Middle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 2800 NEWMAI			07 31 Y Y Y Y Y 2022									
City HOUSTON	State TX	Zip Code 77098-1408	Transaction ID : PR2575536265821 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		76.92									
Name of Employer (for Individu Optum Services, Inc	,	upation (for Individual) Behvrl Med Dir	Memo Item									
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, F C. SULLIVAN, EILEEN, ,		rganization Name	Date of Receipt									
Mailing Address 9675 WATER			07 / D D / Y Y Y Y 2022									
City WINTER GARDEN	State	Zip Code 34787-4957	Transaction ID : PR2575537265821									
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period									
Name of Employer (for Individu United HealthCare Services Inc		upation (for Individual) ssc Gen Counsel	Memo Item									
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)									
SUBTOTAL of Receipts This Pag	ge (optional)		181.92									
TOTAL This Period (last page thi	is line number only)											

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
			13 14 15 16 17 erson for the purpose of soliciting contributions e 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. LUQUE, JOY, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 11700 PRESTON RD #66	60		07 31 2022								
City DALLAS	State TX	Zip Code 75230-2739	Transaction ID : PR2575539265821 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		30.00								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Clin Ops	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 225.00	P/R Deduction (\$15.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. SUN, TONY, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 8408 ENSLEY PLACE			07 31 Y Y Y Y 2022								
City LEAWOOD	State KS	Zip Code 66206-1402	Transaction ID : PR2575540265821 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.92								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Dir/CMO	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle WENTZIEN, MICHAEL, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 6350 SUMMIT CIRCLE			07 / D D / Y Y Y Y 2022								
City CHANHASSEN	State MN	Zip Code 55317-9138	Transaction ID : PR2575540865821 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.08								
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 ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)		135.00								
TOTAL This Period (last page this line num	ber only)										

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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111	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b 14	11c	12	—	17
	y information copied from such Reports and Sta for commercial purposes, other than using the				or the p		oose of		contrib	outio	
	NAME OF COMMITTEE (In Full)		·····								
\rangle	UnitedHealth Group Incorporated	d PAC (L	JnitedHealth Group PA	AC)							
Α.	Full Name of Individual (Last, First, Middle Initia STEINBRECHER, HOLLY, , ,	al) or Full Or	rganization Name		Date of	Re	ceipt				
	Mailing Address 1800 N FIELD ST APT 4211				м м 07	/	D D D 31	/ Y	y y 2022]
	City DALLAS	State TX	Zip Code 75202-2782	A				PR2575			
	FEC ID number of contributing federal political committee.	C					-		38	4.60	
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus Dev		Me	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/	R Dedu	uctio	on (\$192	2.30 Bi-W	/eekly)		
в.	Full Name of Individual (Last, First, Middle Initia BALCK, AMY, , ,	al) or Full Or	rganization Name		Date of	Re	ceipt				
	Mailing Address N3681 VINE RD				M M 07	/	Receipt / / / 2022]
	City	State WI	Zip Code					PR25755		-	
		VVI	54913-6928		mount	of	Each R	eceipt th	is Perio	bd	_
	FEC ID number of contributing federal political committee.	С	28.00								
	Name of Employer (for Individual) United HealthCare Services Inc	Occu KA [Memo Item								
	Receipt For:	Aggregate `	Year-to-Date V								
	Primary General Other (specify) ▼		210.00	P/R Deduction (\$14.00 Bi-Weekly)							
C.	Full Name of Individual (Last, First, Middle Initia MILLER, MAXIMILLIAN, , ,	al) or Full Or	rganization Name		Date of	Re	ceipt				
	Mailing Address 6939 HARRIET AVENUE S				м м 07	/	D D D 31		2022]
	City RICHFIELD	State MN	Zip Code 55423-2344	Δ				PR2575			
	FEC ID number of contributing federal political committee.	С						J		6.92	
	Name of Employer (for Individual) United HealthCare Services Inc	Occu M A Y	ipation (for Individual) VP		Me	emo	Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)								48	9.52	
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ידו	EMIZED RECEIPTS					(check only one)								
11			for each category of the Detailed Summary Page		11a]11b	11c	12	<u> </u>				
	y information copied from such Reports and S for commercial purposes, other than using the			erson fo										
	NAME OF COMMITTEE (In Full)			10 3010	011 001	TUIL	/410115 1	ioni suci	. commu					
	UnitedHealth Group Incorporate	ed PAC (l	UnitedHealth Group PA	C)										
Α.	Full Name of Individual (Last, First, Middle Init WINSOR, ELIZABETH, , ,	tial) or Full O	organization Name	Date of Receipt										
	Mailing Address 57 WILDERS PASS				07	1	31) / Y	y y 2022	Y				
	City CANTON	State CT	Zip Code 06019-2259						58286582 is Period	1				
	FEC ID number of contributing federal political committee.	С					-		384.6	50				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) gn CEO		M	emo	tem Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)										
в.	Full Name of Individual (Last, First, Middle Init LYON, JAMIE, , ,	tial) or Full O	Organization Name	D	ate of	f Re	eceipt							
	Mailing Address 2069 CIRCLE DRIVE			07 / D D / Y Y Y Y Y Y 2022										
	City	State	Zip Code		Transaction ID : PR2575585965821									
	KRONENWETTER	WI	54455-9062	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С	28.08											
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	1	M	emo	o Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Init MORABITO, RICHARD, , ,	tial) or Full O	organization Name	D	ate of	f Re	eceipt							
	Mailing Address 335 TUCKER HILL ROAD	1			07 ^M	/	31		y y 2022	Y				
	City MIDDLEBURY	State CT	Zip Code 06762-2430						58616582 is Period	1				
	FEC ID number of contributing federal political committee.	С		ļ			y 1	, ,	38.4	46				
	Name of Employer (for Individual) Optum Services, Inc	Occi VP I	upation (for Individual) IT		М	emo	o Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 538.44	P/R Deduction (\$38.46 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)		•••••				y	y	451.1	4				
Т	OTAL This Period (last page this line number	only)					-							

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ITEMIZED RECEIF	13		for each category of the Detailed Summary Page	×	11a	11a 11b 11c 1 11a 11b 11c 1 13 14 15 1 13 14 15 1 13 14 15 1 14 15 1 1 15 14 15 1 14 15 1 1 15 14 15 1 14 15 1 1 15 1 1 202 ransaction ID : PR257558666 nount of Each Receipt this Pe Memo Item Deduction (\$38.46 Bi-Weekly) ate of Receipt 1 202 ransaction ID : PR257558676 nount of Each Receipt this Pe nount of Each Receipt this Pe 2	12	┌─ ┐ ,_				
			not be sold or used by any pe			ourpo	ose of	soliciting				
NAME OF COMMITTEE		anu audr	ess of any political committee	: 10 50	ncit con	undu	uons ti	on sucr	Committ	ee.		
		C (Un	itedHealth Group PA	C)								
Full Name of Individual A. FINCH, ANNE, , ,	(Last, First, Middle Initial) or I	Full Orga	nization Name	1	Date of	Rec	eipt					
Mailing Address 208 ST	ATION CIR NO				м м 07	/		/ Y	y y 2022	Y		
City HUDSON	Sta WI		Zip Code 54016-9555							1		
FEC ID number of contr federal political committe	Ĵ.						-	-	76.9	92		
Name of Employer (for I Optum Services, Inc	ndividual)	Occupa VP IT	tion (for Individual)		Me	mo	ltem					
Receipt For: Primary 0 Other (specify) ▼	General Aggre	egate Yea	ar-to-Date ▼ 576.90	P	/R Dedu	ictioi	n (\$38.4	46 Bi-We	ekly)			
Full Name of Individual B. SOLLER, BRIAN,	(Last, First, Middle Initial) or I	Full Orga	nization Name		Date of	Rec	eipt					
Mailing Address 1120 S UNIT 6	14				м м 07	/		/ Y	y y 2022	Y		
City MINNEAPOLIS	Sta MN		Zip Code 55415-1375							1		
FEC ID number of contr federal political committee	ů.						-		384.6	60		
Name of Employer (for Optum Services, Inc	Individual)	Occupation (for Individual) Bus Seg CIO					Item					
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Other (specify) ▼	General	,	2884.50	P/	/R Dedu	ctior	ח (\$192	.30 Bi-W	'eekly)			
Full Name of Individual C. GISCH, SHAWN	(Last, First, Middle Initial) or F A, , ,	Full Orga	nization Name		Date of	Rec	eipt					
Mailing Address 320 PR	ESERVE COURT	*0	Zip Code		07	/	31	L	2022			
CHANHASSEN	M		55317-8717						59216582 is Period	1		
FEC ID number of contr federal political committe	ů.					,		. ,	384.6	60		
Name of Employer (for I Optum Services, Inc	ndividual)	Occupa Bus Un	tion (for Individual) it CEO		Me	emo	ltem					
Receipt For: Primary Other (specify)	General Aggre	egate Yea	ar-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts T	nis Page (optional)		•••••						846.1	2		
TOTAL This Period (last p	age this line number only)											

SCHEDULE A (FEC Form 3X) DEOFIDTO

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	y information copied from such Reports and Stat for commercial purposes, other than using the n											
<u>.</u>	NAME OF COMMITTEE (In Full)											
$\Big\rangle$	UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)								
A.	Full Name of Individual (Last, First, Middle Initial MILLER, MICHAEL, , ,) or Full Or	rganization Name		Date of	Re	ceipt					
	Mailing Address 1 CANAL STREET 802				07	/	D D D 31	/ Y	ү ү 2022	Y		
	City BOSTON	State MA	Zip Code 02114-2019	_					59566582 is Period	1		
	FEC ID number of contributing federal political committee.	С						-	384.	60		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Business Development Exe		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Initial IVERSON, LISA, , ,) or Full Or	rganization Name		Date of	Re	ceipt					
	Mailing Address 1330 EDGCUMBE RD				м м 07	/	D D D 31	/ Y	y y 2022	Y		
	City SAINT PAUL	State MN	Zip Code 55116-1780						0326582 is Period	1		
	FEC ID number of contributing federal political committee.	С	384.60									
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP S	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 2884,50	P/R Deduction (\$192.30 Bi-Weekly)								
С.	Full Name of Individual (Last, First, Middle Initial GOODMAN, BENJAMIN, , ,) or Full Or	rganization Name		Date of	Re	ceipt					
	Mailing Address 13828 EVERGREEN COURT	1 -			07 ^M	/	D 31		y y 2022			
	City APPLE VALLEY	State MN	Zip Code 55124-9257						50386582 is Period	1		
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .		384.	60		
	Name of Employer (for Individual) Optum Services, Inc		ipation (for Individual) Segment CFO		Me	emo	Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)		•				,	,	1153.	30		
т	OTAL This Period (last page this line number on	ly)	•	-			,	-				

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
			13 14 15 16 17 person for the purpose of soliciting contributions be 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. KING, SARAH, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 23 GARDEN CITY ROAD			07 / D D / Y Y Y Y 07 31 2022								
City DARIEN	State CT	Zip Code 06820-5343	Transaction ID : PR2575612865821 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 CEO	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. WAULTERS, SCOTT, , ,	e Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 38 BRISTOL ROAD			07 / D D / Y Y Y Y 2022								
City MANALAPAN	State NJ	Zip Code 07726-4160	Transaction ID : PR2575622165821 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 ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. THOMPSON, BRIAN, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 17829 63RD AVE N			07 / D D / Y Y Y Y 2022								
City MAPLE GROVE	State MN	Zip Code 55311-4650	Transaction ID : PR2575634665821 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 CEO	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	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)										

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	Un	itedHealth Group PA	NC)										
Α.	Full Name of Individual (Last, First, Middle Initia WILSON, STEPHEN, , ,	l) or Full C	Drga	nization Name		Date of Receipt									
	Mailing Address 2420 DURHAM MANOR DRIVE	1				07 31 2022									
	City FRANKLIN	State TN		Zip Code						PR2575					
			_	37064-5266	_	Amou	nt of	f Ea	ich Re	eceipt th	nis Perio	od			
	FEC ID number of contributing federal political committee.	С	_			<u> </u>	_	-		-	38	4.00			
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) an CEO			Memo	o Ite	em						
	Receipt For:	Aggregate	Yea	ar-to-Date 🔻											
	Primary General Other (specify) V		-7-	2880.00		P/R De	ducti	ion	(\$192	2.00 Bi-V	Veekly)				
в.	Full Name of Individual (Last, First, Middle Initia CLARK, TERRENCE, , ,	l) or Full C	Drga	nization Name		Date	of Re	ecei	ipt						
	Mailing Address 8 COOPER AVENUE					[™] 07		/	31	/ Y	2022	Y			
	City EDINA	State MN	Zip Code 55436-1315						PR2575 eceipt th						
	FEC ID number of contributing federal political committee.	С				-9-			38	4.60					
	Name of Employer (for Individual) United HealthCare Services Inc	Occ EVI		Memo Item											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 2884,50		P/R Deduction (\$192.30 Bi-Weekly)									
	Full Name of Individual (Last, First, Middle Initia CABANILLAS, MARIA, , ,	l) or Full C	Drga	nization Name		Date	of Re	ecei	ipt						
	Mailing Address 2411 WORDSWORTH ST					[™] 07		/	31	/ Y	2022	Y			
	City	State		Zip Code		Trar	nsact	tion	ID :	PR2575	637365	821			
	HOUSTON	ТХ		77030-1833		Amou	nt of	f Ea	ch Re	eceipt th	nis Perio	bd			
	FEC ID number of contributing federal political committee.	С				<u> </u>		9		,	38	4.60			
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) In CEO			Memo	io It	em						
	Receipt For: Primary General Other (specify)	Aggregate	P/R Deduction (\$192.30 Bi-Weekly)												
S	JBTOTAL of Receipts This Page (optional)					Γ.					115	3.20			
т	OTAL This Period (last page this line number on	ly)		······	-			-				-			

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
			13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)	-										
> UnitedHealth Group Incorpor	rated PAC (l	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middle	e Initial) or Full O	rganization Name									
A. COLLINS, NEIL, , , Mailing Address 8465 MISSION HILLS LA			Date of Receipt								
Maining Address 8465 MISSION HILLS LA	INE		07 31 2022								
City	State	Zip Code	Transaction ID : PR2575637665821								
CHANHASSEN	MN	55317-7712	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.00								
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item								
United HealthCare Services Inc	VP	Gen Mgmt									
Receipt For:	Aggregate	Year-to-Date ▼	P/P Deduction (\$14.00 Ri Wookhy)								
Other (specify) ▼		210.00	P/R Deduction (\$14.00 Bi-Weekly)								
		7	-								
Full Name of Individual (Last, First, Middle B. HERMAN, CRAIG, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 9609 WYOMING CIRCLE			07 31 2022								
City	State	Zip Code	Transaction ID : PR2575650265821								
BLOOMINGTON	MN	55438-1628	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:	Aggregate	Year-to-Date ▼									
Other (specify) ▼		2884.50	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. HAYHURST, JENNY, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 23A MOUNT HYGEIA RC	DAD		M = M / D = D / Y = Y = Y = Y								
City	State	Zip Code	07 31 2022 Transaction ID : PR2575651865821								
FOSTER	RI	02825-1434	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.00								
Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item								
United HealthCare Services Inc	VPI	Itwk Contrctng									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optiona	I)		440.60								
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SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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			for each category of the Detailed Summary Page	×	11a 13	\vdash	11b	11c 15	12	_	17	
			not be sold or used by any pe dress of any political committee		for the	purp	ose of :	soliciting	g contri	butior	ns	
NAME OF COMMITTE	. ,	PAC (UI	nitedHealth Group PA	NC)								
Full Name of Individua A. KANE, HEATHER,	l (Last, First, Middle Initial)	or Full Org	anization Name	Date of Receipt								
Mailing Address 7624	N MOUNTAIN VIEW PASS											
City PARADISE VALLEY		State AZ	Zip Code 85253-2844					PR25756 eceipt th				
FEC ID number of confederal political commit	Ũ	С					y- 1		38	34.60		
Name of Employer (fo United HealthCare Ser	,		ation (for Individual) Ian CEO		Me	emo	Item					
Receipt For: Primary Other (specify)	General	ggregate Ye	ear-to-Date ▼ 2884.50	P	/R Ded	uctio	n (\$192	.30 Bi-W	/eekly)			
Full Name of Individua B. WARSHAW, RO	l (Last, First, Middle Initial) BERT, , ,	or Full Org	anization Name		Date of	Rec	ceipt					
Mailing Address 94 C/	ARLSON DRIVE	a			м м 07	/	D D D 31	/ Y	2022			
City PORTLAND		State CT	Zip Code 06480-1699					PR25756		-		
FEC ID number of confederal political commi	Ũ	C		Amount of Each Receipt this Period								
Name of Employer (fo United HealthCare Ser		Occup VP O	ation (for Individual)		Me	emo	Item					
Receipt For: Primary Other (specify)	General	ggregate Ye	ear-to-Date ▼ 210.60	P/	/R Dedi	uctio	n (\$14.0)4 Bi-We	ekly)			
Full Name of Individua	l (Last, First, Middle Initial)	or Full Org	anization Name		Date of	Rec	ceipt					
Mailing Address 1050	7 WALPOLE LANE				м м 07	/	D D D 31	L	2022]	
City AUSTIN		State TX	Zip Code 78739-1554	/				PR2575				
FEC ID number of confederal political commi	ů.	С					y	,	2	28.08		
Optum Services, Inc			ation (for Individual) wk Prgms		M	emo	ltem					
Receipt For: Primary Other (specify)	General A	ggregate Ye	ear-to-Date ▼ 210.60	P	P/R Ded	uctio	on (\$14.0	04 Bi-We	∍ekly)			
SUBTOTAL of Receipts	This Page (optional)		••••••				,	. ,	44	0.76		
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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			for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Stat for commercial purposes, other than using the n			prson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (I	JnitedHealth Group PA	C)
Α.	Full Name of Individual (Last, First, Middle Initial ALLEN, CARL, , ,	l) or Full C	organization Name	Date of Receipt
	Mailing Address 8675 AZURE SKY DRIVE			07 / D D / Y Y Y Y 07 31 2022
	City LAS VEGAS	State NV	Zip Code 89129-2227	Transaction ID : PR2575669365821
	LAS VEGAS		09129-2227	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		78.00
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Dir/CMO	Memo Item
	Receipt For:	Aggregate	Year-to-Date V	
	Primary General Other (specify) ▼		585.00	P/R Deduction (\$39.00 Bi-Weekly)
в.	Full Name of Individual (Last, First, Middle Initia LEON, LINDA, , ,	l) or Full C	Prganization Name	Date of Receipt
	Mailing Address 19 ENSIGN LANE			07 31 2022
	City MASSAPEQUA	State NY	Zip Code 11758-7839	Transaction ID : PR2575671865821 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: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)
с.	Full Name of Individual (Last, First, Middle Initia BOGATYRENKO, VICTORIA, , ,	l) or Full C	organization Name	Date of Receipt
	Mailing Address 98 FIVE MILE RIVER ROAD			07 31 Y Y Y Y 2022
	City	State	Zip Code	Transaction ID : PR2575675465821
	DARIEN	СТ	06820-6234	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.18
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 863.85	P/R Deduction (\$57.59 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)			577.78
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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page			11b	11c	12				
Any information copied from such Reports and S											
or for commercial purposes, other than using the	e name and a	ddress of any political committee	e to solicit co	ontrib	outions f	rom such	n committ	ee.			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle Ini MITCHELL, JILL, , ,	itial) or Full O	rganization Name	Date o	of Re	eceipt						
Mailing Address 11499 ASHLEY COURT			07 31 2022								
City INVER GROVE HEIGHTS	State MN	Zip Code 55077-5251					57836582 is Period	1			
FEC ID number of contributing federal political committee.	С						76.9	92			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Pres Ntwk Mgmt		/lemc	tem						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R De	ductio	on (\$38.	46 Bi-We	eekly)				
Full Name of Individual (Last, First, Middle Ini B. SIMONSON, KELLY, , ,	itial) or Full O	rganization Name	Date o	of Re	eceipt						
Mailing Address 10982 SANCTUARY COVE C			07	/	31	/ Y	2022	Y			
City LAS VEGAS	State NV	Zip Code 89135-9126					8236582 is Period	1			
FEC ID number of contributing federal political committee.	С		92.30								
Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) Gen Mgmt		/lemc	tem						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 692.25	P/R Dec	ductio	on (\$46.	15 Bi-We	ekly)				
Full Name of Individual (Last, First, Middle Ini	itial) or Full O	rganization Name	Date o	of Re	eceipt						
Mailing Address 6504 CHEROKEE TRAIL			07	Л /	31	/ Y	2022 Y	Y			
City EDINA	State MN	Zip Code 55439-1109					58386582 is Period	1			
FEC ID number of contributing federal political committee.	С				,		384.6	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 ▼ 2884.50	P/R De	ducti	on (\$19:	2.30 Bi-W	/eekly)				
SUBTOTAL of Receipts This Page (optional)					, .		553.8	32			
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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)									
ILEIVIIZED KEGEIPIS		for each category of the Detailed Summary Page	X 11a	a 🗌	11b	11c	12					
Any information copied from such Reports an												
or for commercial purposes, other than using	the name and a	ddress of any political committee	e to solicit	contri	butions	from such	n committ	96.				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)									
Full Name of Individual (Last, First, Middle OCHIPINTI, JOSEPH, , ,	Initial) or Full C	organization Name	Date	of R	eceipt							
Mailing Address 20 DEAN STREET			07 / D D / Y Y Y Y Y 07 31 2022									
City ANNAPOLIS	State MD	Zip Code 21401-2716					68576582 iis Period	1				
FEC ID number of contributing federal political committee.	С				-		384.6	50				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) I Plan CEO		Mem	o Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R D	educt	tion (\$19	2.30 Bi-W	/eekly)					
Full Name of Individual (Last, First, Middle B. BURCH, TIMOTHY, , ,	Initial) or Full C	rganization Name	Date	of R	eceipt							
Mailing Address 67 WHAPLEY RD			0		31		2022	Y				
City GLASTONBURY	State CT	Zip Code 06033-2920					8646582					
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) buty Gen Counsel Mgr		Mem	io Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.45	P/R D	educt	ion (\$19	.23 Bi-We	ekly)					
Full Name of Individual (Last, First, Middle C. KALBACHER, JEAN, , ,	Initial) or Full C	organization Name	Date	of R	eceipt							
Mailing Address 4952 EAST DARTMOUTH	STREET		M 0	7 7	/ D 31		y y 2022	Ŷ				
City MESA	State AZ	Zip Code 85205-6458					68836582 iis Period	1				
FEC ID number of contributing federal political committee.	С				y .	9	176.9	92				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Mem	io Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1326.90	P/R D	educ	tion (\$88	8.46 Bi-We	eekly)					
SUBTOTAL of Receipts This Page (optional)					, .		599.9	98				
TOTAL This Period (last page this line numb	per only)				41	-						

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	RECEIPTS		for each category of the Detailed Summary Page		X 11a 13		11b 14	11c	12	17					
	on copied from such Reports and Sta rcial purposes, other than using the n				for the		oose of	soliciting	g contribu	tions					
	COMMITTEE (In Full) Health Group Incorporated	I PAC (U	InitedHealth Group PA	AC)											
Full Name A. FINE, BF	of Individual (Last, First, Middle Initia RETT, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt								
Mailing Ad	dress 707 STONINGTON ROAD			07 31 2022											
City SILVER S	PRING	State MD	Zip Code 20902-1549						6 9286582 iis Period						
	mber of contributing itical committee.	С					7	-	384.	60					
	mployer (for Individual) IthCare Services Inc		pation (for Individual) Corp Strat		Me	emo	Item								
Receipt Fo		Aggregate \	/ear-to-Date ▼ 2884.50]	P/R Ded	uctic	on (\$192	2.30 Bi-W	/eekly)						
	of Individual (Last, First, Middle Initia OCKI, ELIZABETH, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt								
	dress 821 HIBISCUS CT			07 / 31 / 2022 Transaction ID : PR2575705865821											
City CORONA	DEL MAR	State CA	Zip Code 92625-1548												
FEC ID nu	mber of contributing itical committee.	С		Amount of Each Receipt this Period 384.60											
Name of E United Hea	mployer (for Individual) IthCare Services Inc	Occu Hlth		Me	emo	Item									
Receipt Fo		Aggregate	/ear-to-Date ▼ 2884.50]	P/R Dedu	uctio	on (\$192	2.30 Bi-W	/eekly)						
	of Individual (Last, First, Middle Initia Y, LINDA, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt								
	dress 999 LABEAUX AVE NE	Otata			07 ^M	/	31		2022						
	2	State MN	Zip Code 55341-9292	_					70786582 iis Period						
	mber of contributing itical committee.	С			<u> </u>		9	, y	76.	92					
United Hea	imployer (for Individual) althCare Services Inc	Occu VP Fi	pation (for Individual) n	Memo Item											
Receipt Fo		Aggregate	/ear-to-Date ▼ 576.90		P/R Ded	uctio	on (\$38.	46 Bi-We	∍ekly)						
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116	MIZED RECEIPTS		for each category of the Detailed Summary Page		X 11a		11b	11c	12	Γ.	-	
	r information copied from such Reports and Stat or commercial purposes, other than using the na									utions	7	
	NAME OF COMMITTEE (In Full)			\sim								
	UnitedHealth Group Incorporated	PAC (L	InitedHealth Group PA	C)								
	Full Name of Individual (Last, First, Middle Initial WILSON, D ELLEN, , ,) or Full Or	rganization Name		Date of	Re	eceipt					
ſ	Mailing Address 400 STUART STREET 25D			07 31 2022								
	Dity BOSTON	State MA	Zip Code					PR2575				
-			02116-5011	_	Amount	of	Each F	Receipt th	nis Perio	d		
	FEC ID number of contributing rederal political committee.	С			Ľ.	_		-	192	2.30	I.	
l	Name of Employer (for Individual) Jnited HealthCare Services Inc		ipation (for Individual) UnitedHIth Grp		Me	emc	o Item					
I	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2692.20		P/R Ded	ucti	on (\$19	2.30 Bi-V	Veekly)			
	Full Name of Individual (Last, First, Middle Initial VOLLRATH, MICHELLE, , ,) or Full Or	rganization Name		Date of	Re	eceipt					
-	Mailing Address 7647 MARKER ROAD	1 -			07	1	D 31		2022	Y		
	City SAN DIEGO	State CA	Zip Code 92130-5616					PR25757				
F	FEC ID number of contributing rederal political committee.	C		Amount of Each Receipt this Period								
- I L	Name of Employer (for Individual) Jnited HealthCare Services Inc	Occi URS	Memo Item									
Ī	Receipt For:		Year-to-Date ▼	—								
	Other (specify)		, 865.35		P/R Dedu	uctio	on (\$57	.69 Bi-We	eekly)			
	Full Name of Individual (Last, First, Middle Initial CAIN, STEVE, , ,) or Full Or	rganization Name		Date of	Re	eceipt					
-	Mailing Address 4 COUNTRYSIDE CT	1			07	1	31		y y 2022	Ŷ		
	City DANVILLE	State CA	Zip Code 94506-1126					PR2575				
	FEC ID number of contributing rederal political committee.	С					1	locolpt u).76]	
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Plan CEO		M	emo	o Item					
Ī	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1730.70		P/R Ded	ucti	on (\$11	5.38 Bi-V	Veekly)			
รเ	BTOTAL of Receipts This Page (optional)		•	. I			,		538	3.44]	
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II EIVIIZED RECEIFIO		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
			erson for the purpose of soliciting contributions to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Midd A. MCKEE, PATRICK, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 6500 TRANQUIL RIVER	LANE		07 31 2022								
City WAUSAU	State WI	Zip Code 54401-3302	Transaction ID : PR2575726765821 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		38.46								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.45	P/R Deduction (\$19.23 Bi-Weekly)								
Full Name of Individual (Last, First, Midd B. OLSON, KRISTIN, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 5901 TRACY AVENUE			07 / D D / Y Y Y Y 2022								
City EDINA	State MN	Zip Code 55436-2516	Transaction ID : PR2575734465821								
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 28.08								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Empl Rel	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)								
Full Name of Individual (Last, First, Midd GROSKLAGS, JEFFREY, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 3233 TIMBERWOLF CIF			07 / D D / Y Y Y Y 2022								
City PRIOR LAKE	State MN	Zip Code 55372-3272	Transaction ID : PR2575735765821 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		192.30								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Group CFO	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1442.25	P/R Deduction (\$96.15 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optiona	l)		258.84								
TOTAL This Period (last page this line nun	nber only)										

SCHEDULE A (FEC Form 3X) DEOFIDTO

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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 version for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Fu		JnitedHealth Group P/	AC)									
Full Name of Individual (Last, I MURRAY, THOMAS, , ,	First, Middle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 10 CIRCLE W	EST											
City EDINA	State MN	Zip Code 55436-1313	Transaction ID : PR2575736565821 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		384.60									
Name of Employer (for Individu United HealthCare Services Inc		upation (for Individual) Segment COO	Memo Item									
Receipt For: Primary Genera Other (specify) ▼		Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, I B. LEWIS, ELIZABETH, , ,	First, Middle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 675 PLEASAN			07 31 Y Y Y Y Y Y 2022									
CITANITASSEN	State	Zip Code	Transaction ID : PR2575737465821									
CHANHASSEN	IVIN	55317-9509	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		76.92									
Name of Employer (for Individu Optum Services, Inc	,	upation (for Individual) Actuary	Memo Item									
Receipt For: Primary Genera Other (specify) ▼		Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, I c. CESARETTI, GINA, ,		rganization Name	Date of Receipt									
Mailing Address 5020 CIRCLE	DOWN		07 31 Y Y Y Y Y 2022									
City GOLDEN VALLEY	State MN	Zip Code 55416-1304	Transaction ID : PR2575739065821 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		384.60									
Name of Employer (for Individu United HealthCare Services Inc		upation (for Individual) Compliance	Memo Item									
Receipt For: Primary Genera Other (specify)		Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Pag	ge (optional)		846.12									
TOTAL This Period (last page th	is line number only)											

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
Any information copied from such Reports and or for commercial purposes, other than using			13 14 15 16 17 erson for the purpose of soliciting contributions from such committee								
		uness of any pullical continue									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle STRICKLAND, JULIE, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 3207 SUNNYWOOD DRIV	E		07 31 2022								
City FULLERTON	State CA	Zip Code 92835-1858	Transaction ID : PR2575740965821 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle PORTZ, THOMAS, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 2119 SHERIDAN HILLS R			07 / D D / Y Y Y Y Y Y 2022								
City WAYZATA	State MN	Zip Code	Transaction ID : PR2575744565821								
		55391-2327	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		200.00								
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) Fin	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify) ▼		1500.00	P/R Deduction (\$100.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle PROBST, PETER, , ,		rganization Name	Date of Receipt								
Mailing Address 1927 SAUNDERS AVENU		Zip Code	07 31 2022								
City SAINT PAUL	State MN	Zip Code 55116-2016	Transaction ID : PR2575744665821 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		200.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clin Affordability	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1500.00	P/R Deduction (\$100.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			428.00								
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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 r			erson for	the pu	urpose of	soliciting	, contri	butio	ns		
$\left\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	InitedHealth Group PA	NC)								
A.	Full Name of Individual (Last, First, Middle Initia PINERSKI, JENNIFER, , ,	l) or Full Or	ganization Name	Date of Receipt								
	Mailing Address 7501 HART LN			07 31 2022								
	City AUSTIN	State TX	Zip Code 78731-2237			ction ID : of Each F						
	FEC ID number of contributing federal political committee.	С						7	76.92			
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Plan CEO		Men	no Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 576.90	P/R	Deduc	tion (\$38	.46 Bi-We	ekly)				
В.	Full Name of Individual (Last, First, Middle Initia FULTON, RYAN, , ,	l) or Full Or	ganization Name	Dat	e of F	Receipt						
	Mailing Address 805 LANEWOOD LANE NORTH		-		07 [™]	/ D I		2022]		
	City PLYMOUTH	State MN	Zip Code 55447-4347			tion ID : of Each F			-			
	FEC ID number of contributing federal political committee.	С		384.60								
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP (ipation (for Individual) Clms	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ , 2884.50	P/R	Deduc	tion (\$192	2.30 Bi-W	'eekly)				
с.	Full Name of Individual (Last, First, Middle Initia EKLO, BENJAMIN, , ,	l) or Full Or	ganization Name	Dat	e of F	Receipt						
	Mailing Address 3942 CAMPELLO CURVE	State	Zip Code		07 ^M	/ 31		2022]		
	CHASKA	MN	55318-4639			ction ID : of Each F						
	FEC ID number of contributing federal political committee.	С				y	. ,	38	34.60			
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Segment CFO		Mer	no Item						
	Receipt For: Primary General Other (specify)	Aggregate `	Year-to-Date ▼ 2884.50	P/R	Deduc	ction (\$19	2.30 Bi-W	/eekly)				
s	UBTOTAL of Receipts This Page (optional)		••••••			9	. ,	84	16.12			
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PAGE 108 OF

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Ar	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	I ay not be sold or used by any pe Iddress of any political committee	erson	for the	pur	pose of	soliciting	g cont	ributio	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 HOWARTH, CRAIG, , ,	al) or Full O	rganization Name		Date o	f Re	eceipt						
	Mailing Address 1820 NAPOLI DRIVE			07 / D D / Y Y Y Y 07 31 2022									
	City APEX	State NC	Zip Code 27502-9659					PR2575					
	FEC ID number of contributing federal political committee.	С								76.92	2		
	Name of Employer (for Individual) Optum Services, Inc	Occu VP I	upation (for Individual) IT		M	lemo	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	F	P/R Dec	lucti	on (\$38.	.46 Bi-We	eekly)				
B.	Full Name of Individual (Last, First, Middle Initi NEESE, LARRY, , ,	al) or Full O	rganization Name		Date o	f Re	eceipt						
	Mailing Address 309 DUNLEIGH COURT			07 / 31 / 2022 Transaction ID : PR2575766165821									
	City MADISON	State MS	Zip Code 39110-6806										
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Sr Acct Exe Acct Opt Out Mk	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.70	F	P/R Ded	lucti	on (\$15.	38 Bi-We	eekly)				
C.	Full Name of Individual (Last, First, Middle Initi PAIK, JESSICA, , ,	al) or Full O	rganization Name		Date o	f Re	eceipt						
	Mailing Address 18 BUTTONWOOD LANE EAS				07		31		202	2			
	City RUMSON	State NJ	Zip Code 07760-1010					PR2575 Receipt 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) Unit CEO		N	lemo	o Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50		P/R Dec	ducti	on (\$19	2.30 Bi-V	Veekly	/)			
	UBTOTAL of Receipts This Page (optional)			-			9 	5	4	192.28	3		

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٨	y information copied from such Reports and S	tatemente m	av not be sold or used by any m		13 for the	nur	14	15 soliciting	16	17 ions		
	for commercial purposes, other than using the											
\setminus	NAME OF COMMITTEE (In Full)	/		-								
	UnitedHealth Group Incorporate	ed PAC (I	UnitedHealth Group PA	AC)								
<u> </u>	Full Name of Individual (Last, First, Middle Init	ial) or Full C	Organization Name									
Α.	MADDUX, SUSAN, , ,				Date of	f Re	ceipt					
	Mailing Address 16426 FARMERS MILL LANE				07	1	31	/ Y	y y 2022	Y		
	City	State	Zip Code		Trans	acti	on ID :	PR25757	78386582	1		
	CHESTERFIELD	MO	63005-4549		Amount	t of	Each R	eceipt th	is Period			
	FEC ID number of contributing	С							28.0)8		
	federal political committee.											
	Name of Employer (for Individual)		upation (for Individual)	M	emo	Item						
	United HealthCare Services Inc Receipt For:		Pharmacy Programs									
	Primary General	Aggregate	Year-to-Date ▼	ı İ.	P/R Ded	uctio	on (\$14.	04 Bi-We	ekly)			
	Other (specify) ▼		210.60						• /			
	Full Name of Individual (Last First Middle Init	ial) or Full (Vrappization Namo									
Full Name of Individual (Last, First, Middle Initial) or B. SUAREZ, MARIO, , ,			nganization name		Date of	f Re	ceipt					
	Mailing Address 21294 SMOKEHOUSE CT				^M 07	/	D D D 31	/ Y	2022	Y		
	City	State	Zip Code						′8736582 [.]			
	ASHBURN	VA	20147-5316	_	Amount	t of	Each R	eceipt th	is Period			
	FEC ID number of contributing federal political committee.	ů – L					76.92					
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Product		M	emo	Item					
	Receipt For:	Aggregate	Year-to-Date V		1							
	Primary General Other (specify) ▼		576.90	11	P/R Ded	uctio	on (\$38.	46 Bi-We	ekly)			
с.	Full Name of Individual (Last, First, Middle Init BERGDOLL, JENNIFER, , ,	ial) or Full C	Organization Name		Date of	f Re	ceipt					
	Mailing Address 230 HARRIS PEAK ST				MM	/	DDD	/ Y	YYY	Y		
	City	State	Zip Code	_	07 Trans	acti	31	DD25757	2022 7 9376582	1		
	LAS VEGAS	NV	89138-6351						is Period	1		
	FEC ID number of contributing	C								2		
	federal political committee.	С				-	y	y	76.9	2		
	Name of Employer (for Individual)	Occ	upation (for Individual)		М	emo	Item					
	Optum Services, Inc	VP I	Human Capital Partner									
	Receipt For:	Aggregate	Year-to-Date ▼			lucti	on (¢28		okly)			
	Other (specify)			P/R Deduction (\$38.46 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)		••••••	•			,	y	181.9	92		
т	OTAL This Period (last page this line number of	only)		•								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		11a 13		11b	11c	12		17		
	y information copied from such Reports and Sta for commercial purposes, other than using the r				for the		pose of	soliciting	contrib		IS		
	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , ,										
\rangle	UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	AC)									
A.	Full Name of Individual (Last, First, Middle Initia SANKEN, SARA, , ,	al) or Full O	rganization Name		Date of	Re	ceipt						
	Mailing Address 3018 ASPEN LAKE DRIVE				07 31 2022								
	City BLAINE	State MN	Zip Code 55449-7517		Transaction ID : PR2575798565821 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С						28	8.08				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Human Capital Partner		Me	emo	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate]	P/R Ded	uctio	on (\$14.	04 Bi-We	ekly)					
в.	Full Name of Individual (Last, First, Middle Initia WIX, LACOSTA, , ,	al) or Full Oi	rganization Name		Date of	Re	ceipt						
Mailing Address 402 JULIA STREET 					^M 07	/	D D D 31	/ Y	y y 2022	Y			
	City NEW ORLEANS	State LA	Zip Code 70130-3699					PR25758					
	FEC ID number of contributing federal political committee.	C				Amount of Each Receipt this Period							
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) Sr Assc Gen Counsel			Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)									
C.	Full Name of Individual (Last, First, Middle Initia GALIAN, SANDRA, , ,	al) or Full O	rganization Name		Date of	Re	ceipt						
	Mailing Address 120 SEQUAMS LANE WEST	01-1-	7. 0.4		07 ^M		31		2022				
	City WEST ISLIP	State NY	Zip Code 11795-4549					PR25758 eceipt th					
	FEC ID number of contributing federal political committee.	С			<u> </u>		,	9	76	6.92			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Itwk Contrctng		M	emc	tem						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)			<u> </u>					18 ⁻	1.92			
т	OTAL This Period (last page this line number or	וy)		•						-			

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
or for commercial purposes, other than usin			erson for the purpose of soliciting contributions to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (l	JnitedHealth Group PA	AC)					
Full Name of Individual (Last, First, Midd LEVINE, CAROL, , ,	lle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 9100 LARKSPUR LANE			07 / D D / Y Y Y Y Y 2022					
City EDEN PRAIRIE	State MN	Zip Code 55347-2004	Transaction ID : PR2575803365821					
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) ? Cust Strategy	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Midd RUSSELL, LAURIE, , ,	rganization Name	Date of Receipt						
Mailing Address 3108 SONIA DRIVE	1-		07 31 Y Y Y Y Y					
City LAS VEGAS	State NV	Zip Code 89107-3246	Transaction ID : PR2575812165821 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		78.00					
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 ▼ 585.00	P/R Deduction (\$39.00 Bi-Weekly)					
Full Name of Individual (Last, First, Midd LATINO, DAYNA, , ,	lle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 41 BROOK CROSSING	1		07 / D D / Y Y Y Y Y 2022					
City ELLINGTON	State CT	Zip Code 06029-2247	Transaction ID : PR2575813265821 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		76.92					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) f of Staff	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)					
SUBTOTAL of Receipts This Page (option	al)		539.52					
TOTAL This Period (last page this line nur	mber only)	•••••						

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
or for commercial purposes, other than using			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle A. SCHENEMAN, STEPHEN, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 428 8TH ST			07 / D D / Y Y Y Y Y 2022						
City HUNTINGTON BEACH	State CA	Zip Code 92648-4629	Transaction ID : PR2575813465821						
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clin Affordability	Memo Item						
Receipt For: Primary General Other (specify) ▼	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle SHAPIRO, DAVID, , ,	Date of Receipt								
Mailing Address 5215 MORGAN AVENUE			07 31 Y Y Y Y Y 2022						
City MINNEAPOLIS	State MN	Zip Code 55419-1026	Transaction ID : PR2575814265821 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) Seg Chief Cnsmr Off	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. TAYLOR, DUSTIN, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 7512 NE 34TH UNIT 2C			07 / D D / Y Y Y Y Y 2022						
City VANCOUVER	State WA	Zip Code 98665-0709	Transaction ID : PR2575818165821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Pres Ntwk Mgmt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional))		538.44						
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	y information copied from such Reports and Stat for commercial purposes, other than using the n				or the		oose of	soliciting	cont	ributio	ons	
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	InitedHealth Group PA	C)								
A.	Full Name of Individual (Last, First, Middle Initial MCNATT, RICHARD, , ,) or Full Or	ganization Name	[Date of	Re	ceipt					
	Mailing Address 4945 CANDACRAIG				07 31 2022							
City ALPHARETTA		State GA	Zip Code 30022-6340		Transaction ID : PR2575824965821 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С					.	-7	3	384.60	0	
	Name of Employer (for Individual) United HealthCare Services Inc	Occu SVP	pation (for Individual) SIs		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	P	/R Dedi	uctio	on (\$192	2.30 Bi-W	/eekly	')			
в.	Full Name of Individual (Last, First, Middle Initial KAUFMAN, PHILIP, , ,) or Full Or	ganization Name	[Date of	Re	ceipt					
	Mailing Address 1580 BOHNS POINT ROAD						D D 31	/ Y	202	2 2	ſ	
	City WAYZATA	State MN	Zip Code 55391-9309					PR25758 eceipt th				
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) CEO IFP & Chief Cnsmr/Grwth			384.60							
	Name of Employer (for Individual) United HealthCare Services Inc				Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$192.30 Bi-Weekly)									
С.	Full Name of Individual (Last, First, Middle Initial SCHMITT, MARIE, , ,) or Full Or	ganization Name		Date of	Re	ceipt					
	Mailing Address 3045 25TH AVENUE	1			07 ^M	1	D D D 31	JL	202	-		
	City SAN FRANCISCO	State CA	Zip Code 94132-1541	-			-	PR25758 eceipt th				
	FEC ID number of contributing federal political committee.	С					9	9		76.92	2	
Name of Employer (for Individual) United HealthCare Services Inc			pation (for Individual) 'P CInt Relationship		Me	emo	Item					
Receipt For: And the second			ggregate Year-to-Date ▼ 576.90				P/R Deduction (\$38.46 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)						9		8	346.12	2	
Т	OTAL This Period (last page this line number on	ly)	••••••				,			-		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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ITEMIZED RECEIFIS	Detailed Summary Page	×	11a]11b)	11c	12				
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Any information copied from such Reports or for commercial purposes, other than us												
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorp	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Mi HARPER, JENNIFER, , ,	ddle Initial) or Full C	rganization Name	C	Date of Receipt								
Mailing Address 8206 WEST 16TH ST	REET			^м М 07	/		31	/ Y	y y 2022	Y		
City SAINT LOUIS PARK	State MN	Zip Code 55426-1904	A	Transaction ID : PR2575835565821 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		28.08									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) outy Gen Counsel	Memo Item									
Receipt For: Primary General Other (specify) ▼	P/	R Dedi	uctio	on (\$	\$14.04	4 Bi-We	∋ekly)					
Full Name of Individual (Last, First, Mi JERDE, MARY, , ,	rganization Name		ate of	Re	eceip	ot						
Mailing Address 9324 N AERIE CLIFF				™ М 07	/		31	/ Y	y y 2022	Y		
City FOUNTAIN HILLS	State AZ								83746582 nis Period	1		
FEC ID number of contributing federal political committee.	C	C Occupation (for Individual) VP Med Clin Ops				115.38						
Name of Employer (for Individual) United HealthCare Services Inc						Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Aggregate Year-to-Date ▼ 865.35				P/R Deduction (\$57.69 Bi-Weekly)						
Full Name of Individual (Last, First, Mi C. MANDELL, WILLIAM, , ,		rganization Name		ate of	Re	eceip	ot					
Mailing Address 720 MISSION HILL W				07 ^M	/	L	31	/ Y	ү ү 2022			
City COLORADO SPRINGS	State CO	Zip Code 80921-2672	A						83786582 nis Period	1		
FEC ID number of contributing federal political committee.	C		1	_	_	y		y	28.0	08		
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Ied Dir		Me	əmo	o Iter	m					
Receipt For: Primary General Other (specify)	Aggregate	Aggregate Year-to-Date ▼ 210.60						4 Bi-We	ekly)			
SUBTOTAL of Receipts This Page (option	onal)	•	. [,		y	171.{	54		
TOTAL This Period (last page this line n	umber only)		. [,		-				

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	IEMIZED RECEIFIS		for each category of the Detailed Summary Page		× 11a 13		11b	11c	12	Г	17		
	r information copied from such Reports and Sta or commercial purposes, other than using the n				for the		oose of	soliciting	contrib		ıs		
	NAME OF COMMITTEE (In Full)												
\rangle	UnitedHealth Group Incorporated	I PAC (U	InitedHealth Group PA	AC)									
	Full Name of Individual (Last, First, Middle Initia	l) or Full Or	ganization Name										
	HARRISON, CHARLES, , ,			Date of Receipt									
r	Mailing Address 10603 MILLET SEED HILL				07 31 2022								
	City	State	Zip Code		Transaction ID : PR2575840365821								
_	COLUMBIA	MD	21044-4150		Amount	t of	Each R	eceipt th	is Perio	d			
	FEC ID number of contributing ederal political committee.	С					, .	-	28	8.08			
1	Name of Employer (for Individual)	Occu	pation (for Individual)		M	emo	Item						
_	Jnited HealthCare Services Inc	Sr M	ed Dir										
F	Receipt For:	Aggregate	Year-to-Date ▼				(0.1.1)						
	Other (specify)	· · ·	210.60	11.	P/R Ded	uctic	on (\$14.0	04 Bi-We	ekly)				
			y										
	Full Name of Individual (Last, First, Middle Initia BOROCH, BLAIR, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt						
_	Mailing Address 800 BELFRY DRIVE						31	/ Y	2022	Y			
		State PA	Zip Code					PR25758					
-			19422-1210		Amount	t of	Each R	eceipt th	is Perio	d	_		
	FEC ID number of contributing federal political committee.						410.00						
	Name of Employer (for Individual) Inited HealthCare Services Inc	Occupation (for Individual) Hlth Plan CEO			Memo Item								
Ē	Receipt For:	Aggregate	Year-to-Date ▼		1								
	Primary General Other (specify) ▼		, 2745.00	1 '	P/R Deduction (\$205.00 Bi-Weekly)								
	Full Name of Individual (Last, First, Middle Initia GOLDEN, WILLIAM, , ,	l) or Full Or	ganization Name		Date of	Bo	ceint						
-	Mailing Address 106 SOUND COURT							/ Y	Y Y	Y			
_					07		31	L	2022				
	City NORTHPORT	State NY	Zip Code 11768-3527					PR25758 eceipt th					
-	EC ID number of contributing				Amoun	. 01		eceipt tii	IS Fello	u	-		
	ederal political committee.	С			Ļ.	-	y	y	384	4.60	_		
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Segment CEO		Memo Item								
F	Receipt For:	Aggregate	Year-to-Date 🔻										
	Other (specify)		2884.50				P/R Deduction (\$192.30 Bi-Weekly)						
su	IBTOTAL of Receipts This Page (optional)				<u> </u>				822	2.68	Π		
				_		-	,	7					
TO	TAL This Period (last page this line number or	ıly)		•	1		- 1 - T	1.00		-			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

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			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements ma name and a	ay not be sold or used by any pendotes of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.						
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	NC)						
Α.	Full Name of Individual (Last, First, Middle Initia COTTINGTON, NYLE BRENT, , ,	l) or Full O	rganization Name	Date of Receipt						
	Mailing Address 15050 47TH STREET NE			07 / D D / Y Y Y Y Y 2022						
		State MN	Zip Code	Transaction ID : PR2575865365821						
	SAINT MICHAEL		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		upation (for Individual) Acctng	Memo Item						
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General Other (specify) ▼		2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
B.	Full Name of Individual (Last, First, Middle Initia	rganization Name	Date of Receipt							
	Mailing Address 3109 E DESERT LN			07 31 2022						
	City	State	Zip Code	Transaction ID : PR2575867865821						
	PHOENIX	AZ	85042-7198	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С	76.92							
	Name of Employer (for Individual) Optum Services, Inc	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Initia ROSS, CHRISTY, , ,	l) or Full O	rganization Name	Date of Receipt						
	Mailing Address 211 JIM CANNON RD			07 31 2022						
	City	State	Zip Code	Transaction ID : PR2575873365821						
	VAN ALSTYNE	TX	75495-2803	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		77.00						
	Name of Employer (for Individual) Optum Services, Inc	Occi VP (upation (for Individual) Ops	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 577.50	P/R Deduction (\$38.50 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)			538.52						
Т	OTAL This Period (last page this line number or	ıly)								

SCHEDULE A (FEC Form 3X) DEOFIDTO

Use separate schedule(s)

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PAGE 117 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 erson for the purpose of soliciting contributions 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 PEZHMAN, PAYMAN , , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 2825 MAPLEWOOD CIR			07 31 2022							
City WAYZATA	State MN	Zip Code 55391-2633	Transaction ID : PR2575883565821 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 Gen Counsel	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. SCHMUKER, ERIN, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 2575 TALL TIMBER COU			07 31 Y Y Y Y Y 2022							
City GRAND RAPIDS	State	Zip Code 49546-6787	Transaction ID : PR2575906665821							
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	P/R Deduction (\$19.23 Bi-Weekly)							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.45								
Full Name of Individual (Last, First, Middle C. ALT, ROBERT, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 133 PHEASANT FIELDS	1		07 / D D / Y Y Y Y Y 2022							
City MOORESTOWN	State NJ	Zip Code 08057-1431	Transaction ID : PR2575907365821 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.08							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Itwk Prgms	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optiona)		451.14							
TOTAL This Period (last page this line num	ber only)									

Use separate schedule(s)

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	EMIZED RECEIPIS		for each category of the Detailed Summary Page	X 11a 11b 11c 12							
	y information copied from such Reports and State for commercial purposes, other than using the na										
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	JnitedHealth Group PA	C)							
Α.	Full Name of Individual (Last, First, Middle Initial) MARGHERIO, MICHAEL, , , Mailing Address 6412 JEFFERSON STREET	or Full C	rganization Name	Date of Receipt							
	City	State	Zip Code	07 31 2022 Transaction ID : PR2575916365821							
	KANSAS CITY	MO	64113-1542	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		76.92							
	Name of Employer (for Individual) United HealthCare Services Inc Receipt For:		upation (for Individual) KA VP SIs Acct Mgt	Memo Item							
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)							
B.	Full Name of Individual (Last, First, Middle Initial) CZAJKA, DAVID, , ,	rganization Name	Date of Receipt								
	Mailing Address 8590 BIG MANGROVE DRIVE			07 31 2022							
	City FORT MYERS	State FL	Zip Code 33908-7694	Transaction ID : PR2575918665821 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	ů l									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) nan Capital Partner Mgr	Memo Item							
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.45	P/R Deduction (\$19.23 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initial) OLSON, TRUDY, , ,	or Full C	rganization Name	Date of Receipt							
	Mailing Address 7208 WOODDALE AVE SOUTH			07 / D D / Y Y Y Y 2022							
	City EDINA	State MN	Zip Code 55435-4156	Transaction ID : PR2575918765821							
	EEC ID number of contributing	С		Amount of Each Receipt this Period							
	Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	VP I	upation (for Individual) Human Capital Svcs	Memo Item							
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)			192.30							
Т	OTAL This Period (last page this line number only	/)	•								

SCHEDULE A (FEC Form 3X) _____ _

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 119 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						
			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.						
NAME OF COMMITTEE (In I									
		JnitedHealth Group PA	AC)						
Full Name of Individual (Last MCGOLDRICK, CHRIST	, First, Middle Initial) or Full O OPHER, , ,	rganization Name	Date of Receipt						
Mailing Address 48 MOUNTA	IN TERRACE ROAD		07 31 Y Y Y Y Y 07 07 31 2022						
City WEST HARTFORD	State CT	Zip Code 06107-1533	Transaction ID : PR2575930465821 Amount of Each Receipt this Period						
FEC ID number of contributin federal political committee.	C		384.60						
Name of Employer (for Individual United HealthCare Services In	,	upation (for Individual) VP SIs & Bus Dev	Memo Item						
Receipt For: Primary Gener Other (specify) ▼		Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last. B. MATTERA, RICHARD	, First, Middle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 640 LOCUS	THILLS DRIVE	07 31 2022							
City	State	Zip Code	Transaction ID : PR2575938465821						
WAYZATA	MN	55391-1973	Amount of Each Receipt this Period						
FEC ID number of contributin federal political committee.	C		384.60						
Name of Employer (for Indivi United HealthCare Services In	, ,	upation (for Individual) G Chief Dev Officer	Memo Item						
Receipt For:		Year-to-Date 🔻							
Other (specify) ▼		2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last C. RILEY, FELICITY, , ,	, First, Middle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3330 EDMU	1		07 / D D / Y Y Y Y Y 2022						
City MINNEAPOLIS	State MN	Zip Code 55406-2348	Transaction ID : PR2575943365821 Amount of Each Receipt this Period						
FEC ID number of contributir federal political committee.	C		392.30						
Name of Employer (for Individ United HealthCare Services In		upation (for Individual) Fax	Memo Item						
Receipt For: Primary Gener Other (specify)		Year-to-Date ▼ 2842.25	P/R Deduction (\$196.15 Bi-Weekly)						
SUBTOTAL of Receipts This P	age (optional)		1161.50						
TOTAL This Period (last page	this line number only)								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 120 OF

		Use separate schedule(s)	(check only one)						
IEMIZED RECEIPIS		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 solicit contributions from such committee						
or for commercial purposes, other than using t	ine name and a	nucress 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 DONAHUE , JEANINE, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 164 MORNINGSIDE DRIVE	=		07 31 / Y Y Y Y Y						
City MANDEVILLE	State LA	Zip Code 70448-7571	Transaction ID : PR2575959265821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Prgms	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. NEFF, WAYNE, , ,	Initial) or Full C	rganization Name	Date of Receipt						
	Mailing Address 1158 DESERT ROCK DRIVE								
City REXBURG	State ID	Zip Code 83440-3697	Transaction ID : PR2575961865821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	76.92								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Sales	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) ▼		576.90	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle SALVO, GIANCARLO, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1027 SW 149 LANE			07 / D D / Y Y Y Y 07 31 2022						
City SUNRISE	State FL	Zip Code 33326-1957	Transaction ID : PR2575964965821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Reg Sales Dir	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			230.76						
TOTAL This Period (last page this line number	er only)								

SCHEDULE A (FEC Form 3X) _____ _

Use separate schedule(s)

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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	2	4 11a	_	1b	11c	12	
Ar	y information copied from such Reports and Sta	tements ma	ay not be sold or used by any	person	13 for the p	12 purpos	se of s	15 soliciting	16 contribut	17 ions
or	for commercial purposes, other than using the n	ame and a	address of any political committ	ee to s	olicit con	tributi	ons fr	om such	o committ	ee.
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	UnitedHealth Group P	PAC)						
Α.	Full Name of Individual (Last, First, Middle Initia LEMKE, HEATHER, , ,	l) or Full Oi	Organization Name		Date of	Rece	eipt			
	Mailing Address 4135 TRILLIUM LANE EAST				м м 07	1	D D 31	/ Y	y y 2022	Y
	City MINNETRISTA	State MN	Zip Code 55364-7730						6586582 is Period	1
	FEC ID number of contributing federal political committee.	С							96.	4
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Human Capital		Me	mo It	em			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 721.05		P/R Dedu	iction	(\$48.0)7 Bi-We	ekly)	
в.	Full Name of Individual (Last, First, Middle Initia KISCH, DAVID, , ,	l) or Full Oi	Organization Name		Date of	Rece	eipt			
	Mailing Address 7715 GIBRALTER TERRACE				м м 07	/	D D 31	/ Y	y y 2022	Y
	City APPLE VALLEY	State MN	Zip Code 55124-6124						6606582	
	FEC ID number of contributing federal political committee.	С				-,			30.0	00
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		Me	mo It	em			
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General Other (specify) ▼		225.00	ן ר	P/R Dedu	ction	(\$15.0	0 Bi-We	ekly)	
с.	Full Name of Individual (Last, First, Middle Initia FRANK, DANIEL, , ,	l) or Full Oi	organization Name		Date of	Rece	eipt			
	Mailing Address 1373 PRAIRIE MEADOW RD				м м 07	L	D D D 31		2022	
	City MINNETRISTA	State MN	Zip Code 55359-6701						97046582 is Period	1
	FEC ID number of contributing federal political committee.	С				,		,	384.6	60
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ef Clin Off		Me	emo It	tem			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50		P/R Dedu	uction	(\$192	.30 Bi-W	/eekly)	
s	UBTOTAL of Receipts This Page (optional)			•		.,			510.7	4
т	OTAL This Period (last page this line number or	nly)		•						

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

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		Use separate schedule(s)	(check only	y one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	11b	11c	12					
Any information copied from such Reports and or for commercial purposes, other than using t											
NAME OF COMMITTEE (In Full)											
> UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle I A. DICELLO, MARK, , ,	nitial) or Full C	Prganization Name	Date of Receipt								
Mailing Address 619 SAND CRANE CT			M = M	/ D D	/ Y	YY	Y				
City	State	Zip Code	07	31 action ID : P	0005750	2022					
BRADENTON	FL	34212-5226		t of Each Re							
FEC ID number of contributing federal political committee.	С				-yr-	28.0	0				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In Pres Ntwk Mgmt	M	emo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R Ded	uction (\$14.0	0 Bi-We	ekly)					
Full Name of Individual (Last, First, Middle I SIEBERT, GREGORY, , ,	nitial) or Full C	organization Name	Date of	Receipt							
Mailing Address 46 VIA BELLEZA			M M 07	/ D D 31	/ Y	y y 2022	Y				
City SAN CLEMENTE	State CA	Zip Code 92673-6910		action ID : P t of Each Re							
FEC ID number of contributing federal political committee.	С					200.0	0				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	M	emo Item							
Receipt For:	I	Year-to-Date ▼									
Primary General Other (specify) ▼		1500.00	P/R Ded	uction (\$100.	00 Bi-W	'eekly)					
Full Name of Individual (Last, First, Middle I C. RICHARDS, ALISON, , ,	nitial) or Full C	organization Name	Date of	Receipt							
Mailing Address 257 WEST GRANTLEY			07	/ D D 31		2022					
City ELMHURST	State IL	Zip Code 60126-2237		action ID : F			1				
FEC ID number of contributing federal political committee.	С			, , ,	, j	384.6	0				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) sion CEO	м	emo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P/R Ded	uction (\$192.	.30 Bi-W	/eekly)					
SUBTOTAL of Receipts This Page (optional)						612.6	0				
TOTAL This Period (last page this line numbe	er only)										

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a		11b	11c	12		
	y information copied from such Reports and Sta for commercial purposes, other than using the r									
	NAME OF COMMITTEE (In Full)									
\rangle	UnitedHealth Group Incorporated	d PAC (L	JnitedHealth Group PA	C)						
A.	Full Name of Individual (Last, First, Middle Initia GOLD, PAMELA, , ,	al) or Full Or	rganization Name	Date	of Re	eceipt				
	Mailing Address 2821 E SWISS OAKS DR			M 07		D D 31	/ Y	y y 2022	Y	
	City SANDY	State UT	Zip Code 84093-6587			ion ID : I Each Re				
	FEC ID number of contributing federal political committee.	C			_	-	-	28	.00	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs Acct Mgt	י 🗖 📃	Vemo	o Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R De	ducti	on (\$14.)	00 Bi-We	ekly)		
B.	Full Name of Individual (Last, First, Middle Initia SCHULTZ, STACY, , ,	al) or Full Or	rganization Name	Date	of Re	eceipt				
	Mailing Address 4012 S XERXES AVENUE			M 07		D D D 31	/ Y	y y 2022	Y	
	City MINNEAPOLIS	State MN	Zip Code 55410-1146			ion ID : I Each Re				
	FEC ID number of contributing federal political committee.	С							.92	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) s Segment Gen Counsel	ا 🗌	Vemo	o Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R De	ducti	on (\$38.4	46 Bi-We	ekly)		
с.	Full Name of Individual (Last, First, Middle Initia CHAMBUNDABONGSE, KUNJOR		rganization Name	Date	of Re	eceipt				
	Mailing Address 9730 46TH STREET			07		D D D 31	/ Y	2022	Y	
	City WATERTOWN	State MN	Zip Code 55388-9333			tion ID : Each Re				
	FEC ID number of contributing federal political committee.	С			_	, .	, ,	384	.60	
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Fechnology		Memo	o Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P/R De	ducti	ion (\$192	2.30 Bi-W	/eekly)		
s	UBTOTAL of Receipts This Page (optional)							489	.52	
т	OTAL This Period (last page this line number or	וy)	•	Γ.						

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
or	y information copied from such Reports and Stater for commercial purposes, other than using the nan			rson for the purpose of soliciting contributions
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (l	JnitedHealth Group PA	C)
Α.	Full Name of Individual (Last, First, Middle Initial) BRIGGS, MARC, , ,	or Full O	rganization Name	Date of Receipt
	Mailing Address 13534 TUSCALEE HILL CIR	State	Zip Code	07 / 31 / 2022 Transaction ID : PR2576001665821
		UT	84020-5653	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: Age Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)
	Full Name of Individual (Last, First, Middle Initial) SCHOENER, SHAUN, , ,	or Full O	rganization Name	Date of Receipt
	Mailing Address 884 LAS PALOMAS DR			07 / D D / Y Y Y Y Y 2022
	City LAS VEGAS	State NV	Zip Code 89138-5001	Transaction ID : PR2576012765821 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			32.68
	Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) KA VP SIs Acct Mgt	Memo Item
	Receipt For: Ag Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 245.10	P/R Deduction (\$16.34 Bi-Weekly)
c.	Full Name of Individual (Last, First, Middle Initial) SONERHOLM, KIMBERLY, , ,	or Full O	rganization Name	Date of Receipt
	Mailing Address 3380 SHELBORNE WOODS PAR			07 31 Y Y Y Y Y 2022
	City CARMEL	State IN	Zip Code 46032-8101	Transaction ID : PR2576033265821 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: Ag Primary General Other (specify)	ggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)		•	801.88
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11			for each category of the Detailed Summary Page	×	11a 13		11b 14	11c		12 16	17
Ar	y information copied from such Reports and St for commercial purposes, other than using the	atements m	I nay not be sold or used by any pe address of any political committee	erson fo	or the	pur ntrib	pose of	soliciting	g cont	tributio	ons
	NAME OF COMMITTEE (In Full)										
	UnitedHealth Group Incorporate	d PAC ((UnitedHealth Group PA	C)							
Α.	Full Name of Individual (Last, First, Middle Initi HOLZERSPARR, CYNTHIA, , ,	ial) or Full (Organization Name	Date of Receipt							
	Mailing Address 30 BRIDGHAM FARM ROAD				м м 07	/	31		Y 202	22	Ŷ
	City RUMFORD	State RI	Zip Code 02916-1304	A				PR2576 Receipt th			
	FEC ID number of contributing federal political committee.	С			_					28.0	В
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Med Dir		M	emo	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$14.04 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Initi BYRNES, CHRISTOPHER, , ,	ial) or Full (Organization Name	Date of Receipt							
	Mailing Address 3920 GLENWOOD STREET				м м 07	1	31		y 202	2	
	City DULUTH	State MN	Zip Code 55804-1403					PR2576 Receipt th			
	FEC ID number of contributing federal political committee.	С							-	384.6	0
	Name of Employer (for Individual) United HealthCare Services Inc		ccupation (for Individual) us Segment COO		M	emc	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2884.50	P/	R Ded	uctio	on (\$192	2.30 Bi-V	Veekly	()	
с.	Full Name of Individual (Last, First, Middle Initi KANDALAFT, KEVIN, , ,	ial) or Full (Organization Name		Date of	f Re	eceipt				
	Mailing Address 4189 WINDSOR POINT PLAC				^M 07		31		202	22	Y
	City EL DORADO HILLS	State CA	Zip Code 95762-3797	A				PR2576 Receipt th			
	FEC ID number of contributing federal political committee.	С					y .	9	3	384.60	0
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) h Plan CEO		M	emo	o Item				
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 2884.50	P/	R Ded	lucti	on (\$19	2.30 Bi-V	Veekly	y)	
s	UBTOTAL of Receipts This Page (optional)						, .		7	797.28	3
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SCHEDULE A (FEC Form 3X) DEAEIDTA

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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			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	AC)							
Full Name of Individual (Last, First, Middle I	nitial) or Full C	organization Name								
A. STONE, LAURA, , , Mailing Address 1485 COUNTY RD 286			Date of Receipt							
Maining Address 1403 COUNTY RD 200			07 31 2022							
City	State	Zip Code	Transaction ID : PR2576045165821							
COLLINSVILLE	ТХ	76233-2389	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		76.92							
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item							
United HealthCare Services Inc	Dir	Ntwk Contrctng								
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify) ▼		576.90	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I B. GROENENDAAL, MICHAEL, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 620 FOREST AVENUE			07 / D D / Y Y Y Y 2022							
City RIVER FOREST	State IL	Zip Code 60305-1710	Transaction ID : PR2576046265821							
	_	00303-1710	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Executive Compensation	Memo Item							
Receipt For:	Aggregate	Year-to-Date 🔻								
Other (specify) ▼		210.00	P/R Deduction (\$14.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I C. NELSON, KRISTA, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 18202 SHAVERS LAKE DR	IVE		07 / D D / Y Y Y Y 2022							
City WAYZATA	State MN	Zip Code 55391-3338	Transaction ID : PR2576047965821							
FEC ID number of contributing			Amount of Each Receipt this Period							
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:	Aggregate	Year-to-Date ▼	P/R Deduction (\$192.30 Bi-Weekly)							
Other (specify)		2884.50								
SUBTOTAL of Receipts This Page (optional)			489.52							
TOTAL This Period (last page this line numbe	er only)									

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	RECEIPTS		for each category of the Detailed Summary Page	3	K 11a		11b	11c	12		747
	n copied from such Reports and Sta cial purposes, other than using the										
	COMMITTEE (In Full)										
	ealth Group Incorporate	d PAC (L	InitedHealth Group PA	AC)							
A. MONICAL	of Individual (Last, First, Middle Initi _, KENT, , ,	al) or Full O	rganization Name		Date of	f Re	eceipt				
	ress 9795 E PIEDRA DRIVE				07	/	D D D 31	/ Y	ү ү 2022	Y	
City SCOTTSDA	ALE	State AZ	Zip Code 85255-9231					PR25760 eceipt th			
	nber of contributing ical committee.	С					т. т. 	-	384	4.60	
United Healt	nployer (for Individual) thCare Services Inc		ipation (for Individual) n CEO		М	emo	tem				
Receipt For Prima Other		Aggregate	Year-to-Date ▼ 2884.50] '	P/R Ded	lucti	on (\$192	2.30 Bi-W	/eekly)		
Full Name of B. <u>REED, B</u>	of Individual (Last, First, Middle Initi ARTON, , ,	al) or Full Oi	rganization Name		Date of	f Re	eceipt				
	ress 16716 MAYFIELD DRIVE				м м 07	/	D D D 31	/ Y	y y 2022	Y	
City EDEN PRA	IDIE	State MN	Zip Code					PR25760			
			55347-2242		Amoun	t of	Each R	eceipt th	is Perio	d	_
	nber of contributing ical committee.	С			Ľ.		-	-	28	3.08	
Name of Er Optum Servi	nployer (for Individual) ices, Inc		upation (for Individual) Gen Mgmt		M	emo	tem				
Receipt For		Aggregate	Year-to-Date 🔻								
Other	ry General (specify) ▼		, 210.60] f	P/R Ded	uctio	on (\$14.)	04 Bi-We	ekly)		
	of Individual (Last, First, Middle Initi	al) or Full O	rganization Name		Date of	f Re	eceipt				
Mailing Add	ress 6838 IDLEWOOD WAY				07	/	D D 31	/ Y	y y 2022	Y	
City EDEN PRA	IRIE	State MN	Zip Code 55346-3519				-	PR25760 eceipt th		-	
	nber of contributing ical committee.	С			<u> </u>		,		76	6.92	
Optum Serv	-		ipation (for Individual) Gen Mgmt		М	lemo	o Item				
Receipt For Prima Other		Aggregate	Year-to-Date ▼ 576.90	ן ן	P/R Ded	lucti	on (\$38.	46 Bi-We	eekly)		
SUBTOTAL o	f Receipts This Page (optional)			•			7		489	9.60	
TOTAL This F	Period (last page this line number o	nly)		- •	<u> </u>		-	1 12			

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	×		Ш	11b	11c	12	
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	y information copied from such Reports and for commercial purposes, other than using the									
<u></u>	NAME OF COMMITTEE (In Full)									
\geq	UnitedHealth Group Incorpora	ted PAC (UnitedHealth Group PA	AC)						
	Full Name of Individual (Last, First, Middle I	nitial) or Full C	Organization Name							
Α.	REX, JOHN, , ,				Date of		·			
	Mailing Address 503 HARRINGTON ROAD				07	1	31	/ Y	2022	Y
	City	State	Zip Code		Trans	acti	on ID :	PR25760		1
	WAYZATA	MN	55391-1512		Amoun	t of I	Each R	eceipt thi	s Period	
	FEC ID number of contributing federal political committee.	С					y		384.	60
	Name of Employer (for Individual)	Occ	upation (for Individual)		М	emo	Item			
	United HealthCare Services Inc	UH	G CFO							
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		-		/ -			
	Other (specify) ▼		2884.50]	P/R Ded	luctio	on (\$192	2.30 Bi-W	eekly)	
	Full Name of Individual (Last, First, Middle I MCEWAN, JOSHUA, , ,	nitial) or Full C	Organization Name		Date of	f Red	ceipt			
	Mailing Address 4916 ALDRICH AVE SOUTI	4			м м 07	/	D D D 31	/ Y	y y 2022	Y
	City	State	Zip Code		Trans	actio	on ID : I	PR25760	8576582	1
	MINNEAPOLIS	MN	55419-5353		Amoun	t of I	Each R	eceipt thi	s Period	
	FEC ID number of contributing federal political committee.	С			<u> </u>		y-	-	384.	60
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Tax		M	emo	Item			
	Receipt For:	Aggregate	Year-to-Date V							
	Primary General Other (specify) ▼		, 2884.50] ^P	P/R Ded	uctio	n (\$192	.30 Bi-W	eekly)	
с.	Full Name of Individual (Last, First, Middle I DUDA, MICHAEL, , ,	nitial) or Full C	Organization Name		Date of	f Red	ceipt			
	Mailing Address 5208 RICHWOOD DRIVE				07 ^M		D 31		y y 2022	
	City EDINA	State MN	Zip Code 55436-2322					PR25760		1
			JJ430-ZJ2Z		Amoun	t of I	Each R	eceipt thi	s Period	
	FEC ID number of contributing federal political committee.	C			Ľ.	_	y	, <u>,</u>	192.	30
	Name of Employer (for Individual)		upation (for Individual)		M	emo	Item			
	United HealthCare Services Inc	VP	Corp Dev							
	Receipt For: Primary General	Aggregate	Year-to-Date ▼				(\$00		-11-3	
	Other (specify)		1442.25] '	P/R Ded	IUCTIC	on (\$96.	15 Bi-We	екіу)	
s	UBTOTAL of Receipts This Page (optional)			► _			9	9	961.	50
Т	OTAL This Period (last page this line numbe	er only)			L		7	-	4	

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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 berson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	~	, p	
UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P	AC)
Full Name of Individual (Last, First, Middle A. FREIBERG, BRIAN, , ,	e Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 9605 LEXINGTON CT			07 31 2022
City WESTON	State WI	Zip Code 54476-6730	Transaction ID : PR2576093665821 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		153.84
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Cust Strategy	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$76.92 Bi-Weekly)
Full Name of Individual (Last, First, Middle B. OLUJIC, TAMMY, , ,	e Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 36218 SE SAINT ANDRE			07 / D D / Y Y Y Y 2022
	State WA	Zip Code	Transaction ID : PR2576097365821
SNOQUALMIE	VVA	98065-9094	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		30.76
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) RVP	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.70	P/R Deduction (\$15.38 Bi-Weekly)
Full Name of Individual (Last, First, Middle	e Initial) or Full O	rganization Name	
C. PALMER, BRYAN, , , Mailing Address 346 COUNTRY CLUB DR	RIVE		Date of Receipt
City TEQUESTA	State FL	Zip Code 33469-1944	Transaction ID : PR2576097965821 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) n Growth Off	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)
SUBTOTAL of Receipts This Page (optiona	l)		569.20
TOTAL This Period (last page this line num	ber only)		

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using th	Statements ma	l ay not be sold or used by any p Iddress of any political committed	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
UnitedHealth Group Incorporat	ed PAC (l	JnitedHealth Group PA	AC)
Full Name of Individual (Last, First, Middle Ir A. LESUEUR, REHN, , ,	nitial) or Full C	organization Name	Date of Receipt
Mailing Address 254 JASPERS CIR S			07 31 2022
City CHASKA	State MN	Zip Code 55318-3210	Transaction ID : PR2576098965821 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		76.92
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 ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)
Full Name of Individual (Last, First, Middle Ir DAHL, KEVIN, , ,	nitial) or Full C	organization Name	Date of Receipt
Mailing Address 21 HOEFER ST			07 31 2022
City LATHAM	State NY	Zip Code 12110-4742	Transaction ID : PR2576100265821 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		28.08
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Compli	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		210.60	P/R Deduction (\$14.04 Bi-Weekly)
Full Name of Individual (Last, First, Middle Ir C. DIAMOND, TIFFANY, , ,	nitial) or Full C	organization Name	Date of Receipt
Mailing Address 1801 SPANISH TRAIL			07 / D D / Y Y Y Y 2022
City DELRAY BEACH	State FL	Zip Code 33483-4958	Transaction ID : PR2576105565821 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		76.92
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)			181.92
TOTAL This Period (last page this line number	only)		

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		Use separate schedule(s)	(check	only a	one)			
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page			11b	11c	12	
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NAME OF COMMITTEE (In Full)		duress of any pointear commute	5 10 3011011	conti	ibutions	nom suc		
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)					
Full Name of Individual (Last, First, Middle I CASEY, TAMMY, , ,	Initial) or Full C	rganization Name	Dat	e of F	Receipt			
Mailing Address 5400 LAKESIDE DRIVE			13 14 15 16 person for the purpose of soliciting contril ee to solicit contributions from such common PAC) Date of Receipt 07 31 2022 Transaction ID : PR25761073654 Amount of Each Receipt this Period 07 31 2 Memo Item 07 31 2022 Transaction ID : PR25761073654 Amount of Each Receipt this Period 2 07 31 2022 Transaction ID : PR25761175654 Amount of Each Receipt this Period 2 07 31 2022 Transaction ID : PR25761175654 Amount of Each Receipt this Period 2 Memo Item 2 P/R Deduction (\$14.00 Bi-Weekly) 2 Date of Receipt 7 07 31 2 07 31 2 07 31 2 07 31 2 07 31 2 07 31 2 07 31 2 07 31 2		y y 2022	Y		
City LAKE WALES	State FL	Zip Code 33898-8812						1
FEC ID number of contributing federal political committee.	С					· ·	28.0	08
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		Merr	no Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R I	Jeduc	tion (\$0	.00 Bi-Wee	ekly)	
Full Name of Individual (Last, First, Middle I A. KIEWEL, NATHAN, , ,	Initial) or Full C	rganization Name	Dat	e of F	Receipt			
Mailing Address 1137 PRAIRIE VIEW DR SV							y y 2022	Y
City	State MN	Zip Code						1
HUTCHINSON	IVIIN	55350-6725	Amo	ount o	of Each	Receipt th	nis Period	
FEC ID number of contributing federal political committee.	C						28.0	00
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ncipal Engineer, TLCP		Merr	no Item			
Receipt For:	Aggregate	Year-to-Date 🔻						
Other (specify) ▼		210.00	P/R [Deduct	tion (\$14	4.00 Bi-W€	eekly)	
Full Name of Individual (Last, First, Middle I SANCHEZ, VINCENT, , ,	Initial) or Full C	rganization Name	Dat	e of F	Receipt			
Mailing Address 5025 BRANFORD COURT	1-			07	3	1	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
City DUBLIN	State CA	Zip Code 94568-7241						1
FEC ID number of contributing federal political committee.	С			_	,	. ,	28.0)8
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		Men	no Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.60	P/R	Jeduc	ction (\$1	4.04 Bi-Wo	eekly)	
SUBTOTAL of Receipts This Page (optional)					,	. ,	84.1	6
TOTAL This Period (last page this line number	er only)							

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IT.	EMIZED RECEIPTS		Use separate schedule(s)	(cł	heck onl	y or	ne)	L								
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	y information copied from such Reports and S															
or	for commercial purposes, other than using the	name and a	ddress of any political committee	e to s	solicit co	ntrib	outions	from such	n committ	ee.						
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)												
Α.	Full Name of Individual (Last, First, Middle Init KERAN, PATRICK, , ,	tial) or Full O	rganization Name		Date of Receipt											
	Mailing Address 6631 108TH CT				м м 07	/	D 31) / Y	Y Y 2022	Y						
	City BROOKLYN PARK	State MN	Zip Code 55445-6503						13786582 iis Period	1						
	FEC ID number of contributing federal political committee.	С							28.	08						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Dir Product		М	emo	ttem									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Aggregate Year-to-Date ▼ 210.60					P/R Deduction (\$14.04 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Init LIRETTE, KARL, , ,	tial) or Full O	rganization Name	Date of Receipt												
	Mailing Address 9 WEST WOODLAWN DRIVE				м м 07	/	D 31) / Y	y y 2022	Y						
	City DESTREHAN	State LA	Zip Code 70047-2535						13896582	1						
	FEC ID number of contributing federal political committee.	C							iis Period 76.	92						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		М	emo	o Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)												
с.	Full Name of Individual (Last, First, Middle Init GROSSMAN, MICHAEL, , ,	tial) or Full O	rganization Name		Date o	f Re	eceipt									
	Mailing Address 15725 56TH AVE N				^M 07	/	D 31		y 2022	Y						
	City PLYMOUTH	State MN	Zip Code 55446-2984						14586582 iis Period	1						
	FEC ID number of contributing federal political committee.	С			Ē		y	. ,	384.	60						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) sion COO		M	lemo	o Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50		P/R Dec	lucti	on (\$19	2.30 Bi-V	Veekly)							
s	UBTOTAL of Receipts This Page (optional)			•					489.	50						
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		Use separate schedule(s)	(check	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11		11b	11c	12				
Any information copied from such Reports and				he pu							
or for commercial purposes, other than using the	ne name and a	uuress or any political committee	e io solicit	CONTRI	DULIONS	NOT SUC	Committe	.			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle I FRIDNER, JOHN, , ,	nitial) or Full C	rganization Name	Date	e of R	eceipt						
Mailing Address 782 PENFIELD DR			0		31	D / Y	ү ү 2022	Y			
City CAROL STREAM	State IL	Zip Code 60188-4738					1 4756582 iis Period	1			
FEC ID number of contributing federal political committee.	С		Ē			-	78.0	00			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) NA VP SIs/Gen		Mem	o Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 585.00	P/R D)educt	ion (\$39	0.00 Bi-We	eekly)				
Full Name of Individual (Last, First, Middle I B. KEPNER, SHELLY, , ,	nitial) or Full C	rganization Name	Date	e of R	eceipt						
Mailing Address 10165-222ND STREET EAS			0		31		y y 2022	Ŷ			
City _LAKEVILLE	State MN	Zip Code 55044-9752					4786582 iis Period				
FEC ID number of contributing federal political committee.	С						28.0	06			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Found/Social Resp		Mem	o Item						
Receipt For:	Aggregate	Year-to-Date V									
Primary General Other (specify) ▼		210.45	P/R D	educt	ion (\$14	.03 Bi-We	ekly)				
Full Name of Individual (Last, First, Middle I SCOTT, GARLAND, , ,	nitial) or Full C	rganization Name	Date	e of R	eceipt						
Mailing Address 8018 PERLETTE COURT				7	31		y y 2022				
City KERNERSVILLE	State NC	Zip Code 27284-9957					15106582 iis Period	1			
FEC ID number of contributing federal political committee.	С				, . , .	7	38.4	16			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Mem	o Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 269.22	P/R [Deduc	tion (\$19	9.23 Bi-We	eekly)				
SUBTOTAL of Receipts This Page (optional)					, ,		144.5	52			
TOTAL This Period (last page this line numbe	er only)										

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

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			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
	y information copied from such Reports and Sta for commercial purposes, other than using the r			erson for the purpose of soliciting contributions					
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (I	JnitedHealth Group PA	.C)					
A.	Full Name of Individual (Last, First, Middle Initia LENTZ, MICHEL, , ,	al) or Full C	organization Name	Date of Receipt					
	Mailing Address 4004 FOREST GLEN DRIVE			07 / D D / Y Y Y Y 07 31 2022					
	City GREENSBURG	State PA	Zip Code 15601-9062	Transaction ID : PR2576153565821					
			15001-9062	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		115.38					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir	Memo Item					
	Receipt For:	Aggregate	Year-to-Date ▼	-					
	Primary General Other (specify) ▼		865.35	P/R Deduction (\$57.69 Bi-Weekly)					
в.	Full Name of Individual (Last, First, Middle Initia WARN, ROBERT, , ,	al) or Full C	Prganization Name	Date of Receipt					
	Mailing Address 2079 AUSTRIAN PINE LN			07 / D D / Y Y Y Y 2022					
	City	State	Zip Code	Transaction ID : PR2576157865821					
	MINNETONKA	MN	55305-2429	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		38.46					
	Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) Fin	P/R Deduction (\$19.23 Bi-Weekly)					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.45						
с.	Full Name of Individual (Last, First, Middle Initia BENSON, JEAN, , ,	al) or Full C	Prganization Name	Date of Receipt					
	Mailing Address 14951 HIGHLAND COURT NE			07 31 2022					
	City	State	Zip Code	Transaction ID : PR2576310965821					
	PRIOR LAKE	MN	55372-4109	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) n CEO	Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)			538.44					
т	OTAL This Period (last page this line number of	nly)	•••••						

SCHEDULE A (FEC Form 3X) DEOFIDTO

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)				(check only one)							
			for each category of the Detailed Summary Page	×	11a 13		11b	11c		2	17		
	y information copied from such Reports and Sta for commercial purposes, other than using the r				or the		pose of	soliciting	g cont	ributi	ons		
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	AC)									
A.	Full Name of Individual (Last, First, Middle Initia SAINATO, KRISTIN, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt						
	Mailing Address 7 CARLTON TER				м м 07	1	D D 31	/ Y	y 202	22	Y		
	City STEWART MANOR	State NY	Zip Code 11530-3821	A				PR2578 eceipt th			_		
	FEC ID number of contributing federal political committee.	С						1 - 95		28.0	6		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clin Qlty		Me	əmc	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.45	P/	R Ded	ucti	on (\$14.	03 Bi-We	eekly)				
в.	Full Name of Individual (Last, First, Middle Initia COMBSMORGAN, LAURIE, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt						
	Mailing Address 513 RIVERVIEW DRIVE			07 / 31 / 2022 Transaction ID : PR2578719865821							Y		
	City FRANKLIN	State TN	Zip Code 37064-5512										
	FEC ID number of contributing federal political committee.	С			inount			eceipt th		38.4	0		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng		Me	emc	ltem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.00	P/I	R Dedu	uctio	on (\$19.:	20 Bi-We	eekly)				
C.	Full Name of Individual (Last, First, Middle Initia 	l) or Full Or	rganization Name		Date of	Re	ceipt						
	Mailing Address 2659 E LAKE OF THE ISLES P				м м 07	1	31	L	202	2			
	City MINNEAPOLIS	State MN	Zip Code 55408-1052	A				PR2578 eceipt th					
	FEC ID number of contributing federal political committee.	С					y :	,		384.6	0		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus Dev		Me	emo	tem						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P/	R Ded	ucti	on (\$192	2.30 Bi-V	Veekly	()			
s	UBTOTAL of Receipts This Page (optional)						, ,		4	151.00	6		
т	OTAL This Period (last page this line number or	ıly)		Ī						-10-			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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ITEIWIZED RECEIPTS			Detailed Summary Page			X 11a		11	b	11c		12	
				elaneu Juninaly Faye		13		14	-	15		16	17
An or	v information copied from such Reports and Station commercial purposes, other than using the	atements ma name and a	ay no addre	ot be sold or used by any pe ss of any political committee	ersor to s	n for the solicit cor	purp ntrib	pos outic	e of sons fr	solicitir om sue	ig co ch co	ontribu ommitt	tions ee
\backslash	NAME OF COMMITTEE (In Full)												
$\left \right $	UnitedHealth Group Incorporate	d PAC (l	Uni	tedHealth Group PA	(C)								
۹.	Full Name of Individual (Last, First, Middle Initia DUFFEY, KRISTY, , ,	al) or Full O	Organ	ization Name		Date of Receipt							
	Mailing Address 42095 N 109TH PLACE					07 31 2022							
	City	State		Zip Code		Trans	acti	ion	ID : F	PR2578	3823	26582	1
	SCOTTSDALE	AZ		85262-3293	_	Amount	of	Ead	ch Re	eceipt t	his I	Period	
	FEC ID number of contributing federal political committee.	С										384.	60
	Name of Employer (for Individual) Optum Services, Inc		•	on (for Individual) n Off		Me	emo	b Ite	em				
	Receipt For:	Aggregate	Year	r-to-Date ▼									
	Primary General Other (specify) ▼		-	2884.50		P/R Ded	uctio	on ((\$192	.30 Bi-'	Wee	kly)	
	Full Name of Individual (Last, First, Middle Initi CIAVOLA, LAURA, , ,	al) or Full O	rgan	ization Name		Date of	Re	ecei	pt				
	Mailing Address 6958 DELOACH COURT					07	/	1	31	/		022	Y
	City	State		Zip Code		Trans	acti	ion	ID : F	PR2578	824	36582	1
	FRISCO	TX		75034-7436		Amount	of	Ead	ch Re	ceipt t	his I	Period	
	FEC ID number of contributing federal political committee.	C						-				384.	60
	Name of Employer (for Individual) Optum Services, Inc		upati P Op	ion (for Individual) s		Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year	r-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)								
	Full Name of Individual (Last, First, Middle Initia BUSBEE, NATHANAEL, , ,	al) or Full O	Drgan	ization Name		Date of	Re	ecei	pt				
	Mailing Address 122 ROSEWOOD AVE					07	/		31	/ [022	Y
	City	State		Zip Code		Trans	act	ion	ID : I	PR257	8826	76582	1
	CATONSVILLE	MD		21228-4938		Amount	of	Ead	ch Re	eceipt t	his I	Period	
	FEC ID number of contributing federal political committee.	С						,		9		76.	92
	Name of Employer (for Individual)	Осси	upati	on (for Individual)		M	emc	o Ite	em				
	United HealthCare Services Inc	Dir E	Bus F	Process									
	Receipt For:	Aggregate	Year	r-to-Date ▼									
	Primary General Other (specify)		- J	576.90		P/R Ded	ucti	on ((\$38.4	46 Bi-V	/eek	ly)	
	JBTOTAL of Receipts This Page (optional)				I	<u>_</u>		9				846.	12

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12							
			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 Incorport	orated PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Mide A. MILLER, TRACI, , ,	dle Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 729 PINE TRAIL			07 31 2022							
City ARNOLD	State MD	Zip Code 21012-1628	Transaction ID : PR2578829965821							
		21012 1020	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		115.38							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Clin Ops	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 865.35	P/R Deduction (\$57.69 Bi-Weekly)							
Full Name of Individual (Last, First, Mide B. FARMER, RACHEL, , ,	dle Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 1846 SOUTH COLUMB	INE STREET		07 31 2022							
City	State	Zip Code	Transaction ID : PR2595208365821							
BATON ROUGE	LA	70808-5227	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		115.38							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify) ▼		865.35	P/R Deduction (\$57.69 Bi-Weekly)							
Full Name of Individual (Last, First, Mide C. ELLIS, DENNIS, , ,	dle Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 6001 DRIPPING SPRIN	IGS		07 31 / Y Y Y Y 07 31 2022							
City FRISCO	State TX	Zip Code 75034-4039	Transaction ID : PR2595209165821 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		32.76							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs Acct Mgt	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 245.70	P/R Deduction (\$16.38 Bi-Weekly)							
SUBTOTAL of Receipts This Page (option	al)		263.52							
TOTAL This Period (last page this line nu	mber only)									

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)								
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b	11c		12 16	17
	y information copied from such Reports and Sta for commercial purposes, other than using the				or the		pose of	soliciting	g con	tributi	ons
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	NC)							
A.	Full Name of Individual (Last, First, Middle Initia HAREWOOD, JUNIOR, , ,	al) or Full O	rganization Name		Date of	Re	eceipt				
	Mailing Address 223 MOUNT VERNON COVE				м м 07	1	D D 31	/ Y	y 202	22 22	Y
	City SANDY SPRINGS	State GA	Zip Code 30328-4130	A			i <mark>on ID</mark> : I Each Re				
	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		M	emc	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/	R Ded	ucti	on (\$192	2.30 Bi-W	Veekly	y)	
в.	Full Name of Individual (Last, First, Middle Initia SCOTT, WESTON, , ,	al) or Full O	rganization Name		Date of	Re	eceipt				
	Mailing Address 16333 VANCE JACKSON APT 1215	Chata	Zia Ocda		™ M 07	1	31	/ Y	y 202	22 22	Y
	City SAN ANTONIO	State TX	Zip Code 78257-5090				on ID : I				
	FEC ID number of contributing federal political committee.	C	10231-5030		Amount of Each Receipt this Period					4	
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) d Dir		M	emc	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.55	P/R Deduction (\$30.77 Bi-Weekly)							
<u>с.</u>	Full Name of Individual (Last, First, Middle Initia SHORT, MARIANNE, , ,	al) or Full O	rganization Name		Date of	Re	eceipt				
	Mailing Address 2215 SUMMIT AVENUE				^M 07	1	D D 31	/ Y	202	22	Y
	City SAINT PAUL	State MN	Zip Code 55105-1002	A			ion ID : Each Re				
	FEC ID number of contributing federal political committee.	С					,	9		384.6	0
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 Gen Counsel		M	emo	o Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P/	R Ded	ucti	on (\$192	2.30 Bi-V	Veekl	y)	
s	UBTOTAL of Receipts This Page (optional)			. [, .		8	830.7	4
т	OTAL This Period (last page this line number o	nly)		. [

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		11b	11c		12		
Δ.	v information conied from such Departs	totom and a			13		14	15		16 ntribut	17	
	y information copied from such Reports and Si for commercial purposes, other than using the											
	NAME OF COMMITTEE (In Full)											
\rangle	UnitedHealth Group Incorporate	ed PAC (I	UnitedHealth Group P/	AC)								
Α.	Full Name of Individual (Last, First, Middle Init MCBRIEN, ROBERT, , ,	ial) or Full C	organization Name		Date of Receipt							
	Mailing Address 305 HONEYBEE DRIVE				07 31 2022							
	City	State	Zip Code		Trans	act	ion ID :	PR2601	1489	96582 ⁻	1	
	WEXFORD	PA	15090-8699	_	Amount	t of	Each R	Receipt th	nis F	'eriod		
	FEC ID number of contributing federal political committee.	С			28.08							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) /Iktg Cnslt		M	emo	tem					
	Receipt For:	Aggregate	Year-to-Date V									
	Other (specify) ▼		210.60] ^P	P/R Ded	ucti	on (\$14	.04 Bi-We	eekl	y)		
В.	Full Name of Individual (Last, First, Middle Init LESTER, SHAUNA, , ,	ial) or Full C	Organization Name		Date of	f Re	eceipt					
	Mailing Address 1180 TRUMPET VINE LANE				07 / D D / Y Y Y Y Y 31 2022							
	City	State	Zip Code		Trans	acti	ion ID :	PR26011	1547	765821		
	SAN RAMON	CA	94582-5183		Amount	t of	Each R	Receipt th	nis F	'eriod		
	FEC ID number of contributing federal political committee.	С		<u> </u>					28.0)8		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		Memo Item							
	Receipt For:	Aggregate	Year-to-Date V									
	Primary General Other (specify) ▼		, 210.60] P	P/R Deduction (\$14.04 Bi-Weekly)							
C.	Full Name of Individual (Last, First, Middle Init FRIAS, LORRAINE, , ,	ial) or Full C	Organization Name		Date of	f Re	eceipt					
	Mailing Address 855 ST CLAIR AVENUE #1				^M 07	1	31)22	Y	
	City SAINT PAUL	State MN	Zip Code 55105-3283	-				PR2601			1	
			33103-3263		Amount	t of	Each R	Receipt th	nis F	'eriod		
	FEC ID number of contributing federal political committee.	С			Ľ.		y			76.9	92	
	Name of Employer (for Individual)		upation (for Individual)		М	emo	b Item					
	United HealthCare Services Inc	VP	Comm									
	Receipt For:	Aggregate	Year-to-Date V									
	Other (specify)		576.90]	P/R Ded	lucti	on (\$38	.46 Bi-We	eekl	y)		
	UBTOTAL of Receipts This Page (optional)		•	•			, , , ,			133.0	8	
Т	OTAL This Period (last page this line number of	only)					_					

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12							
			erson for the purpose of soliciting contributions							
or for commercial purposes, other than using t	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 A. KIMES, CARRIE, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 1917 SW 27TH STREET			07 31 2022							
City TOPEKA	State KS	Zip Code 66611-1643	Transaction ID : PR2601162065821 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		38.46							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For: Primary General Other (specify) ψ	Aggregate	Year-to-Date 288.45	P/R Deduction (\$19.23 Bi-Weekly)							
Full Name of Individual (Last, First, Middle PERERA, SUSAN, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 1201 UNITY AVE N			07 31 Y Y Y Y Y 2022							
City GOLDEN VALLEY	State MN	Zip Code 55422-4735	Transaction ID : PR2601168865821 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		76.92							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) buty Gen Counsel	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General Other (specify) ▼		576.90	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle ESCHERJR , DELBERT , , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 885 SUGAR HILL DRIVE			07 / D D / Y Y Y Y Y 2022							
City MANCHESTER	State MO	Zip Code 63021-6665	Transaction ID : PR2601171065821 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.06							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) led Dir	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.45	P/R Deduction (\$14.03 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			143.44							
TOTAL This Period (last page this line number	er only)									

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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			for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Stat for commercial purposes, other than using the n			rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	UnitedHealth Group PA	C)
Α.	Full Name of Individual (Last, First, Middle Initial HUDSON, JEFFREY, , ,) or Full C	Organization Name	Date of Receipt
	Mailing Address 1536 BREWSTER DRIVE	1		07 31 Y Y Y Y Y 2022
	City	State TX	Zip Code	Transaction ID : PR2605703065821
	CARROLLTON		75010-6444	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		28.00
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Bus Dvlp	Memo Item
	Receipt For:	Aggregate	Year-to-Date ▼	-
	Primary General Other (specify) ▼		210.00	P/R Deduction (\$14.00 Bi-Weekly)
	Full Name of Individual (Last, First, Middle Initial MCBEATH, ROBERT, , ,) or Full C	Organization Name	Date of Receipt
	Mailing Address 2537 RED ARROW DRIVE			07 31 2022
	City LAS VEGAS	State NV	Zip Code 89135-1628	Transaction ID : PR2605708965821 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) O Med Grp Physn	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 2884.50	P/R Deduction (\$192.30 Bi-Weekly)
с.	Full Name of Individual (Last, First, Middle Initial ANDERSONHUTCHINS, LEIGH, , ,		Organization Name	Date of Receipt
	Mailing Address 16786 RAINY VALE AVE			07 31 2022
	City	State	Zip Code	Transaction ID : PR2605717865821
	RIVERSIDE	CA	92503-6535	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		76.92
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) D Med Grp Non Physn	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)
s	JBTOTAL of Receipts This Page (optional)			489.52
т	DTAL This Period (last page this line number on	ly)		

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17						
			person for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middl A	e Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 2285 N POWHATAN ST			M M / D D / Y Y Y Y 07 31 2022						
City ARLINGTON	State VA	Zip Code 22205-2113	Transaction ID : PR2605734265821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		192.30						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ⁄t Affs Dir	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 1442.25	P/R Deduction (\$96.15 Bi-Weekly)						
Full Name of Individual (Last, First, Middl B. LEIGHPITSTICK, EMILY, , ,	e Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 17307 97TH DR SE			07 / D D / Y Y Y Y Y 2022						
City SNOHOMISH	State WA	Zip Code 98296-8168	Transaction ID : PR2605735265821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Ntwk Contrctng	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middl MALONE, TRACY, , ,	e Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 900 S 22ND ST			07 31 Y Y Y Y Y Y 2022						
City ARLINGTON	State VA	Zip Code 22202-2625	Transaction ID : PR2605736965821 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) PExternal Affs	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optiona	l)		653.82						
TOTAL This Period (last page this line num	ber only)								

SCHEDULE A (FEC Form 3X) _____ _

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check onl	(check only one)							
ILEIVIIZED KEGEIPIS		for each category of the Detailed Summary Page	X 11a	11b	11c	12					
Any information copied from such Reports and or for commercial purposes, other than using t											
NAME OF COMMITTEE (In Full)			C IO SUIICIL CO		nom sucr						
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle I PETERSON, ERIC , , ,	nitial) or Full C	rganization Name	Date of	f Receipt							
Mailing Address 7757 BECK LN			07	/ D 1	D / Y	y y 2022	Y				
City ZIONSVILLE	State IN	Zip Code 46077-9060		saction ID : t of Each F							
FEC ID number of contributing federal political committee.	С			· · ·		76.9	2				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Mktg	м	emo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Ded	luction (\$38	.46 Bi-We	ekly)					
Full Name of Individual (Last, First, Middle I SONSTEGARD, NATHAN, , ,	nitial) or Full C	rganization Name	Date of	f Receipt							
Mailing Address 4216 ZENITH AVE S			07	/ 31	D / Y	y y 2022	Y				
City MINNEAPOLIS	State MN	Zip Code 55410-1413		action ID : t of Each F							
FEC ID number of contributing federal political committee.	С					28.0	8				
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) Fin	м	emo Item							
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify) ▼		210.60	P/R Ded	uction (\$14.	.04 Bi-We	ekly)					
Full Name of Individual (Last, First, Middle I RAWLINSON, DORIEN, , ,		rganization Name	Date of	f Receipt							
Mailing Address 4795 W RED ROCK DRIVE		Zin Oode	07	31		2022					
City LARKSPUR	State CO	Zip Code 80118-8413		saction ID : t of Each F			1				
FEC ID number of contributing federal political committee.	С			y 1	. ,	28.0	8				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	M	emo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.60	P/R Ded	luction (\$14	.04 Bi-We	eekly)					
SUBTOTAL of Receipts This Page (optional)					. ,	133.0	8				
TOTAL This Period (last page this line numbe	er only)				1.40						

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions								
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	d PAC (I	JnitedHealth Group PA	NC)								
Α.	Full Name of Individual (Last, First, Middle Init FICKER, MARK, , ,	ial) or Full C	organization Name	Date of Receipt								
	Mailing Address 945 MINERS RIDGE COURT			07 31 2022								
	City INCLINE VILLAGE	State NV	Zip Code 89451-8801	Transaction ID : PR2607806765821								
			09431-0001	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		76.92								
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Ops	Memo Item								
	Receipt For:	Aggregate	Year-to-Date V									
	Primary General Other (specify) ▼		576.90	P/R Deduction (\$38.46 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Init WELDON, BRIAN, , ,	ial) or Full C	organization Name	Date of Receipt								
	Mailing Address 1155 MOERS DRIVE			07 31 2022								
	City	State	Zip Code	Transaction ID : PR2608055565821								
	CHASKA	MN	55318-4629	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		76.92								
	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 ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)								
С.	Full Name of Individual (Last, First, Middle Init LANDO, LISA, , ,	ial) or Full C	Prganization Name	Date of Receipt								
	Mailing Address 60 PINEAPPLE STREET APT 3J			07 / D D / Y Y Y Y 2022								
	City BROOKLYN	State NY	Zip Code	Transaction ID : PR2608059565821								
	BROOKLYN		11201-6839	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		76.92								
	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 ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)			230.76								
т	OTAL This Period (last page this line number of	only)										

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)		······						
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Middle SAVOIE, DANA, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 8756 STONEFIELD LN			07 31 2022					
City CHANHASSEN	State MN	Zip Code 55317-4713	Transaction ID : PR2609809565821 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		153.84					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Ops	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$76.92 Bi-Weekly)					
Full Name of Individual (Last, First, Middle WRIGHT, NORMAN, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 26335 N 104TH WAY	1		07 31 / Y Y Y Y 2022					
City	State	Zip Code	Transaction ID : PR2609812365821					
SCOTTSDALE	AZ	85255-8009	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) erprise Health Equity	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼	1					
Other (specify) ▼		2884.50	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle PATEL, KETAN, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 1811 PITCAIRN DRIVE			07 / D D / Y Y Y Y 2022					
City COSTA MESA	State CA	Zip Code 92626-4702	Transaction ID : PR2612523365821 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		76.92					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Pharm Ops	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional).			615.36					
TOTAL This Period (last page this line number	er only)							

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 146 OF

		Use separate schedule(s)	(check only one)					
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12					
Any information copied from such Reports and or for commercial purposes, other than using t			13 14 15 16 17 erson for the purpose of soliciting contributions from such committee					
NAME OF COMMITTEE (In Full)		dureas of any political commute						
UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, Middle A. STEVENS, J, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 93 CONSERVATION ROAD)		07 31 2022					
City SUFFIELD	State CT	Zip Code 06078-2442	Transaction ID : PR2612528565821 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		76.92					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Dir Tech Prod Mgmt	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. BAKER, MICHAEL, , ,								
Mailing Address 2383 HIGHOVER TRAIL			07 31 2022					
City	State MN	Zip Code	Transaction ID : PR2612530565821					
CHANHASSEN	IVIIN	55317-4744	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:	Aggregate	Year-to-Date ▼	P/R Deduction (\$192.30 Bi-Weekly)					
Primary General Other (specify) ▼		2884.50						
Full Name of Individual (Last, First, Middle C. SHILTS, MATTHEW, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 10 WOODLAND ROAD			07 / D D / Y Y Y Y 2022					
City EDINA	State MN	Zip Code 55424-1631	Transaction ID : PR2612533265821 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		92.30					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) of Tech Off	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 692.25	P/R Deduction (\$46.15 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional).			553.82					
TOTAL This Period (last page this line number	er only)							

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)						
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12						
			13 14 15 16 berson for the purpose of soliciting contributions						
or for commercial purposes, other than using t	he name and a	ddress of any political committe	e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle RIVERS, CAROLINE, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 6368 TIMBER TRACE			M M / D D / Y Y Y Y Y 07 31 2022						
City BROWNSBURG	State IN	Zip Code 46112-8641	Transaction ID : PR2612533765821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		28.02						
Name of Employer (for Individual) Optum Services, Inc	Optum Services, Inc Exec Dir								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.15	P/R Deduction (\$14.01 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. KIECKHAFER, REGINA, , ,	Date of Receipt								
Mailing Address 28 BINNACLE LANE			M M / D D / Y Y Y Y 07 31 2022						
City KENNEBUNKPORT	State ME	Zip Code 04046-5434	Transaction ID : PR2612536265821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	ů l								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	P/R Deduction (\$14.04 Bi-Weekly)						
Other (specify) ▼		210.60							
Full Name of Individual (Last, First, Middle HANSEN, KIMBERLY, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 6227 UPLAND LN N			07 / D D / Y Y Y Y Y 2022						
City MAPLE GROVE	State MN	Zip Code 55311-4003	Transaction ID : PR2613383265821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.08						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Ntwk Prgms	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			84.18						
TOTAL This Period (last page this line number	er only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

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				Detailed Summary Page	×	11a 13] 11 14		_	11c	12	47
	y information copied from such Reports and State for commercial purposes, other than using the na					or the		pos	se of a	soli			
<u></u>	NAME OF COMMITTEE (In Full)		auure	to any political committee	10 501			Jun		011	JUCI	commit	
\rangle	UnitedHealth Group Incorporated	(C)											
Α.	Full Name of Individual (Last, First, Middle Initial) KREJCI, ANDREW, , ,) or Full O	Orgar	nization Name		Date of	Re	ecei	ipt				
	Mailing Address 19880 LAKEVIEW AVENUE					07 31 Y Y Y Y Y 2022							
	City EXCELSIOR	State MN		Zip Code 55331-9352	A	Transaction ID : PR2614310765821 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С			56.16								
	Name of Employer (for Individual) Optum Services, Inc		upat Com	ion (for Individual) nm		Me	emo	o Ite	em				
	Receipt For: // Primary General Other (specify) ▼	Aggregate	P/	R Ded	uctio	on	(\$28.0	08 I	Bi-We	ekly)			
B.	Full Name of Individual (Last, First, Middle Initial) BURKHOLDER, CHAD, , ,) or Full O	Orgar	nization Name		Date of	Re	ecei	ipt				
	Mailing Address 2423 DUBONNET DRIVE						07 / D D / Y Y Y Y 12022						
	City MACUNGIE	State PA		Zip Code 18062-8857								7346582 s Period	1
	FEC ID number of contributing federal political committee.	C						384.60 Memo Item					
	Name of Employer (for Individual) Optum Services, Inc	Occupation (for Individual) VP Ops											
	Receipt For: // Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$192.30 Bi-Weekly)										
C.	Full Name of Individual (Last, First, Middle Initial)		Orgar	nization Name		Date of	Re	ecei	ipt				
	Mailing Address 12439 GLENLIVET LOWLAND A					м м 07	/	L	^D 31	J.		ү ү 2022	
	City LAS VEGAS	State NV		Zip Code 89138-6244	A							7516582 s Period	1
	FEC ID number of contributing federal political committee.	С						,			9	38.4	16
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) Dir/CMO		Me	emo	o Ite	em				
	Receipt For: // Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 288.45	P/	R Ded	uctio	on	(\$19.2	23	Bi-We	ekly)	
s	UBTOTAL of Receipts This Page (optional)			•				,		l	,	479.2	22
т	OTAL This Period (last page this line number onl	y)		•••••				-			-		

Use separate schedule(s)

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ITEMIZED RECEIPTS	Use separate schedule(s)	(check o	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a]11b	11c	12				
Any information copied from such Reports a	and Statements ma	ay not be sold or used by any p	erson for the	e pur	14 pose of	15 soliciting	16 contribut	17 ions			
or for commercial purposes, other than usin											
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Midd SOLOMON, RANDALL, , ,	le Initial) or Full O	rganization Name	Date	of Re	eceipt						
Mailing Address 760 HAIGHT STREET			M 07		31) / Y	ү ү 2022	Y			
City SAN FRANCISCO	State CA	Zip Code 94117-3317					57156582 is Period	1			
FEC ID number of contributing federal political committee.	С				-y		76.9	92			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Sehvrl Med Dir		Memo	o Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R De	educti	ion (\$38.	.46 Bi-We	ekly)				
Full Name of Individual (Last, First, Midd B. BIRNBAUM, MICHAEL, , ,	le Initial) or Full O	rganization Name	Date	of Re	eceipt						
Mailing Address 55 DEAN STREET			07		31	/ Y	2022	Y			
City BROOKLYN	State NY	Zip Code 11201-6245			-		57166582				
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period								
Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) VP HIthcare Econ				Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R De	ducti	on (\$192	2.30 Bi-W	/eekly)				
Full Name of Individual (Last, First, Midd C. SCALLY, MICHAEL, , ,	le Initial) or Full O	rganization Name	Date	of Re	eceipt						
Mailing Address 601 PLYMOUTH RD			07		31) / Y	2022	Y			
City BALTIMORE	State MD	Zip Code 21229-2213					32916582 is Period	1			
FEC ID number of contributing federal political committee.	С				y		28.0)8			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Bus Process	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.60	P/R De	educti	ion (\$14	.04 Bi-We	eekly)				
SUBTOTAL of Receipts This Page (optional	al)				,	,	489.6	60			
TOTAL This Period (last page this line nur	nber only)										

SCHEDULE A (FEC Form 3X) _____ _

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	11b	11c	12	,	
Any information copied from such Reports and								
or for commercial purposes, other than using	ine name and a	uuress or any political committee	e io solicit cor	infibutions fro	om such	committe	.	
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group PA	AC)					
Full Name of Individual (Last, First, Middle KIRBY, WESLEY, , ,	Initial) or Full O	rganization Name	Date of	Receipt				
Mailing Address 414616 E 1069 RD			07	/ D D 31	/ Y	y y 2022	Y	
City COUNCIL HILL	State OK	Zip Code 74428-5000		action ID : P of Each Re				
FEC ID number of contributing federal political committee.	C				-7-	28.0	8	
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) nager, Advisory Svcs		emo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R Ded	uction (\$14.0	4 Bi-We	ekly)		
Full Name of Individual (Last, First, Middle OSTRANDER, ROBERT, , ,	Initial) or Full O	rganization Name	Date of	Receipt				
Mailing Address 18 BARTON COURT	1		M M M	/ D D 31	/ Y	y y 2022	Y	
City PLEASANT HILL	State CA	Zip Code 94523-2029		action ID : P of Each Re				
FEC ID number of contributing federal political committee.	С		76.92					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Comm	Me	emo Item				
Receipt For:	Aggregate	Year-to-Date ▼						
Other (specify) ▼		576.90	P/R Dedu	P/R Deduction (\$38.46 Bi-Weekly)				
Full Name of Individual (Last, First, Middle LONGORIA, PATRICIA, , ,	Initial) or Full O	rganization Name	Date of	Receipt				
Mailing Address 906 BLUEBIRD			07	/ D D 31	L	2022		
City MANCHACA	State TX	Zip Code 78652-4154		of Each Re			1	
FEC ID number of contributing federal political committee.	С			y	9	28.0	8	
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		emo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.60	P/R Ded	uction (\$14.0	94 Bi-We	ekly)		
SUBTOTAL of Receipts This Page (optional)					9	133.0	8	
TOTAL This Period (last page this line numb	er only)				- 40-			

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
			person for the purpose of soliciting contributions te to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	rated PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middl A. TRAW, KEVIN, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 518 13TH ST			07 31 2022						
City HUNTINGTON BEACH	State CA	Zip Code 92648-4038	Transaction ID : PR2617365665821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		76.92						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middl B. BAUBLIT, MICHAEL, , ,	ull Name of Individual (Last, First, Middle Initial) or Full Organization Name SAUBLIT, MICHAEL, , ,								
Mailing Address 2201 RIDGEWIND WAY			07 / D D / Y Y Y Y Y 2022						
City WINDERMERE	State FL	Zip Code 34786-5823	Transaction ID : PR2617927165821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.08						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Cust Strategy	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Middl C. MISKELLCLOUTIER, DOMINI		rganization Name	Date of Receipt						
Mailing Address 12101 STRETFORD FOR			M M / D D / Y Y Y Y 07 31 2022						
City BRISTOW	State VA	Zip Code 20136-2078	Transaction ID : PR2618984965821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.08						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Clin Ops	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optiona	l)		133.08						
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	✗ 11a 11b 11c 12 13 14 15 16 17						
	y information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions						
$\overline{\}$	NAME OF COMMITTEE (In Full)		_							
$ \rangle$	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group P/	AC)						
<u>/</u>	Full Name of Individual (Last, First, Middle Init	ial) or Full O	rganization Name							
Α.	DOMB, JULIET, , ,	Date of Receipt								
	Mailing Address 116 CHURCH ST			07 31 2022						
	City	State	Zip Code	Transaction ID : PR2618988765821						
	WATERTOWN	MA	02472-4721	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		192.30						
	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item						
	Optum Services, Inc	VP	Gen Mgmt							
	Receipt For:	Aggregate	Year-to-Date 🔻							
	Primary General		1442.25	P/R Deduction (\$96.15 Bi-Weekly)						
	Other (specify) v		1442.23	1						
	Full Name of Individual (Last, First, Middle Init	ial) or Full O	rganization Name							
В.	CONNOR, MARSHA, , ,	,		Date of Receipt						
	Mailing Address 3845 WEST 143RD TERRACE			07 31 2022						
	City	State	Zip Code	Transaction ID : PR2618994365821						
	LEAWOOD	KS	66224-3911	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		28.08						
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) c Dir	Memo Item						
	Receipt For:	Aggregate	Year-to-Date V	P/R Deduction (\$14.04 Bi-Weekly)						
	Primary General	00 0								
	Other (specify) v	L	, 210.60	1						
C.	Full Name of Individual (Last, First, Middle Init BROWN, ROGER, , ,	ial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 512 EAST STATE AVE			07 31 2022						
	City	State	Zip Code	Transaction ID : PR2622557965821						
	PHOENIX	AZ	85020-4940	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		384.60						
	Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item						
	United HealthCare Services Inc	VP	/ktg Bus Dev							
	Receipt For:	Aggregate	Year-to-Date 🔻							
	Other (specify)		2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
⊢	UBTOTAL of Receipts This Page (optional)			604.98						

Use separate schedule(s)

FOR LINE NUMBER:

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			Use separate schedule(s)	(check only one)									
	TEMIZED RECEIPTS		for each category of the Detailed Summary Page		4 11a		11b	11c	12				
	formation copied from such Reports and Stat												
· · · · · · · · · · · · · · · · · · ·	commercial purposes, other than using the na	ame and ad	Idress of any political committee	to s	olicit con	itribi	utions t	rom such	n committ	ee.			
	ME OF COMMITTEE (In Full) hitedHealth Group Incorporated	PAC (U	InitedHealth Group PA	NC)									
	Name of Individual (Last, First, Middle Initial SON, MARK, , ,) or Full Or	ganization Name		Date of	Re	ceipt						
Mai	ling Address 848 S CORONA ST				м м 07	/	31) / Y	y y 2022	Y			
City DE	, NVER	State CO	Zip Code 80209-4410	Transaction ID : PR2622561665821 Amount of Each Receipt this Period									
	C ID number of contributing eral political committee.	С					7		76.9	92			
Uni	Name of Employer (for Individual) Occupation (for Individual) United HealthCare Services Inc KA VP SIs Acct Mgmt						Item						
	eipt For: Primary General Other (specify) ▼	Aggregate	/ear-to-Date ▼ 576.90	F	P/R Dedu	uctic	on (\$38.	.46 Bi-We	ekly)				
	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name						ceipt						
	Mailing Address 1030 ROBIN COURT						31) / Y	y y 2022	Y			
City WE	ST SALEM	State WI	Zip Code 54669-1919	Transaction ID : PR2623 Amount of Each Receipt th						1			
	FEC ID number of contributing federal political committee.						28.08						
	ne of Employer (for Individual) ed HealthCare Services Inc		pation (for Individual) Regl Affs		Me	emo	Item						
Rec		Aggregate \	lear-to-Date ▼										
	Primary General Other (specify) ▼		210,60	F	P/R Dedu	ıctio	on (\$14.	04 Bi-We	ekly)				
	Name of Individual (Last, First, Middle Initial OURAS, DENNIS, , ,) or Full Or	ganization Name		Date of	Re	ceipt						
	ling Address 5942 BRIARWOOD COURT				^M 07	/	31		2022 Y	_			
City CL	ARKSTON	State MI	Zip Code 48346-3176				-		70296582 is Period	1			
	C ID number of contributing eral political committee.	С			<u> </u>		, .	, ,	384.0	50			
Uni	ne of Employer (for Individual) ted HealthCare Services Inc		pation (for Individual) Plan CEO		Me	emo	ltem						
	eipt For: Primary General Other (specify)	Aggregate N	/ear-to-Date ▼ 2884.50		P/R Dedu	uctio	on (\$19	2.30 Bi-W	/eekly)				
SUBT	OTAL of Receipts This Page (optional)		•				,	. ,	489.6	60			
ΤΟΤΑ	L This Period (last page this line number on	ly)		-									

SCHEDULE A (FEC Form 3X) DEOFIDTO

Use separate schedule(s)

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		Use separate schedule(s)	(check	(check only one)							
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11		11b	11c	12				
Any information copied from such Reports and				he pu							
or for commercial purposes, other than using t	ine name and a	ddress of any political committee	e to solicit	contri	butions	from sucr	n committ	ee.			
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle CAMP, MELISSA, , ,	Initial) or Full O	rganization Name	Date	e of R	eceipt						
Mailing Address 124 WOODFIELD BLVD				7 7	/ D 31		y y 2022	Y			
City MECHANICVILLE	State NY	Zip Code 12118-3038				Receipt th	43686582 iis Period	1			
FEC ID number of contributing federal political committee.	С				-		28.0	08			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Ntwk Contrctng		Mem	io Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R [)educ	tion (\$14	I.04 Bi-W€	eekly)				
Full Name of Individual (Last, First, Middle B. MULES, REBECCA, , ,	Initial) or Full O	rganization Name	Date	e of R	eceipt						
Mailing Address 1136 BATTERY AVENUE				7 7	/ D 31		y y 2022	Y			
City BALTIMORE	State MD	Zip Code 21230-4112					14266582 [.] is Period	1			
FEC ID number of contributing federal political committee.	С	С				Amount of Each Receipt this Period 384.60					
Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) VP Govt Affs			Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R [educt	ion (\$19	2.30 Bi-W	/eekly)				
Full Name of Individual (Last, First, Middle C. SINGH, KANWAR, , ,	Initial) or Full O	rganization Name	Date	e of R	eceipt						
Mailing Address 10422 VERDI COURT)7	/ D 31		үүү 2022	Y			
City ELLICOTT CITY	State MD	Zip Code 21042-2586				: PR2624 Receipt th	44596582 iis Period	1			
FEC ID number of contributing federal political committee.	С				y 1	5	28.0	08			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) e Practitioner 3		Merr	no Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.60	P/R I	Deduc	tion (\$14	4.04 Bi-We	eekly)				
SUBTOTAL of Receipts This Page (optional).					,		440.7	76			
TOTAL This Period (last page this line number	er only)										

SCHEDULE A (FEC Form 3X) _____ _

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)					
		for each category of the Detailed Summary Page	X 11a 11b 11c 12	<u> </u>				
Any information copied from such Reports and								
or for commercial purposes, other than using t	ne name and a	duress of any political committee	e to solicit contributions from such committee	e.				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)					
Full Name of Individual (Last, First, Middle STALLWOOD, GREGG, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 4842 JUNIPER DR			07 / D D / Y Y Y Y 2022					
City PALM HARBOR	State FL	Zip Code 34685-2688	Transaction ID : PR2625499065821 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) Cust Svs	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle COLLETTE, CHRISTOPHER, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name COLLETTE, CHRISTOPHER, , ,							
Mailing Address 4776 MANITOU ROAD			07 / D D / Y Y Y Y Y 2022					
City EXCELSIOR	State MN	Zip Code 55331-9400	Transaction ID : PR2625499565821 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 UnitedHIth Grp	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼						
Other (specify) ▼		2884.50	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle SMITH, LISA, , ,	,	rganization Name	Date of Receipt					
Mailing Address 5040 INTERLACHEN BLUF		Zin Code	07 31 2022	ſ				
City EDINA	State MN	Zip Code 55436-1360	Transaction ID : PR2625503765821 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) ? Gen Mgmt	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	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)							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

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			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
	y information copied from such Reports and State for commercial purposes, other than using the na			erson for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	UnitedHealth Group PA	SC)						
Α.	Full Name of Individual (Last, First, Middle Initial) LIVERS, JEFFREY, , ,	Date of Receipt								
	Mailing Address 402 DERBY COURT			07 / D D / Y Y Y Y 07 31 2022						
	City MEBANE	State NC	Zip Code 27302-9452	Transaction ID : PR2626346065821						
	MEBANE	NC	27302-9452	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		28.08						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ec Dir	Memo Item						
	Receipt For:	aareaate	Year-to-Date V							
	Primary General Other (specify) ▼	.99.09410	210.60	P/R Deduction (\$14.04 Bi-Weekly)						
	Full Name of Individual (Last, First, Middle Initial) TERRAL, RECCA, , ,	Date of Receipt								
	Mailing Address 6828 SIMMONS RD	07 31 2022								
	City	State	Zip Code	Transaction ID : PR2626359665821						
	NORTH RICHLAND HILLS	ТХ	76182-4259	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	28.08								
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
	Receipt For: A Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)						
	Full Name of Individual (Last, First, Middle Initial) BONAR, BRUCE, , ,	or Full C	Organization Name	Date of Receipt						
	Mailing Address 1362 DOS HERMANOS GLEN			07 31 2022						
	City	State	Zip Code	Transaction ID : PR2626906865821						
	ESCONDIDO	CA	92027-1270	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		28.08						
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Software Engineering	Memo Item						
	Receipt For: A Primary General Other (specify)	P/R Deduction (\$14.04 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)			84.24						
т	OTAL This Period (last page this line number only	/)								

SCHEDULE A (FEC Form 3X) _____ _

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports and or for commercial purposes, other than using th			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 SCHENCK, ERIK, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 18236 DOE TRAIL			07 31 2022								
City BRAINERD	State MN	Zip Code 56401-7987	Transaction ID : PR2627730465821 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.08								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Clin Ops	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I SCOTT, NICOLE, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 29039 HOBBLEBUSH			07 31 2022								
City SAN ANTONIO	State TX	Zip Code 78260-2249	Transaction ID : PR2627731965821 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.08								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs	Memo Item								
Receipt For: Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$14.04 Bi-Weekly)								
Other (specify) ▼		, 210.60									
Full Name of Individual (Last, First, Middle I MORRIS, BARBARA, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 1045 SWEET GUM WAY			07 / D D / Y Y Y Y 2022								
City MEBANE	State NC	Zip Code 27302-6511	Transaction ID : PR2627735565821 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		28.08								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clms	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			84.24								
TOTAL This Period (last page this line numbe	r only)										

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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				Dr each category of the Detailed Summary Page	×	11a		11	1b		11c	12			
				otalieu Juliinary Faye		13		14	4		15	16	6	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	Uni	tedHealth Group PA	C)										
A.	Full Name of Individual (Last, First, Middle Initial) LINDLEY, SHEILA, , ,	or Full O	Organ	ization Name		Date of Receipt									
	Mailing Address 3656 WINDING WOOD LANE		м м 07	/	ľ	31	>	/ Y	2022		1				
	City	State		Zip Code		Trans	acti	ion	ו ID :	PF	R26277	39865	821		
	LEXINGTON	KY		40515-1283	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.							-		_	-	2	27.80		
	Name of Employer (for Individual) Optum Services, Inc	ion (for Individual)		М	emo	b It	em								
	Receipt For:	ggregate	Yea	r-to-Date ▼											
	Primary General Other (specify) ▼	P/R Deduction (\$13.90 Bi-Weekly)													
В.	Full Name of Individual (Last, First, Middle Initial) DUKART, JENNIFER, , ,	Date of Receipt													
	Mailing Address 2541 DRESDEN LANE			м м 07	/	l	D D 31	,	/ Y	2022		1			
	City	State		Zip Code		Transaction ID : PR2627749165821 Amount of Each Receipt this Period									
	GOLDEN VALLEY	MN		55422-3617											
	FEC ID number of contributing federal political committee.	C					384.60								
	Name of Employer (for Individual) United HealthCare Services Inc	Occ Bus		Memo Item											
	Receipt For: A Primary General Other (specify) ▼	ggregate	Yea	r-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initial)	or Full O	Organ	ization Name		Date of	f Re	ece	ipt						
	Mailing Address 15822 BELFAST LANE					м м 07	/	l	31		/ Y	2022]	
		State CA		Zip Code							R26283				
	HUNTINGTON BEACH	UA		92647-3104		Amoun	t of	Ea	ach R	lec	eipt thi	s Peri	od		
	FEC ID number of contributing federal political committee.	С						9		-	9	2	28.08		
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) et Svs		M	emo	o It	em						
	Receipt For:	aareaate	Yea	r-to-Date ▼	_										
	Primary General Other (specify) 210.60						P/R Deduction (\$3.58 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)			•••••				,		Ŧ	9	44	0.48		
т	OTAL This Period (last page this line number only	′)		•••••				7			-		-		

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 1 ¹						
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. PARIS, KATHERINE, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 17365 62ND AVE N			07 31 2022						
City MAPLE GROVE	State MN	Zip Code 55311-6405	Transaction ID : PR2628320665821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		226.92						
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 ▼ 1251.90	P/R Deduction (\$113.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. SHJERVE, NICHOLAS, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 12126 94TH AVE N			07 / D D / Y Y Y Y Y 2022						
	State MN	Zip Code	Transaction ID : PR2628329865821						
MAPLE GROVE	IVIN	55369-7154	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		80.12						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Assc Gen Counsel	Memo Item						
Receipt For:	Aggregate	Year-to-Date V							
Primary General Other (specify) ▼		559.24	P/R Deduction (\$40.06 Bi-Weekly)						
Full Name of Individual (Last, First, Middle MANNING, KIM, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 12703 DEER CREEK DRI			07 / D D / Y Y Y Y Y 2022						
City OMAHA	State NE	Zip Code 68142-1762	Transaction ID : PR2628331465821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc	Occ Dir M	upation (for Individual) /Iktg	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)	,		383.96						
TOTAL This Period (last page this line numb	per only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

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	nformation copied from such Reports and Sta commercial purposes, other than using the r									butio		
	ME OF COMMITTEE (In Full)											
	nitedHealth Group Incorporated	d PAC (L	JnitedHealth Group PA	NC)								
	II Name of Individual (Last, First, Middle Initia ANDERWALDE, LAMBERT, , ,	al) or Full Or	rganization Name	[Date of	Re	ceipt					
Ma	iling Address 45 AUDUBON CAUSEWAY				м м 07	/	D D D 31) / Y	2022]	
Cit LA	y NTANA	State FL	Zip Code 33462-4756		Transaction ID : PR2628332365821 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.									38	4.60		
Un	me of Employer (for Individual) ited HealthCare Services Inc		upation (for Individual) 9 UHG Research-Corp Affairs		Me	emo	Item					
Receipt For: Aggre Primary General Other (specify) ▼			Year-to-Date ▼ 2884.50	P	/R Ded	uctio	on (\$192	2.30 Bi-W	/eekly)			
	ll Name of Individual (Last, First, Middle Initia IAZZA, ELIZABETH, , ,	al) or Full Or	rganization Name		Date of	Re	ceipt					
	iling Address 117 HILLSIDE LN		07 / D D / Y Y Y Y 2022]		
Cit	•	State	Zip Code					PR26283		-		
	DTTSTOWN	PA 19465-8583 C Occupation (for Individual) VP Med Clin Ops			Amount of Each Receipt this Period							
	C ID number of contributing leral political committee.				76.92							
	me of Employer (for Individual) tum Services, Inc				Memo Item							
Re	ceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)								
	II Name of Individual (Last, First, Middle Initia ORNHAUSER, MICHAEL, , ,	al) or Full Or	rganization Name	[Date of	Re	ceipt					
	iling Address 180 SUMMIT LANE				^M 07	/	31		2022]	
Cit B/	y ALA CYNWYD	State PA	Zip Code 19004-2931					PR2628				
	C ID number of contributing leral political committee.	С					,	J		5.92		
Name of Employer (for Individual) United HealthCare Services Inc			upation (for Individual) led Dir		M	emo	ltem					
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Other (specify)			Year-to-Date ▼ 869.40	P	/R Ded	uctio	on (\$57.	.96 Bi-We	eekly)			
SUB	TOTAL of Receipts This Page (optional)			.					57	7.44		
тот	AL This Period (last page this line number or	וy)	·····				, . , .	7		-		

Use separate schedule(s)

FOR LINE NUMBER:

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			(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12						
Any information copied from such Reports an or for commercial purposes, other than using			13 14 15 16 17 erson for the purpose of soliciting contributions a to solicit contributions from such committee						
NAME OF COMMITTEE (In Full)	une marrie and a	uuress of any political committe							
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle MILLER, DEBRA, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 443 FARLEY DR			07 / D D / Y Y Y Y 2022						
City INDIANAPOLIS	State IN	Zip Code 46214-3572	Transaction ID : PR2628791365821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.08						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Dir Product	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. ERICKSON, ALYSSA, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 6430 POLARIS LANE N		Zin Onde	07 / D D / Y Y Y Y Y Y 2022						
City MAPLE GROVE	State MN	Zip Code 55311-4320	Transaction ID : PR2628798965821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		192.30						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Found/Social Resp	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1442.25	P/R Deduction (\$96.15 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. THOMPSON, BRUCE, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 2826 HEDGEROW DRIVE			07 / D D / Y Y Y Y 07 31 2022						
City DALLAS	State TX	Zip Code 75235-7590	Transaction ID : PR2628833665821 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 ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			604.98						
TOTAL This Period (last page this line numb	er only)								

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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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' person for the purpose of soliciting contributions 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 BENJAMIN, GEORGANNE, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3439 S MILLSPUR WAY			07 31 2022						
City BOISE	State ID	Zip Code 83716-8648	Transaction ID : PR2629554165821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		30.00						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 225.00	P/R Deduction (\$15.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. SAYEED, OMER, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2239 HOLLISTON AVE			07 / D D / Y Y Y Y 2022						
City ALTADENA	State CA	Zip Code 91001-3213	Transaction ID : PR2632078265821						
FEC ID number of contributing federal political committee.	С	91001-3213	Amount of Each Receipt this Period						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. DREFAHL, JASON, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 6104 FOX MEADOW LN			07 / D D / Y Y Y Y 2022						
City EDINA	State MN	Zip Code 55436-1217	Transaction ID : PR2632078965821 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) sion COO	Memo Item						
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 2884.50			P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)		491.52						
TOTAL This Period (last page this line num	ber only)								

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a	11b	11c	12	<u> </u>				
Any information copied from such Reports and or for commercial purposes, other than using the											
NAME OF COMMITTEE (In Full)					JIII SUCI	Commute					
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle I A. NAPOLITANO, DIANE, , ,	nitial) or Full C	rganization Name	Date of	Receipt							
Mailing Address 9 CHESTNUT COURT			M M 07	M M / D D / Y Y Y Y Y							
City BASKING RIDGE	State NJ	Zip Code 07920-3100		action ID : F of Each Re							
FEC ID number of contributing federal political committee.	С					28.0	8				
Name of Employer (for Individual) United HealthCare Services Inc											
Receipt For: Primary General Other (specify) ▼	rimary General Aggregate real-to-Date V			uction (\$14.0	94 Bi-We	ekly)					
Full Name of Individual (Last, First, Middle I B. TUFFIN, MICHAEL, , ,	nitial) or Full O	rganization Name	Date of	Receipt							
Mailing Address 5904 ASHBY MANOR PLAC			M M 07	/ D D 31	/ Y	y y 2022	Y				
City ALEXANDRIA	State VA	Zip Code 22310-2267		action ID : P							
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Govt Affs	Me	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify) ▼		2884.50	P/R Dedu	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I MEENTS, BENJAMIN, , ,	nitial) or Full C	rganization Name	Date of	Receipt							
Mailing Address 24995 GLEN ROAD			07	/ D D 31		2022					
City EXCELSIOR	State MN	Zip Code 55331-8549		action ID : F of Each Re			1				
FEC ID number of contributing federal political committee.	С			, , , , , , , , , , , , , , , , , , ,	y	76.9	2				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Mktg	Me	Memo Item							
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 57			P/R Dedu	uction (\$38.4	l6 Bi-We	ekly)					
SUBTOTAL of Receipts This Page (optional)				, ,	9	489.6	0				
TOTAL This Period (last page this line number	er only)										

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Midd A. ORRICK, VERONICA, , ,	le Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2960 CLAREMORE LAN	E		07 31 2022						
City LONG BEACH	State CA	Zip Code 90815-1642	Transaction ID : PR2632858565821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		28.08						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Prov Data	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Midd B. WALTHOUR, JOHN, , ,	le Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 5049 COLFAX AVE S			07 31 2022						
City MINNEAPOLIS	State MN	Zip Code 55419-1145	Transaction ID : PR2632877065821 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) ▼		Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Midd C. RADEL, TRAVIS, , ,	le Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1890 SANDBAR CIRCLE			07 31 2022						
City WACONIA	State MN	Zip Code 55387-1072	Transaction ID : PR2632878865821 Amount of Each Receipt this Period						
United HealthCare Services Inc VF			38.46						
		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 288.45	P/R Deduction (\$19.23 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optiona	al)		451.14						
TOTAL This Period (last page this line nun	nber only)								

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check	only	one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 1	H	11b	11c	12	·			
Any information copied from such Reports and or for commercial purposes, other than using the			erson for								
NAME OF COMMITTEE (In Full)	io name dilu à	aarooo or any punnodi cummitte	5 10 5011Cl			HOIT SUC	committ				
UnitedHealth Group Incorporat	ted PAC (I	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle In PARR, MICHAEL, , ,	nitial) or Full C	rganization Name	Da	te of F	Receipt						
Mailing Address 2625 LEROY LANE				07 ^M	/ D 3/		ү ү 2022	Y			
City WEST BLOOMFIELD	State MI	Zip Code 48324-2237					88356582 nis Period	1			
FEC ID number of contributing federal political committee.	С				7		28.0	08			
Name of Employer (for Individual) United HealthCare Services Inc	upation (for Individual) c Dir		Mer	no Item							
Receipt For: Primary General Other (specify) ▼	Year-to-Date ▼ 210.60	P/R	Deduc	tion (\$1	4.04 Bi-W	eekly)					
Full Name of Individual (Last, First, Middle In SARGENT, GLORIA, , ,	nitial) or Full C	rganization Name	Da	te of F	Receipt						
Mailing Address 3750 CANAL STREET			07	/ D 3		ү ү 2022	Y				
City SAINT CHARLES	State MO	Zip Code 63301-8510					11936582 nis Period	1			
FEC ID number of contributing federal political committee.	С	C Occupation (for Individual) Hlth Plan CEO			28.08						
Name of Employer (for Individual) United HealthCare Services Inc					no Item						
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General Other (specify) ▼		210.60	P/R	P/R Deduction (\$14.04 Bi-Weekly)							
Full Name of Individual (Last, First, Middle II HAPGOOD, WADE, , ,	nitial) or Full C	rganization Name	Da	te of F	Receipt						
Mailing Address 330 NW 82ND			_ L	07 ^M	/ 3	1	y y 2022				
Сіty ТОРЕКА	State KS	Zip Code 66617-2223					16706582 his Period	1			
FEC ID number of contributing federal political committee.	C			_	9	, ,	115.3	38			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs		Mer	no Item						
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 865.35			P/R	P/R Deduction (\$57.69 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)							171.5	54			
TOTAL This Period (last page this line numbe	r only)				-						

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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			Use separate schedule(s)			(check only one)						
			for each category of the Detailed Summary Page	×	11a 13		11b	11c		2 6	17	
	y information copied from such Reports and Stat for commercial purposes, other than using the n				for the		pose of	soliciting	g conti	ributio	ons	
$\left\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	InitedHealth Group PA	NC)								
A.	Full Name of Individual (Last, First, Middle Initial ROALDI, MICHAEL, , ,) or Full Or	ganization Name		Date of	f Re	eceipt					
	Mailing Address 4720 HARRIET AVENUE				м м 07	/	31) / Y	ү 202	22		
	City MINNEAPOLIS	State MN	Zip Code 55419-5434					PR2634			_	
	FEC ID number of contributing federal political committee.	С								77.00)	
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) Transformation		M	emo	tem					
Receipt For: Aggre Primary General Other (specify) ▼			Year-to-Date ▼ 577.50	F	P/R Ded	ucti	on (\$38.	.50 Bi-We	eekly)			
в.	Full Name of Individual (Last, First, Middle Initial HACKNEY, JOHN, , ,) or Full Or	ganization Name		Date of	f Re	eceipt					
Mailing Address 425 N 15TH ST					м м 07	1	31	/ Y	2022	2 2		
	City NASHVILLE	State Zip Code TN 37206-2774						PR26341				
FEC ID number of contributing federal political committee.		C			Amount of Each Receipt this Period							
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) Hlth Plan CEO			Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P	/R Ded	uctio	on (\$38.	46 Bi-We	eekly)			
С.	Full Name of Individual (Last, First, Middle Initial PRIBLE, JOHN, , ,) or Full Or	ganization Name		Date of	f Re	eceipt					
	Mailing Address 1923 SHIVER DR				^M 07	L.	31	JL	Y 202	2	ſ	
	City ALEXANDRIA	State VA	Zip Code 22307-1629				-	PR2634				
Name of Employer (for Individual) United HealthCare Services Inc		С					, .			84.60	D	
			pation (for Individual) Govt Affs		М	emo	tem Item					
Receipt For: Aggregate Yes Primary General Other (specify)			Year-to-Date ▼ 2884.50	F	P/R Ded	lucti	on (\$19:	2.30 Bi-V	Veekly	<i>י</i>)		
s	UBTOTAL of Receipts This Page (optional)		••••••				, .	. ,	5	38.52	2	
Т	OTAL This Period (last page this line number on	ly)	•••••	•						-		

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		n category of the I Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
or for commercial purposes, other than usin			erson for the purpose of soliciting contributions to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (UnitedH	ealth Group PA	NC)								
Full Name of Individual (Last, First, Middl A. WOJCIK, ADAM, , ,	e Initial) or Full Organization	Name	Date of Receipt								
Mailing Address 11424 BOULDER DRIVE			07 31 Y Y Y Y Y 2022								
	State Zip Co		Transaction ID : PR2634886565821								
ORLAND PARK	1L 6046	67-7419	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.06								
Name of Employer (for Individual) United HealthCare Services Inc											
Receipt For:	Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 210.45										
Full Name of Individual (Last, First, Midd B. PESCATELLO, SARA, , ,	Date of Receipt										
Mailing Address 1311 HAMLIN STREET	07 31 Y Y Y Y 2022										
City	State Zip Co	ode	Transaction ID : PR2634888565821								
WASHINGTON	DC 2001	7-2451	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		192.30								
Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Dir Govt Affs	r Individual)	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Da	te ▼ 1442.25	P/R Deduction (\$96.15 Bi-Weekly)								
Full Name of Individual (Last, First, Midd C. POWER, ROBERT, , ,	e Initial) or Full Organization	Name	Date of Receipt								
Mailing Address 20 SMITH LANE			07 31 2022								
City	State Zip Co		Transaction ID : PR2634892865821								
SAINT JAMES	NY 1178	0-3810	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.92								
Name of Employer (for Individual) Optum Services, Inc	Occupation (for VP Gen Mgmt	r Individual)	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate Year-to-Da	te ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optiona TOTAL This Period (last page this line nun											

SCHEDULE A (FEC Form 3X) _____ _

Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	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 Incorpor	ated PAC (I	UnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle A. PAYET, KEITH, , ,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 415 CHURCH STREET #2410			M M / D D / Y Y Y Y 07 31 2022						
City NASHVILLE	State TN	Zip Code 37219-1859	Transaction ID : PR2635440065821 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	United HealthCare Services Inc SVP Prd								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. MANN, MELISSA, , ,	e Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 15526 ELM RD			07 31 2022						
City MAPLE GROVE	State MN	Zip Code 55311-3941	Transaction ID : PR2635442165821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		38.46						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Human Capital	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) ▼		288.45	P/R Deduction (\$19.23 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. MIRAU, ANTHONY, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 770 HAWKCREST CIR			07 / D D / Y Y Y Y 2022						
CHANHASSEN	State MN	Zip Code 55317-4860	Transaction ID : PR2635444265821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		192.30						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1442.25			P/R Deduction (\$96.15 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional))		615.36						
TOTAL This Period (last page this line num	per only)								

SCHEDULE A (FEC Form 3X) _____ _

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		1b 11c	12	<u> </u>		
Any information copied from such Reports and				se of soliciting				
or for commercial purposes, other than using	me name and a	ouress of any political committee	to solicit contributi	ions from such	committe	е.		
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group PA	.C)					
Full Name of Individual (Last, First, Middle ELLER, JESSE, , ,	Initial) or Full O	rganization Name	Date of Rece	eipt				
Mailing Address 28108 N 17TH DR	,		07 31 2022					
City PHOENIX	State AZ	Zip Code 85085-5352		n ID : PR26354 ach Receipt th				
FEC ID number of contributing federal political committee.	C				28.0	8		
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Dir Product	Memo It	tem				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction	ı (\$14.04 Bi-We	ekly)			
Full Name of Individual (Last, First, Middle ROOS, THOMAS, , ,	Initial) or Full O	rganization Name	Date of Rece	eipt				
Mailing Address 3199 KAGEN AVE NE			07 / D D / Y Y Y Y 2022					
City SAINT MICHAEL	State MN	Zip Code 55376-3416		n ID : PR26354				
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 Chief Acctng Off	Memo It	tem				
Receipt For:	Aggregate	Year-to-Date ▼	_					
Other (specify) ▼		2884.50	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle NELSON, MICHAEL, , ,	Initial) or Full O	rganization Name	Date of Rece	eipt				
Mailing Address 2048 STAGHORN DRIVE			M / / 07	31	2022			
City SHAKOPEE	State MN	Zip Code 55379-5412		n ID : PR26367 ach Receipt thi				
FEC ID number of contributing federal political committee.	С		,	,	28.0	8		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) nan Capital Partner	Memo I	tem				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional).			,	,	440.7	6		
TOTAL This Period (last page this line numb	er only)							

Use separate schedule(s)

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		Use separate schedule(s)		(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12	<u> </u>	
Any information copied from such Reports and or for commercial purposes, other than using t										
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle A. MADONDO, JOHN, , ,	Initial) or Full C	organization Name		ate of	Re	ceipt				
Mailing Address 147 BLUEBELL WAY				07 31 2022						
City FRANKLIN	State TN	Zip Code 37064-6784		Transaction ID : PR2636726165821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С			_		7		76.	92	
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) I Plan CEO		Me	emo	Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle DEMPSEY, MICHAEL, , ,	Initial) or Full C	organization Name	D	ate of	Re	ceipt				
Mailing Address 6614 PARKWOOD LANE				м м 07	/	D D D 31) / Y	2022	Y	
City EDINA	MN	State Zip Code MN 55436-1734						72636582	1	
FEC ID number of contributing federal political committee.	С				Amount of Each Receipt this Period					
Name of Employer (for Individual) Optum Services, Inc					Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Aggregate Year-to-Date ▼ 576.90				P/R Deduction (\$38.46 Bi-Weekly)				
Full Name of Individual (Last, First, Middle C. HILL, DAVID, , ,	Initial) or Full C	organization Name		ate of	Re	ceipt				
Mailing Address 1800 RIDGE AVENUE UNI				^M 07	/	31) / Y	y y 2022	Y	
City EVANSTON	State IL	Zip Code 60201-5980	A			-		72656582 nis Period	1	
FEC ID number of contributing federal political committee.	С		ļ	_		y .		76.	92	
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) uty Gen Counsel Mgr	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Aggregate Year-to-Date ▼ 576.90				P/R Deduction (\$38.46 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional).			. [,	. ,	230.	76	
TOTAL This Period (last page this line number	er only)						-			

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 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 (l	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle A. LUSIC, TANYA, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 20840 SAWMILL ROAD			07 31 2022						
City JORDAN	State MN	Zip Code	Transaction ID : PR2636727565821						
		55352-9633	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		192.30						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) ▼		1442.25	P/R Deduction (\$96.15 Bi-Weekly)						
			J						
Full Name of Individual (Last, First, Middle B. QUICK, JAMES, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 114 MOUNTAIN RIDGE D	RIVE		07 31 2022						
City	State	Zip Code	Transaction ID : PR2637679565821						
JONESBOROUGH	TN	37659-6382	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.08						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Cust Service							
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		210.60	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. PEDERSEN, NICHOLAS, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1862 CLOVER MEADOW	' DR		07 31 2022						
City	State	Zip Code	Transaction ID : PR2637684765821						
CHASKA	MN	55318-5400	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.08						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comp Bus Grp	Memo Item						
Receipt For:	I	Year-to-Date ▼							
Other (specify)		210.60	P/R Deduction (\$14.04 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)		248.46						
TOTAL This Period (last page this line num	,								

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
or for commercial purposes, other than using			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle LARSON, CHRISTINE, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 3360 VISTA COURT	01-1-		07 / ^D D / ^Y Y Y Y Y 2022							
City HASTINGS	State MN	Zip Code 55033-3347	Transaction ID : PR2637688765821							
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 28.08							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)							
Full Name of Individual (Last, First, Middle SIVLEYIII, HARRY, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 7218 AVALON BLVD			07 31 2022							
City ALPHARETTA	State GA	Zip Code 30009-2500	Transaction ID : PR2638106665821 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		38.46							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Gen Counsel	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.45	P/R Deduction (\$19.23 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. CALABRESE, DAVID, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 85 LITTLE POND RD	1		07 / D D / Y Y Y Y 2022							
City NORTHBOROUGH	State MA	Zip Code 01532-1686	Transaction ID : PR2639708365821 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) ? Clnt Relationship	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			451.14							
TOTAL This Period (last page this line numb	per only)	•••••								

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b	11c	12	<u> </u>		
Any information copied from such Reports and								
or for commercial purposes, other than using th	e name and a	ouress of any political committee	to solicit contributions f	IOM SUCH	committe	е.		
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (l	JnitedHealth Group PA	C)					
Full Name of Individual (Last, First, Middle Ir MESSING, KEITH, , ,	nitial) or Full O	rganization Name	Date of Receipt					
Mailing Address 9 BUTTERFIELD DR			07 31 2022					
City GREENLAWN	State NY	Zip Code 11740-2001	Transaction ID : Amount of Each R					
FEC ID number of contributing federal political committee.	C				28.0	8		
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Software Engineering	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)					
Full Name of Individual (Last, First, Middle Ir B. SMITH, ANTHONY, , ,	nitial) or Full O	rganization Name	Date of Receipt					
Mailing Address 1 ROCKAWAY AVE			07 / D D 07 31	/ Y	y y 2022	Y		
City MARBLEHEAD	State MA	Zip Code 01945-1726	Transaction ID : Amount of Each R					
FEC ID number of contributing federal political committee.	С		76.92					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) CInt Svc Acct Mgt	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼						
Primary General Other (specify) ▼		576.90	P/R Deduction (\$38.46 Bi-Weekly)					
Full Name of Individual (Last, First, Middle Ir C. WIGGIN, MATTHEW, , ,	nitial) or Full O	rganization Name	Date of Receipt					
Mailing Address 6 MIDDLEBROOK RD			07 / D D D 31		y y 2022			
City WEST HARTFORD	State CT	Zip Code 06119-1014	Transaction ID : Amount of Each R					
FEC ID number of contributing federal political committee.	С				115.3	8		
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 ▼ 865.35	P/R Deduction (\$57.69 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)					220.3	8		
TOTAL This Period (last page this line number	r only)							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
	y information copied from such Reports and Sta for commercial purposes, other than using the n			person for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (I	UnitedHealth Group P	AC)						
Α.	Full Name of Individual (Last, First, Middle Initia ZUCCO, BETHANY, , ,	l) or Full C	Organization Name	Date of Receipt						
	Mailing Address 2608 CROMWELL COURT	1-		07 / D D / Y Y Y Y 2022						
	City MINNEAPOLIS	State MN	Zip Code 55410-2519	Transaction ID : PR2639760065821						
	FEC ID number of contributing federal political committee.	C	33410-2313	Amount of Each Receipt this Period 384.60						
	Name of Employer (for Individual)		upation (for Individual)	Memo Item						
	United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼		Mktg Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
В.	Full Name of Individual (Last, First, Middle Initia JENSENMOORE, KIMBERLY, , ,	l) or Full C	Organization Name	Date of Receipt						
	Mailing Address 230 ROSE AVENUE			07 31 2022						
	City MILL VALLEY	State CA	Zip Code 94941-1728	Transaction ID : PR2639770365821 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		49.52						
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) Gen Mgmt	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 371.40	P/R Deduction (\$24.76 Bi-Weekly)						
С.	Full Name of Individual (Last, First, Middle Initia DUTTA, SUMIT, , ,	l) or Full C	Organization Name	Date of Receipt						
	Mailing Address 1112 W WRIGHTWOOD AVE	-		07 / D D / Y Y Y Y 2022						
	City CHICAGO	State IL	Zip Code 60614-1315	Transaction ID : PR2639773865821						
	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) Seg Chief Med Off	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)			▶ 818.72						
т	OTAL This Period (last page this line number or	nly)								

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ידו			Use separate schedule(s)			(check only one)						
	EMIZED RECEIPTS		for each category of the Detailed Summary Page		11a		11b	11c	12	47		
	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	J PAC (L	InitedHealth Group PA	AC)								
A.	Full Name of Individual (Last, First, Middle Initia SMITH, DELYLE, , ,	al) or Full Or	ganization Name		Date of	Ree	ceipt					
	Mailing Address PO BOX 447				07 31 2022							
	City MT PROSPECT	State IL	Zip Code 60056-0447	_	Transaction ID : PR2639801565821 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С					,	-7	76.	92		
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) irector Technology		Me	emo	ltem					
Receipt For: At Primary General Other (specify) ▼			Year-to-Date ▼ 576.90] F	P/R Dedu	uctic	on (\$38.4	46 Bi-We	ekly)			
в.	Full Name of Individual (Last, First, Middle Initia GALLOWAY, MERCEDEIS, , ,	al) or Full Or	ganization Name		Date of	Ree	ceipt					
	Mailing Address 6737 LANCER DRIVE	Stata	07 / 31 / 2022 Transaction ID : PR2640452065821									
	City CHARLOTTE	State NC						5206582 is Period	1			
	FEC ID number of contributing federal political committee.	Occupation (for Individual) Sr Solution Sales Executive			28.08							
	Name of Employer (for Individual) Optum Services, Inc				Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$14.04 Bi-Weekly)									
C.	Full Name of Individual (Last, First, Middle Initia WEBER, ALISSA, , ,	al) or Full Or	rganization Name		Date of	Ree	ceipt					
	Mailing Address 10633 NW 74TH PLACE				07 ^M	/	31		2022			
	City JOHNSTON	State IA	Zip Code 50131-2342	-					16106582 is Period	1		
	FEC ID number of contributing federal political committee.	С			<u> </u>		9		115.	38		
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP F	ipation (for Individual) in		Me	emo	ltem					
Receipt For: Agg Primary General Other (specify)			ggregate Year-to-Date ▼ 865.35				P/R Deduction (\$57.69 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)			•			, .		220.3	38		
т	OTAL This Period (last page this line number or	חly)		- ►			,	-				

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a	11b		12	_			
Any information copied from such Reports and or for commercial purposes, other than using										
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	NC)							
Full Name of Individual (Last, First, Middle STOW, CHRISTINA, , ,	Initial) or Full C	rganization Name	Date o	of Receip	t					
Mailing Address 4709 ALTON PL NW			07 31 2022							
City WASHINGTON	State DC	Zip Code 20016-2041			D: PR2640 h Receipt th		1			
FEC ID number of contributing federal political committee.	C					384.6	30			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Public Affairs	M	lemo Itei	m					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. WILJANENHATHAWAY, AMY, , ,	Initial) or Full C	rganization Name	Date o	of Receip	t					
Mailing Address 369 135TH AVE	04-4-	7. 0.4	07	/ D	31 / Y	2022	Y			
City WAYLAND	State MI	Zip Code 49348-9402			D: PR2640		L			
FEC ID number of contributing federal political committee.	С				Amount of Each Receipt this Period					
Name of Employer (for Individual) Optum Services, Inc					m					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R Ded	luction (\$	614.04 Bi-Wo	eekly)				
Full Name of Individual (Last, First, Middle C. SHARKEY, S PAUL, , ,	Initial) or Full C	rganization Name	Date o	of Receip						
Mailing Address 8607 ELLISTON DRIVE			07	/ D	31 / Y	y y 2022	Y			
City WYNDMOOR	State PA	Zip Code 19038-7957			ID : PR2640 h Receipt th		1			
FEC ID number of contributing federal political committee.	С			, ,	9	57.7	70			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs		1emo Ite	m					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 432.75	P/R Deduction (\$28.85 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)				.,	,	470.3	38			
TOTAL This Period (last page this line numb	er only)									

Use separate schedule(s)

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PAGE 177 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 erson for the purpose of soliciting contributions to collicit contributions from cuch committee						
or for commercial purposes, other than using t	ne name and a	iddress of any political committee	e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle BRISSON, SAMUEL, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 2454 GETTYSBURG AVE	S		07 31 / Y Y Y Y 2022						
City ST LOUIS PARK	State MN	Zip Code 55426-2345	Transaction ID : PR2640854565821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.00						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Director Technology	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle PIERCEHARRIS, PHELISHA, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 3041 DEE ANN DRIVE			07 / D D / Y Y Y Y Y 2022						
City	State TN	Zip Code	Transaction ID : PR2640866365821						
MEMPHIS		38119-9132	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.08						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) oc Dir Clin Pract Perf	Memo Item						
Receipt For:	Aggregate	Year-to-Date 🔻							
Other (specify) ▼		210.60	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Middle WITT, JULIE, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 155 TALBERT TOWN LOC			07 / D D / Y Y Y Y Y 2022						
City MOORESVILLE	State NC	Zip Code 28117-8069	Transaction ID : PR2640876065821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.08						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Director, Actuarial	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			84.16						
TOTAL This Period (last page this line number	er only)								

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

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11	EMIZED RECEIPTS		for each catego Detailed Summa		X 11	-	11b	11c	12		
	y information copied from such Reports and Sta					he pu					
or	for commercial purposes, other than using the r NAME OF COMMITTEE (In Full)	lame and a	iddress of any polit	ical committee	to solicit	contri	butions in	rom suci	1 commit	ee.	
\rangle	UnitedHealth Group Incorporated	I PAC (l	JnitedHealth	Group PA	C)						
A.	Full Name of Individual (Last, First, Middle Initia ESTESS, SHARON, , ,	l) or Full O	Organization Name		Date	e of R	eceipt				
	Mailing Address 128 ASHBROOKE TRAIL				07 31 2022						
	City MADISON	State MS	Zip Code 39110-6855					87656582 iis Period	1		
	FEC ID number of contributing federal political committee.	С							76.	92	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individu Gen Mgmt	ial)		Mem	o Item				
Receipt For: Aggre Primary General Other (specify) ▼			Year-to-Date ▼	576.90	P/R E	educt	ion (\$38.	46 Bi-We	eekly)		
в.	Full Name of Individual (Last, First, Middle Initia METKO, SARA, , ,	l) or Full O	organization Name		Date	e of R	eceipt				
	Mailing Address 23665 HIGHVIEW LANE	1			C	™ 7	31	/ Y	y y 2022	Y	
	City LAKEVILLE		StateZip CodeMN55044-6025						3 7736582 iis Period	1	
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) VP Tax			76.92						
	Name of Employer (for Individual) United HealthCare Services Inc					Mem	o Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	576.90	P/R Deduction (\$38.46 Bi-Weekly)						
C.	Full Name of Individual (Last, First, Middle Initia ADVANI, PROTIMA, , ,	l) or Full O	organization Name		Date	e of R	eceipt				
	Mailing Address 7618 BRITTANY PARC CT				C	M 7	31		2022		
	City FALLS CHURCH	State VA	Zip Code 22043-2907						02416582 iis Period	1	
	FEC ID number of contributing federal political committee.	С					y	y	384.	60	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individu Rsch	ial)		Mem	o Item				
Receipt For: Aggrega Primary General Other (specify)			Year-to-Date ▼	P/R Deduction (\$192.30 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)			•••••			, .	. ,	538.	44	
т	OTAL This Period (last page this line number or	ıly)		····· ►			-				

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
Any information copied from such Reports and									
or for commercial purposes, other than using th	ie name and a	ouress of any political committee	e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle In A. STRAND, UTE, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 2323 SPRINGDALE DRIVE			07 31 2022						
City NASHVILLE	State TN	Zip Code 37215-1134	Transaction ID : PR2642025565821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		38.46						
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 ▼ 288.45	P/R Deduction (\$19.23 Bi-Weekly)						
Full Name of Individual (Last, First, Middle II BRUECKMAN, BRIAN, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 6445 HAWKS POINTE LAN			07 31 Y Y Y Y Y 2022						
City EXCELSIOR	State MN	Zip Code 55331-2612	Transaction ID : PR2642029465821 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 Ops	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle In C. JENSEN, GINA, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 13325 58TH AVENUE N UNIT B City	State	Zip Code	07 31 2022						
PLYMOUTH	MN	55442-1677	Transaction ID : PR2642031465821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		38.46						
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Sr A	upation (for Individual) ssc Gen Counsel	Memo Item						
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 288.45	P/R Deduction (\$19.23 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			461.52						
TOTAL This Period (last page this line numbe	r only)								

Use separate schedule(s)

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		Use separate schedule(s)		(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11b	11c	12			
Any information copied from such Reports and or for commercial purposes, other than using t										
NAME OF COMMITTEE (In Full)						5001	Jonnill	•		
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle MARTIN, STEPHANIE, , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt					
Mailing Address 7002 N VIA DE MANANA			M 07	07 31 2022						
City SCOTTSDALE	State AZ	Zip Code 85258-3951				PR26428 leceipt th	31806582 is Period	1		
FEC ID number of contributing federal political committee.	С				-		153.8	34		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Market VP SIs AM		Memo	o Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R De	ducti	on (\$76.	.92 Bi-We	ekly)			
Full Name of Individual (Last, First, Middle KIRK, ARETHUSA, , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt					
Mailing Address 16 OTHORIDGE ROAD			M 07	M /	31	/ Y	y y 2022	Ŷ		
City LUTHERVILLE	State MD				-	PR26428 leceipt th	30265821 is Period			
FEC ID number of contributing federal political committee.	С	C Occupation (for Individual) VP Med Clin Ops			28.06					
Name of Employer (for Individual) United HealthCare Services Inc					o Item					
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify) ▼		210.45	P/R De	ductio	on (\$14.	03 Bi-We	ekly)			
Full Name of Individual (Last, First, Middle LONG, RICHARD, , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt					
Mailing Address 4825 PENN AVE S			07		31		2022			
City MINNEAPOLIS	State MN	Zip Code 55419-5258			-	PR26428 leceipt th	33126582 is Period	1		
FEC ID number of contributing federal political committee.	С				y	y	76.9	92		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		Memo	o Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).					,	,	258.8	32		
TOTAL This Period (last page this line number	er only)									

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page										
			13 14 15 16 17 berson for the purpose of soliciting contributions 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 FOX, ELIZABETH, , ,	e Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 611 SECOND STREET			07 31 Y Y Y Y Y 2022									
City ALEXANDRIA	State VA	Zip Code 22314-1416	Transaction ID : PR2642832065821 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 ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. KEISERJENKINS, KAREN, , ,	e Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 9325 MARTINS LAKE DR			07 / D D / Y Y Y Y 2022									
City ROSWELL	State GA	Zip Code 30076-2865	Transaction ID : PR2642834465821 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)									
Full Name of Individual (Last, First, Middle C. KUSSIE, TIMOTHY, , ,	e Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 8445 NE NEW BROOKL	1	7.01	07 / D D / Y Y Y Y 31 2022									
City BAINBRIDGE ISLAND	State WA	Zip Code 98110-3611	Transaction ID : PR2642838865821 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		38.46									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) /P SIs Acct Mgmt	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 288.45	P/R Deduction (\$19.23 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optiona	l)		451.14									
TOTAL This Period (last page this line num	ber only)											

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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		Detailed Summary Page				11a]11b	11c		12						
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	NAME OF COMMITTEE (In Full)																
	UnitedHealth Group Incorporate	-		-	AC)												
Α.	Full Name of Individual (Last, First, Middle Init RUDOLPH, CLAYTON, , ,	tial) or Full C	Orga	nization Name		Date of Receipt											
	Mailing Address 4937 RUSSELL AVENUE SO	UTH				м м 07	1	D 10 31	/ Y	ү 2	022	Y					
	City	State		Zip Code		Transaction ID : PR2643199365821											
	MINNEAPOLIS	MN		55410-1916	Amount of Each Receipt this Period												
	FEC ID number of contributing federal political committee.	С									192.3	80					
	Name of Employer (for Individual) Optum Services, Inc		cupa Fin	tion (for Individual)		M	emc	tem									
	Receipt For:	Aggregate	e Ye	ar-to-Date 🔻													
	Primary General			1442.25	P	/R Ded	ucti	on (\$96.	15 Bi-W	eekl	y)						
	Other (specify) v		7	1442.20													
В.	Full Name of Individual (Last, First, Middle Ini CRAGLE, STEVE, , ,	tial) or Full C	Orga	nization Name		Date of	Re	eceipt									
-	Mailing Address 6604 MOHAWK TRAIL					M M	/	DD	/ Y	Y	Y	Y					
						07 31 2022											
	City	State MN		Zip Code					PR2643								
	EDINA	IVIIN		55439-1030	Amount of Each Receipt this Period												
	FEC ID number of contributing federal political committee.	С							-		384.6	50					
	Name of Employer (for Individual) Optum Services, Inc		•	ation (for Individual) egment CMO		Memo Item											
	Receipt For:	Aggregate	e Ye	ar-to-Date 🔻													
	Primary General Other (specify) ▼		,	2884.50	P.	P/R Deduction (\$192.30 Bi-Weekly)											
С.	Full Name of Individual (Last, First, Middle Init NEELY, MARC, , ,	tial) or Full C	Orga	nization Name	Date of Receipt												
	Mailing Address 1159 BUFFALO RIDGE RD					^M 07	1	31	/ Y)22	Y					
		State CO		Zip Code					PR2643			1					
	CASTLE PINES			80108-8190		Amount	t of	Each R	eceipt th	nis F	Period						
	FEC ID number of contributing federal political committee.	С						y	, ,		384.6	60					
	Name of Employer (for Individual)	Occ	cupa	tion (for Individual)		Memo Item											
	United HealthCare Services Inc	Hlth	n Pla	an CEO													
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SCHEDULE A (FEC Form 3X) _____ _

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		Use separate schedule(s)	(check only	one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a		11c	12	,					
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or for commercial purposes, other than using the	ne name and a	aduress of any political committe	to solicit contr	inducions from	i such	committe	e.					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	UnitedHealth Group P/	C)									
Full Name of Individual (Last, First, Middle I WINNEROSKI, KEVIN, , ,	nitial) or Full C	Organization Name	Date of F	Receipt								
Mailing Address 5100 ABBOTT AVE S			07 31 Y Y Y Y 2022									
City MINNEAPOLIS	State MN	Zip Code 55410-2143		ction ID : PR of Each Rece								
FEC ID number of contributing federal political committee.	С				4	28.0	8					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Mktg	Men	no Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R Deduc	ction (\$14.04	Bi-Wee	ekly)						
Full Name of Individual (Last, First, Middle I MCKOY, PHILIP, , ,	nitial) or Full C	organization Name	Date of F	Receipt								
Mailing Address 927 LINCOLN AVE			07 / ^D D / Y Y Y Y Y 2022									
City SAINT PAUL	State MN	Zip Code 55105-3149		ction ID : PR								
FEC ID number of contributing federal political committee.	С					384.6	60					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) t Grp CIO	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify) ▼		2884.50	P/R Deduc	tion (\$192.30) Bi-We	ekly)						
Full Name of Individual (Last, First, Middle I JEZARIAN, WENDY, , ,	nitial) or Full C	Organization Name	Date of F	Receipt								
Mailing Address 5251 HUMBOLDT AVE S			^M 07	/ D D 31		2022 Y						
City MINNEAPOLIS	State MN	Zip Code 55419-1121		ction ID : PR of Each Rece			1					
FEC ID number of contributing federal political committee.	С			,	,	38.4	6					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) /ktg Rsch Cnslt	Mer	no Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 288.45	P/R Deduc	ction (\$19.23	Bi-Wee	ekly)						
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UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle I CHAPMAN, GREGORY, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 1724 SECOND STREET				07 31 2022									
City NEW ORLEANS	State LA	Zip Code 70113-1632		Transaction ID : PR2645103065821 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С				-yr- 1		100.0	00					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Acct Mgmt SB KA		Mem	o Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	P/R D	educt	ion (\$50	.00 Bi-We	eekly)						
Full Name of Individual (Last, First, Middle I B. MAHRT, JONATHAN, , ,	nitial) or Full C	rganization Name	Date	of R	eceipt								
Mailing Address 117 VIA DI MELLO			07		31) / Y	2022	Y					
City HENDERSON	State NV	Zip Code 89011-0110					7696582	1					
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) Segment COO		Mem	o Item								
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Mailing Address 7903 S 193 AVENUE			0		31) / Y	ү ү 2022	Y					
City GRETNA	State NE	Zip Code 68028-5017					26366582 is Period	1					
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Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Health Plan Operations		Mem	o Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R D	educt	ion (\$38	.46 Bi-We	eekly)						
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A . K	II Name of Individual (Last, First, Middle Initial ELLNER, KYLE, , ,) or Full O	rganiza	tion Name		Date of Receipt									
	ailing Address 1641 WHITE PINE WAY	Chata	7:	- Oada		07 / 0 D D / Y Y Y Y 2022									
Cit C	iy ARVER	State MN	· · ·	o Code 55315-4563		Transaction ID : PR2646268365821 Amount of Each Receipt this Period									
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	ame of Employer (for Individual) hited HealthCare Services Inc		upation Gen Mg	(for Individual) jmt			M	emo) Ite	m					
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	ailing Address 3409 DEEP WILLOW AVENUE						м м 07	/		31	/ Y	y y 2022	Y		
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	ailing Address 17761 WEAVER LAKE DRIVE	1					^M 07	1		31	/ Y	y y 2022	_		
Ci M	ty IAPLE GROVE	State MN	· · ·	o Code 5311-1328					-			3040658 iis Perioc			
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Ur	ame of Employer (for Individual) nited HealthCare Services Inc		upation Gen Au	(for Individual) ditor		Memo Item									
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$\overline{)}$	NAME OF COMMITTEE (In Full)													
	UnitedHealth Group Incorporated	PAC (L	InitedHealth Group PA	NC)										
A.	Full Name of Individual (Last, First, Middle Initia WELSH, MARY, , ,	l) or Full Or	rganization Name		Date of Receipt									
	Mailing Address 140 BROWN ROAD SOUTH			07 31 Y Y Y Y Y										
	City ORONO	State MN	Zip Code 55356-9134		Transaction ID : PR2646306965821 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С						-	38.	46				
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Corporate Security		Me	emo	tem							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.45		P/R Ded	uctio	on (\$19.	.23 Bi-We	ekly)					
в.	Full Name of Individual (Last, First, Middle Initia SWENSSON, CHARLES, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt							
	Mailing Address 6312 MERRIMAC LANE NORTH			07 / D D / Y Y Y Y 2022										
	City MAPLE GROVE	State MN	Zip Code 55311-3835					PR26984 leceipt th		1				
	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 ▼ 2884.50	F	P/R Dedu	uctio	on (\$192	2.30 Bi-W	'eekly)					
С.	Full Name of Individual (Last, First, Middle Initia ROSENHAUS, MORGANNE, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt							
	Mailing Address 724 FARRAGUT STREET NW				07	1	31		y y 2022					
	City WASHINGTON	State DC	Zip Code 20011-4012					PR26984 leceipt th		1				
	FEC ID number of contributing federal political committee.	С					,	,	115.	38				
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Affs Dir		Me	emc	tem							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 865.35		P/R Ded	ucti	on (\$57	.69 Bi-We	eekly)					
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or	for commercial purposes, other than using the	name and a	ddress of any political committee	e to s	olicit co	ntrib	outions	from such	n committ	ee.				
$\left \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate		InitedHealth Group P/											
				10)										
Α.	Full Name of Individual (Last, First, Middle Init ZENICK, GEOFFREY, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt							
	Mailing Address 7714 TWISTED OAKS CIRCL	E			07 31 2022									
	City	State	Zip Code		Transaction ID : PR2698410865821									
	DALLAS	TX	75231-4711	_	Amoun	t of	Each F	Receipt th	is Period					
	FEC ID number of contributing federal political committee.	С							76.	92				
	Name of Employer (for Individual)	Occi	upation (for Individual)	-	M	emo	ltem							
	Optum Services, Inc		P Sales											
	Receipt For:	Aggregate	Year-to-Date ▼											
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В.	Full Name of Individual (Last, First, Middle Init TAYLOR, JOSHUA, , ,	tial) or Full O	rganization Name	Date of Receipt										
	Mailing Address 7 CARRIAGE HILL RD				07 31 / Y Y Y Y 2022									
	City	State	Zip Code		Trans	acti	ion ID :	PR26984	11676582	1				
	WOODBRIDGE	СТ	06525-1037		Amoun	t of	Each F	Receipt th	is Period					
	FEC ID number of contributing federal political committee.	С			38.46									
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Proj-Prgm Mgmt		Memo Item									
	Receipt For:	Aggregate	Year-to-Date ▼											
	Primary General			114	P/R Ded	ucti	on (\$19.	.23 Bi-We	ekly)					
	Other (specify) v		, 288.45	4										
с.	Full Name of Individual (Last, First, Middle Init DOWLING, MELODY, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt							
	Mailing Address 14205 INDEPENDENCE COL	JRT				/			2022	Y				
	City	State	Zip Code	_	07 Trans	act	31 ion ID :		2022 1 8256582	1				
	BASEHOR	KS	66007-5203				-		is Period					
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .	. ,	76.	92				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Memo Item										
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$\overline{\}$	NAME OF COMMITTEE (In Full)													
	UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	AC)										
<u>v</u>	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name											
Α.	SELIG, JOHN, , ,				Date of	Rec	eipt	_						
	Mailing Address 6406 WESTMINSTER				07 31 2022									
	City	State	Zip Code		Trans	actic	on ID : F	PR26991	18466	5821				
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	FEC ID number of contributing federal political committee.	С								61.52	2			
	Name of Employer (for Individual)		upation (for Individual)	- ī	M	emo	ltem							
	Optum Services, Inc		Business Development Exe											
	Receipt For:	Aggregate	Year-to-Date V											
	Primary General		461.40	P/	R Ded	uctio	n (\$30.7	'6 Bi-We	ekly)					
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В.	AHLSTROM, ALEXIS, , ,				Date of	Rec	•							
	Mailing Address 3421 OAKWOOD TERRACE				M M	1	31	/ Y	202	2				
	City	State	Zip Code		Trans	actio	n ID : F	PR26991	8716	5821				
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	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs		Memo Item									
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	Mailing Address 12011 FAIRVIEW CT				м м 07	1	D D D 31	/ Y	202	22	Ý			
		State MN	Zip Code					PR26991						
			55343-4516	A	Amount	of E	Each Re	eceipt th	is Pe	riod				
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	Name of Employer (for Individual) Optum Services, Inc	Occu VP F	upation (for Individual) Fin		M	emo	ltem							
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		Use separate schedule(s)	(check only one)								
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Any information copied from such Reports and or for commercial purposes, other than using the				17 s							
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UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle In A. HECK, DARRYL, , ,	nitial) or Full C	organization Name	Date of Receipt								
Mailing Address 9801 DORSET LANE			07 31 2022								
City EDEN PRAIRIE	State MN	Zip Code 55347-3139	Transaction ID : PR2700831965821 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.08								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Bus Anlys Cnslt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)								
Full Name of Individual (Last, First, Middle II B. GOMEZ, REYNALDO, , ,	nitial) or Full C	organization Name	Date of Receipt								
Mailing Address 2633 SOUTH WEST 31 AVE			07 31 2022								
City	State FL	Zip Code	Transaction ID : PR2700833965821								
	1.5	33133-2905	Amount of Each Receipt this Period	_							
FEC ID number of contributing federal political committee.	С		28.06								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mkt SIs Mgr Field	Memo Item								
Receipt For:	Aggregate	Year-to-Date V									
Primary General Other (specify) ▼		210.45	P/R Deduction (\$14.03 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I	nitial) or Full C	organization Name	Date of Receipt								
Mailing Address 1906 N MEYERS RD			07 / D D / Y Y Y Y 2022								
City LIBERTY LAKE	State WA	Zip Code 99016-5049	Transaction ID : PR2700857565821 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		30.76								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Bus Process	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.70	P/R Deduction (\$15.38 Bi-Weekly)								
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SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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\backslash	NAME OF COMMITTEE (In Full)				_										
\rangle	UnitedHealth Group Incorporated	I PAC (l	Jni	itedHealth Group P/	4C)										
۹.	Full Name of Individual (Last, First, Middle Initia STEARNS, SALLIE, , ,	-	rgai	nization Name	Date of Receipt										
	Mailing Address 211 COLONIAL HOMES DRIVE #1505	1				07 31 Y Y Y Y 2022									
		State GA		Zip Code	F	Transaction ID : PR2700861765821 Amount of Each Receipt this Period									
	ATLANTA			30309-1293		Amoun	t of	Eac	h Re	ceipt tl	nis Peri	od			
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	Primary General Other (specify) ▼		,	210.60]	P/R Ded	uctio	on (\$	\$14.0	4 Bi-W	eekly)				
	Full Name of Individual (Last, First, Middle Initia WARNER, JONATHAN, , ,	l) or Full O	rgai	nization Name		Date o	f Re	ceip	t						
	Mailing Address 258 CAMBRIDGE DRIVE			07 31 2022											
	City	State		Zip Code		Trans	acti	on I	D : P	R2700	873565	821			
	RAMSEY	NJ		07446-1260		Amoun	t of	Eac	h Re	ceipt tl	nis Peri	od			
	FEC ID number of contributing federal political committee.	С				28.08									
	Name of Employer (for Individual) Optum Services, Inc		•	tion (for Individual) Svc Acct Mgt		М	emo	ltei	n						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ur-to-Date ▼ 210.60]	P/R Deduction (\$14.04 Bi-Weekly)									
	Full Name of Individual (Last, First, Middle Initia WAYLAND, CHARLES, , ,	l) or Full O	rgai	nization Name		Date o	f Re	ceip	t						
	Mailing Address 5601 MATOAKA RD					07	/	D	31	/ Y	2022		Y		
	City	State		Zip Code		Trans	act	ion l	ID : F	R2700	924665	821			
	RICHMOND	VA		23226-2329		Amoun	t of	Eac	h Re	ceipt tl	nis Peri	od			
	FEC ID number of contributing federal political committee.	С						,		9	38	34.60	0		
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) n CEO		Μ	emc	b Ite	m						
	Dessint For:	Aggregate	P/R Deduction (\$192.30 Bi-Weekly)												
	Other (specify)	L	7	2884.50							- /				
6	JBTOTAL of Receipts This Page (optional)					_				_	44	0.76	6		

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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 MCSWEENEY, ERIN, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 1128 EDINGTON PLACE			07 31 Y Y Y Y Y 2022								
City MARCO ISLAND	State FL	Zip Code 34145-2006	Transaction ID : PR2701818065821 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 Chief People Officer	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. OCONNELL, DANIEL, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 3325 W 18TH AVENUE			07 / D D / Y Y Y Y 2022								
City DENVER	State CO	Zip Code 80204-1681	Transaction ID : PR2701819665821								
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1730.70	P/R Deduction (\$115.38 Bi-Weekly)								
Full Name of Individual (Last, First, Middle BRUCE, JAMIE, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 1433 POWDER DRIVE			07 31 Y Y Y Y Y								
City O FALLON	State MO	Zip Code 63366-1398	Transaction ID : PR2701823065821 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 ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional).			999.96								
TOTAL This Period (last page this line number	er only)										

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			Use separate schedule(s)	(che	ck only	or or	ne)							
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b 14	11c		12 16	17			
	y information copied from such Reports and Sta for commercial purposes, other than using the r				or the		oose of	soliciting	g con	tributi	ons			
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	C)										
A.	Full Name of Individual (Last, First, Middle Initia SPARKS, KEVIN, , ,	l) or Full O	rganization Name		Date of Receipt									
	Mailing Address 10681 S CEDAR NILES BLVD			07 31 2022										
	City OLATHE	State KS	Zip Code 66061-7415	Transaction ID : PR2701825565821 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С								192.3	0			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Me	emo	Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1442.25	P/	'R Dedi	uctio	on (\$96.	15 Bi-We	ekly))				
в.	Full Name of Individual (Last, First, Middle Initia KRAMER, NANCY, , ,	l) or Full O	rganization Name	C	Date of	Re	ceipt							
	Mailing Address 4672 BITTERN LANE			07 / D D / Y Y Y Y 2022										
	City LEBANON	State OH	Zip Code 45036-7562					PR2702						
	FEC ID number of contributing federal political committee.	С	43030-7302		Amount	OT	Each R	eceipt th	iis pe	76.9	2			
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Clin Ops	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90		R Dedu	uctio	on (\$38.4	46 Bi-We	ekly)	I				
с.	Full Name of Individual (Last, First, Middle Initia MERZLICKER, CAREY, , ,	l) or Full O	rganization Name		Date of	Re	ceipt							
	Mailing Address 950 BENTLEY PARK CIRCLE				м м 07	/	D D D 31	/ Y	202	22 [°]	Y			
	O FALLON	State MO	Zip Code 63368-8022	A				PR2703 eceipt th						
	FEC ID number of contributing federal political committee.	С			_		y .	. y	_	76.9	2			
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Dir F	upation (for Individual) Fin		Me	emo	tem							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/	R Ded	uctio	on (\$38.	46 Bi-W	eekly))				
s	UBTOTAL of Receipts This Page (optional)			[, .		;	346.1	4			
т	OTAL This Period (last page this line number or	וy)	••••••					1.40						

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
			13 14 15 16 17 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 BROWN, DIANE, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 502 BERRYMANS LANE			07 31 2022						
City REISTERSTOWN	State MD	Zip Code 21136-6003	Transaction ID : PR2703250865821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.08						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clin Pract Perf	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. CRIPPIN, TODD, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 11328 W 142ND STREET			07 / D D / Y Y Y Y 2022						
City OVERLAND PARK	State KS	Zip Code 66221-8060	Transaction ID : PR2703639565821						
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Prgms	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. YOUNG, DAVID, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 654 CHISWELL CT			07 31 2022						
City BRENTWOOD	State TN	Zip Code 37027-3109	Transaction ID : PR2703655465821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		192.30						
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 ▼ 2692.20	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)		248.46						
TOTAL This Period (last page this line num	ber only)								

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ted PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle In A. WESTRA, ROBERT, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 4042 E ROBIN LANE			07 / D D / Y Y Y Y 07 31 2022						
City PHOENIX	State AZ	Zip Code 85050-6875	Transaction ID : PR2704143465821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.06						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) S VP of Sales	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.45	P/R Deduction (\$14.03 Bi-Weekly)						
Full Name of Individual (Last, First, Middle In B. HOROHO, PATRICIA, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 7808 PALMILLA COURT			07 / D D / Y Y Y Y Y 2022						
City REUNION	State FL	Zip Code 34747-6417	Transaction ID : PR2704194665821 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 CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle In C. DELANY, ANDREW, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 209 GARLAND AVENUE	1 -		07 / D D / Y Y Y Y 2022						
City DECATUR	State GA	Zip Code 30030-4940	Transaction ID : PR2704196365821 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 VP 0	upation (for Individual) Ops	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			797.26						
TOTAL This Period (last page this line numbe	r only)								

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	EMIZED RECEIPIS			or each category of the Detailed Summary Page	×	11a		11		11c	12			
	y information copied from such Reports and State for commercial purposes, other than using the na								se of s					
$\left. \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	tedHealth Group PA	C)										
Α.	Full Name of Individual (Last, First, Middle Initial) JOHAR, RAVI, , ,	or Full O	rgar	ization Name	[Date of Receipt								
	Mailing Address 405 ARGUS MANOR CT	01.1		7.0.1										
	City CHESTERFIELD	State MO		Zip Code 63017-2469	Transaction ID : PR2705065165821 Amount of Each Receipt this Period									
	FFO ID number of contribution	C				Amour	nt of	r Ea	ich Re	ceipt th		.08		
		Sr M	/Ied	ion (for Individual) Dir r-to-Date ▼		Memo Item								
	Primary General Other (specify) ▼		-	210.60	P/	′R De	ducti	ion	(\$14.0	4 Bi-We	ekly)			
B.	Full Name of Individual (Last, First, Middle Initial) DAUN, JESSICA, , ,	nization Name		Date d	of Re	ecei	ipt							
	Mailing Address W273N6194 BASHAM LANE							07 31 2022						
	City SUSSEX	State WI		Zip Code 53089-4702		Transaction ID : PR2705966265821 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С						28.08						
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) Natl VP, Key Accts-Spec Ben				Memo Item								
	Receipt For: A Primary General Other (specify) ▼	ggregate	P/R Deduction (\$14.04 Bi-Weekly)											
C.	Full Name of Individual (Last, First, Middle Initial) ZELLER, TRISHA, , ,	or Full O	rgar	nization Name		Date d	of Re	ecei	ipt					
	Mailing Address 290 PRESERVE CT					^M 07	И /	/	D D D 31	/ Y	y y 2022	Y		
	City CHANHASSEN	State MN		Zip Code 55317-8716							9714658 is Perioc			
	FEC ID number of contributing federal political committee.	С				28.08								
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Staff		P/R Deduction (\$14.04 Bi-Weekly)								
	Receipt For: A Primary General Other (specify)	ggregate	Yea	r-to-Date ▼ 210.60	P									
s	UBTOTAL of Receipts This Page (optional)										84.	24		
	OTAL This Period (last page this line number only				j			, ,		-				

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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 a or for commercial purposes, other than usin	nd Statements magging the name and a	I ay not be sold or used by any p uddress of any political committe	person for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Midd SPADE, NATHAN, , ,	le Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 1060 ELLIOTT LANE			M M / D D / Y Y Y Y 07 31 2022						
City YORK	State PA	Zip Code 17403-3421	Transaction ID : PR2705987065821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		153.84						
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 ▼ 1153.80	P/R Deduction (\$76.92 Bi-Weekly)						
Full Name of Individual (Last, First, Midd B. BARBARO, PHILIP, , ,	le Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 670 ARBUTUS STREET	01-1-	7. 0.1	07 / D D / Y Y Y Y 2022						
City MIDDLETOWN	State	Zip Code 06457-7106	Transaction ID : PR2705988265821 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) National Sales	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Midd C. KMIEC, ADAM, , ,	le Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 4736 PRAIRIE DUNES	1		07 31 2022						
City EAGAN	State MN	Zip Code 55123-2352	Transaction ID : PR2705989265821 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 ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional	al)		923.04						
TOTAL This Period (last page this line num	nber only)								

SCHEDULE A (FEC Form 3X) -

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11			for each category of the Detailed Summary Page	X 1	-	11b	11c	12	<u> </u>			
	y information copied from such Reports and Sta for commercial purposes, other than using the			erson for								
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (L	JnitedHealth Group PA	AC)								
A.	Full Name of Individual (Last, First, Middle Initia PETRONE, DAMIAN, , ,	al) or Full Or	rganization Name	Da	Date of Receipt							
	Mailing Address 703 DEAN CT			07 / D D / Y Y Y Y Y 2022								
	City WEST CHESTER	State PA	Zip Code 19382-2100				: PR2706 Receipt th	41896582 ° nis Period	1			
	FEC ID number of contributing federal political committee.	С				-y		38.4	6			
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Mgt Cons CInt Svc		Men	no Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 288.45	P/R Deduction (\$19.23 Bi-Weekly)								
B.	Full Name of Individual (Last, First, Middle Initia BARTHOLET, DANIEL, , ,	al) or Full Or	rganization Name	Da	te of F	Receipt						
	Mailing Address 5918 VALEWOOD DRIVE				07 31 2022							
	City SI MINNETONKA M		Zip Code 55345-6545				: PR2706 Receipt th	451165821				
	FEC ID number of contributing federal political committee.	С			384.60							
	Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) VP Tax			no Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R	P/R Deduction (\$192.30 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initia MULDOON, ALLISON, , ,	al) or Full Or	rganization Name	Da	te of F	Receipt						
	Mailing Address 2500 CLARENDON BLVD APT 129 City	State	Zip Code	_ L	07 ^M	/ 3	1	2022 45276582				
	ARLINGTON	VA	22201-3835				Receipt th		•			
	FEC ID number of contributing federal political committee.	С				y	, ,	192.3	80			
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Govt Affs		Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1442.25	P/R	P/R Deduction (\$96.15 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)					, ,		615.3	6			
т	OTAL This Period (last page this line number o	nly)		. Ē								

SCHEDULE A (FEC Form 3X) DEAEIDTA

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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 version for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorp	orated PAC (l	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Mid MOORE, KEVIN, , ,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 9405 EAGLE NEST LA	NE		07 31 2022						
City MIDDLETON	State WI	Zip Code 53562-5647	Transaction ID : PR2706453565821 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 ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Mid B. MCMAHON, ANDREW, , ,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 4125 DREW AVENUE			07 31 2022						
City MINNEAPOLIS	State MN	Zip Code 55410-1018	Transaction ID : PR2740509065821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.06						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	1						
Other (specify) ▼		210.45	P/R Deduction (\$14.03 Bi-Weekly)						
Full Name of Individual (Last, First, Mid HUNT, TIMOTHY, , ,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 5594 MARSHALL HOL			07 / D D / Y Y Y Y 2022						
City BURKE	State VA	Zip Code 22015-2141	Transaction ID : PR2740514065821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		76.92						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (option	nal)		489.58						
TOTAL This Period (last page this line nu	Imber 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 erson for the purpose of soliciting contributions 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 WEINBERG, EDWARD, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 8625 APPLETON COURT			07 31 Y Y Y Y Y Y 2022						
City ANNANDALE	State VA	Zip Code 22003-3806	Transaction ID : PR2740514865821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) sion CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. ERICKSON, ELIZABETH, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 5301 CLINTON AVENUE			07 / D D / Y Y Y Y 2022						
City MINNEAPOLIS	State MN	Zip Code 55419-1427	Transaction ID : PR2740516165821 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. Industry & Ntwk Rel	P/R Deduction (\$192.30 Bi-Weekly)						
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 2884.50							
Full Name of Individual (Last, First, Middle C. DELANEY, KEVIN, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2876 GENEVA ST			07 / D D / Y Y Y Y 07 31 2022						
City DENVER	State CO	Zip Code 80238-3035	Transaction ID : PR2740759265821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc	Occi VP F	upation (for Individual) Fin	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)		538.44						
TOTAL This Period (last page this line numl	per only)								

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11		11b	11c	12				
Any information copied from such Reports and				the pu							
or for commercial purposes, other than using the	ne name and a	ddress of any political committee	e to solicit	contr	ibutions	from sucl	h committ	ee.			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle I PONS, NATALIE, , ,	nitial) or Full C	rganization Name	Dat	e of F	leceipt						
Mailing Address 3209 GALLERIA UNIT 803				07 / 07 / 07 <u>2022</u>							
City EDINA	State MN	Zip Code 55435-2547				: PR2740 Receipt th	76196582 nis Period	1			
FEC ID number of contributing federal political committee.	С				-gr		384.6	60			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef Compli Off		Mem	no Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R I	Deduc	tion (\$19	92.30 Bi-W	Veekly)				
Full Name of Individual (Last, First, Middle I ALTIERI, DOMINIQUE, , ,	nitial) or Full C	rganization Name	Dat	e of F	leceipt						
Mailing Address 6611 HIGHWAY 100				07 31 Y Y Y Y Y 2022							
City NASHVILLE	State TN	Zip Code 37205-4226		Transaction ID : PR2740762565821 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С	C Occupation (for Individual) Dir Gen Mgmt			28.06						
Name of Employer (for Individual) United HealthCare Services Inc					no Item						
Receipt For:	Aggregate	Year-to-Date V		1							
Primary General Other (specify) ▼		210.45	P/R [P/R Deduction (\$14.03 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I C. FEHR, STEPHANIE, , ,	nitial) or Full C	rganization Name	Dat	e of F	leceipt						
Mailing Address 6601 BLACKFOOT PASS)7 ^M	/ 31		2022				
City EDINA	State MN	Zip Code 55439-1103				: PR2748 Receipt th	02056582 nis Period	1			
FEC ID number of contributing federal political committee.	С			384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) , Mkt Grp CHRO		Memo Item							
Receipt For: Primary General Other (specify)	Year-to-Date ▼ 2884.50	P/R	Deduc	tion (\$19	92.30 Bi-V	Veekly)					
SUBTOTAL of Receipts This Page (optional)					7		797.2	26			
TOTAL This Period (last page this line numbe	r only)				-						

SCHEDULE A (FEC Form 3X) DEOEIDTO

Use separate schedule(s)

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 13	11b	11c 15	12 16	17			
	y information copied from such Reports and St for commercial purposes, other than using the										
	NAME OF COMMITTEE (In Full)										
$\langle \rangle$	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group PA	C)							
А.	Full Name of Individual (Last, First, Middle Initi PROCHNO, MICHAEL, , ,	al) or Full O	organization Name	Date of Receipt							
	Mailing Address 4640 ST JAMES GATE			07	/ D 31	р / Y	2022	Ŷ			
	City	State	Zip Code	Transaction ID : PR2748021965821							
	EXCELSIOR	MN	55331-9397	Amoun	it of Each F	Receipt tl	nis Perioo	ł			
	FEC ID number of contributing federal political committee.	С					76	.92			
	Name of Employer (for Individual)	Осси	upation (for Individual)	N	lemo Item						
	United HealthCare Services Inc	SBI	KA VP SIs Acct Mgt								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General		576.90	P/R Dec	duction (\$38	.46 Bi-W	eekly)				
	Other (specify) v		576.90								
в.	Full Name of Individual (Last, First, Middle Initi WARD, BRIAN, , ,	al) or Full O	organization Name	Date o	f Receipt						
	Mailing Address 22461 ARCADIA BLUFFS			_	07 31 2022						
	City	State	Zip Code	Trans	saction ID :	PR2749	72416582	21			
	SOUTH LYON	MI	48178-8735	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		28.06							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	N	Memo Item						
	Receipt For:	Aggregate	Year-to-Date ▼	-							
	Primary General Other (specify) ▼		210.45	P/R Deduction (\$14.03 Bi-Weekly)							
— C.	Full Name of Individual (Last, First, Middle Initi CHECKA, SREENIVAS, , ,	al) or Full O	organization Name	Date o	f Receipt						
	Mailing Address 8751 BIG WOODS LN			07			2022	Y			
	City	State	Zip Code	Tran	saction ID	PR2750	2855658	21			
	EDEN PRAIRIE	MN	55347-5348	Amoun	t of Each F	Receipt tl	nis Perioo	ł			
	FEC ID number of contributing federal political committee.	С			. , .	, y	28	.08			
	Name of Employer (for Individual)	Occi	upation (for Individual)	N	lemo Item						
	Optum Services, Inc	Dir F	Product	_							
	Receipt For:	Aggregate	Year-to-Date 🔻								
	Other (specify)	Primary General				.04 Bi-W	eekly)				
s	UBTOTAL of Receipts This Page (optional)					5	133	.06			
т	OTAL This Period (last page this line number of	only)	••••••								

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a │ 11b │ 11c │ 12						
		Solanda Gummary Lage	13 14 15 16 17						
or for commercial purposes, c	other than using the name and a		erson for the purpose of soliciting contributions to solicit contributions from such committee.						
NAME OF COMMITTEE (I UnitedHealth Grou		JnitedHealth Group PA	.C)						
Full Name of Individual (La SEVERANCE, DAVID,	ast, First, Middle Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 2160 N M	ARION ST								
City DENVER	State CO	Zip Code 80205-5245	Transaction ID : PR2750288165821						
FEC ID number of contribu	dia a	80203-3243	Amount of Each Receipt this Period						
federal political committee.	C		76.92						
Name of Employer (for Ind Optum Services, Inc	,	upation (for Individual) I Dir	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) ▼	neral	576.90	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (La B. TAIT, ROBYN, , ,	ast, First, Middle Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 31 LIPTO	N LANE		07 31 Y Y Y Y Y 2022						
City LANGHORNE	State	Zip Code 19047-5782	Transaction ID : PR2754215965821 Amount of Each Receipt this Period						
FEC ID number of contributed federal political committee.			28.08						
Name of Employer (for Inc United HealthCare Services	. la a	upation (for Individual) Bus Process	Memo Item						
Receipt For: Primary Ge Other (specify) ▼	neral Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (La C. ORIE, TIMOTHY, ,	ast, First, Middle Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 23 BISHC	P LANE		07 31 2022						
City SUDBURY	State MA	Zip Code	Transaction ID : PR2754244165821						
		01776-1701	Amount of Each Receipt this Period						
FEC ID number of contribution federal political committee.	C		384.60						
Name of Employer (for Ind	· ·	upation (for Individual)	Memo Item						
United HealthCare Services Receipt For:		Human Capital	_						
	neral	Year-to-Date ▼	P/R Deduction (\$192.30 Bi-Weekly)						
Other (specify)		2884.50							
SUBTOTAL of Receipts This	Page (optional)	•	489.60						
TOTAL This Period (last pag	e this line number only)	· · · · · · · · · · · · · · · · · · ·							

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)	Hanto and b								
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle A. PAGET, JAMIE, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 15268 LOUISIANA AVE			07 31 2022						
City SAVAGE	State MN	Zip Code 55378-5654	Transaction ID : PR2754246065821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle KONTOR, JOHN, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 123A SPA VIEW AVE	2		07 / D D / Y Y Y Y 2022						
City ANNAPOLIS	State MD	Zip Code	Transaction ID : PR2754673665821						
		21401-3542	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		192.30						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Advisory Svc	Memo Item						
Receipt For:	Aggregate	Year-to-Date V							
Primary General Other (specify) ▼		1442,25	P/R Deduction (\$96.15 Bi-Weekly)						
Full Name of Individual (Last, First, Middle BOTHRA, SIDDHARTH, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 17200 SE 45TH STREET			07 31 2022						
City BELLEVUE	State WA	Zip Code 98006-6510	Transaction ID : PR2754720765821 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 ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			653.82						
TOTAL This Period (last page this line numb	per only)								

Use separate schedule(s)

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			Use separate schedule(s)	(check only one)							
			for each category of the Detailed Summary Page	X 11a	11b	11c	12				
	on copied from such Reports and Sta prcial purposes, other than using the n										
	COMMITTEE (In Full) Health Group Incorporated	PAC (L	JnitedHealth Group PA	C)							
	of Individual (Last, First, Middle Initia E, KATHERINE, , ,	l) or Full Oi	rganization Name	Date of Receipt							
Mailing Ac	dress 333 ADAMS ST			м м 07	/ D D 31	/ Y	ү ү 2022	Y			
City DECATUI	र	State GA	Zip Code 30030-5205	Transaction ID : PR2755317265821 Amount of Each Receipt this Period							
	umber of contributing litical committee.	С				-9-	38.4	16			
United Hea	Employer (for Individual) althCare Services Inc		upation (for Individual) Product Manager	Me	emo Item						
Receipt Fo		Aggregate	Year-to-Date ▼ 288.45	P/R Ded	uction (\$19.2	3 Bi-We	ekly)				
	of Individual (Last, First, Middle Initia R, KATHY, , ,	l) or Full Oi	rganization Name	Date of	Receipt						
Mailing Ac	dress 1250 CANTON AVENUE	01-11-	The Outle	07 / D D / Y Y Y Y Y 2022							
City MILTON		State MA	Zip Code 02186-2414		Transaction ID : PR2755347665821 Amount of Each Receipt this Period						
FEC ID nu	umber of contributing litical committee.	С			384.60						
	Employer (for Individual) althCare Services Inc		upation (for Individual) ef Customer Officer	Memo Item							
Receipt Fo		Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)							
	of Individual (Last, First, Middle Initia DN, DANIEL, , ,	l) or Full Oi	rganization Name	Date of	Receipt						
Mailing Ac	dress 15619 SWANSCOMBE LOOP			07	/ D D 31	/ Y	y y 2022	Y			
	IARLBORO	State MD	Zip Code 20774-8412		of Each Re			1			
	umber of contributing litical committee.	С			, ,	y	38.4	łO			
United He	Employer (for Individual) althCare Services Inc	Occu Dir N	upation (for Individual) Mktg		emo Item						
Receipt Fo		Aggregate	Year-to-Date ▼ 288.00	P/R Ded	uction (\$19.2	20 Bi-We	eekly)				
SUBTOTAL	of Receipts This Page (optional)		•			9	461.4	6			
TOTAL This	Period (last page this line number on	ly)	•			-					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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PAGE 205 OF

				r each category of the etailed Summary Page		× 11a 13		11		11c 15	12	17		
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements ma name and a	ay no addres	t be sold or used by any pe as of any political committee	erson to s	for the	e pur ontrib	pos putic	e of s	soliciting	g contrib	utions		
$\left.\right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	Unit	edHealth Group PA	C)									
Α.	Full Name of Individual (Last, First, Middle Initia ABRAHAM, SANTIAGO, , ,	l) or Full C	Organi	zation Name		Date of Receipt								
	Mailing Address 4320 COTTONWOOD LN					07	VI /		31	/ Y	y y 2022	Y		
	City EXCELSIOR	State MN		Zip Code 55331-9328							6521658			
	FEC ID number of contributing federal political committee.	С		55551-9526		Amour	nt of	Ead	ch Re	eceipt th	nis Perioo 384			
	Name of Employer (for Individual) Optum Services, Inc		upations Seg	on (for Individual) CIO		N	/lemc	o Ite	em	,				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year	-to-Date ▼ 2884.50		P/R De	ductio	ion ((\$192	.30 Bi-V	√eekly)			
в.	Full Name of Individual (Last, First, Middle Initia KRAUTKRAMER, MITCHELL, , ,	l) or Full C	Organi	zation Name		Date of	of Re	ecei	pt					
	Mailing Address 8729 COTTONWOOD LANE					M 07	/		31	/ Y	y y 2022	Y		
	City EDEN PRAIRIE	State MN		Zip Code 55347-2216	_			-			9957658 nis Perio			
	FEC ID number of contributing federal political committee.	С						-		- 45-	76	.92		
	Name of Employer (for Individual) United HealthCare Services Inc		cupatio A VP	on (for Individual)		Ν	/lemc	o Ite	em					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year	-to-Date ▼ 576.90		P/R Dee	ductio	on (\$38.4	6 Bi-We	eekly)			
с.	Full Name of Individual (Last, First, Middle Initia	l) or Full C	Organi	zation Name		Date of	of Re	ecei	pt					
	Mailing Address 295 N ELM GROVE ROAD UNIT C					M 07		L	31	L	ү ү 2022	_		
	City BROOKFIELD	State WI	ŀ	Zip Code 53005-6212	-						1736658			
	FEC ID number of contributing federal political committee.	С						Ead		, seept tr	nis Perioo 115	.38		
	Name of Employer (for Individual) United HealthCare Services Inc		upatio	on (for Individual) Dir		N	Nemo	o Ite	em					
	Receipt For: Primary General Other (specify)	Aggregate	Year	to-Date ▼ 865.35		P/R De	ducti	ion ((\$57.6	89 Bi-W	eekly)			
s	UBTOTAL of Receipts This Page (optional)										576	.90		
Т	OTAL This Period (last page this line number or	ıly)			-			-		-				

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 117						
Any information copied from such Reports and or for commercial purposes, other than using			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle MASONER, AUDREY, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 15400 MAPLE STREET			07 / D D / Y Y Y Y 2022						
City OVERLAND PARK	State KS	Zip Code 66223-3262	Transaction ID : PR2756359865821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc	Occ Dir	upation (for Individual) Fin	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. HERMELINGIII, THEODORE, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 117 5TH STREET			07 / D D / Y Y Y Y Y 2022						
	State	Zip Code	Transaction ID : PR2756521665821						
WILMETTE		60091-3405	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) Mktg Bus Dev	Memo Item						
Receipt For:	Aggregate	Year-to-Date 🔻							
Other (specify) ▼		2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle SATTERWHITE, ERIN, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1722 MONUMENT STREE	1		07 / D D / Y Y Y Y 2022						
City CONCORD	State MA	Zip Code 01742-5310	Transaction ID : PR2757435765821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		76.92						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			538.44						
TOTAL This Period (last page this line numb	er only)								

Use separate schedule(s)

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IT.			Use separate schedule(s)	(check only one)							
11			for each category of the Detailed Summary Page	×	11a 13		11b	11c 15		2	17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	tatements ma name and a	L ay not be sold or used by any pe Iddress of any political committee	erson f to so	for the	purp ntrib	oose of	soliciting	conti	ributio	ons
	NAME OF COMMITTEE (In Full)										
	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	C)							
Α.	Full Name of Individual (Last, First, Middle Init MALLEY, KENNETH, , ,	,	rganization Name		Date of	Re	ceipt				
	Mailing Address 764 WEST SADDLE RIVER R				м м 07	/	D D 31	/ Y	Y 202	2	
	City HO HO KUS	State NJ	Zip Code 07423-1645				i on ID : I Each Re				
	FEC ID number of contributing federal political committee.	С					T		3	84.60)
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Gen Mgmt		M	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P	/R Ded	uctio	on (\$192	.30 Bi-W	/eekly)	
В.	Full Name of Individual (Last, First, Middle Init AZAM, MISHAEL, , ,	ial) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 629 JEFFERSON AVENUE				M M 07	/	31	/ Y	2022		
	City	State	Zip Code		Trans	acti	on ID : F	PR27593	84386	5821	
	CHERRY HILL	NJ	08002-3704		Amount	t of	Each Re	eceipt th	is Per	riod	
	FEC ID number of contributing federal political committee.	С					-	-7-		77.00)
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs		M	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 577.50	P	/R Ded	uctic	on (\$38.5	50 Bi-We	ekly)		
с.	Full Name of Individual (Last, First, Middle Init HUNT, BRITTNEY, , ,	ial) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 7287 WINTERCREEK LANE				м м 07	/	D D D 31	L	202	2	ſ
	City TALLAHASSEE	State FL	Zip Code 32309-7401				i on ID : I Each Re				
	FEC ID number of contributing federal political committee.	С			_:		,	, <u>,</u>		76.92	2
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs		M	emo	ltem				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P	P/R Ded	uctio	on (\$38.4	46 Bi-We	eekly)		
s	UBTOTAL of Receipts This Page (optional)		•				y		5	38.52	2
Т	OTAL This Period (last page this line number of	only)					_			-	_

SCHEDULE A (FEC Form 3X) DEOFIDTO

Use separate schedule(s)

FOR LINE NUMBER:

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IT.			Use separate schedule(s)	(check only one)						
	EIVILLED RECEIPIS		for each category of the Detailed Summary Page							
	y information copied from such Reports and Sta for commercial purposes, other than using the r									
$\overline{)}$	NAME OF COMMITTEE (In Full)									
\rangle	UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	.C)						
A.	Full Name of Individual (Last, First, Middle Initia SCHLAIFER, MARISSA, , ,	ll) or Full O	rganization Name	Date of Receipt						
	Mailing Address 1050 N STUART ST #400			07 31 Y Y Y Y 2022						
	City ARLINGTON	State VA	Zip Code 22201-5727	Transaction ID : PR2759756865821 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 ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
в.	Full Name of Individual (Last, First, Middle Initia DIFRONZO, CHRISTINE, , ,	l) or Full O	rganization Name	Date of Receipt						
	Mailing Address 6 CRAIG LN			07 31 2022						
	City HINGHAM	State MA	Zip Code 02043-3411	Transaction ID : PR2759978165821 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		76.92						
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Analytics	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Initia KELLOGG, PETER, , ,	ll) or Full O	rganization Name	Date of Receipt						
	Mailing Address 1515 JEFFERSON AVENUE			07 / D D / Y Y Y Y 2022						
	City NEW ORLEANS	State LA	Zip Code 70115-4120	Transaction ID : PR2759984165821 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		76.92						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) .ssc Gen Counsel	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)			538.44						
Т	OTAL This Period (last page this line number or	וy)	•							

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using	d Statements ma the name and a	I ay not be sold or used by any p uddress 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. ROBERT, MICHAEL, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 79373 FITZGERALD CHURCH ROAD			07 31 2022							
City	State	Zip Code	Transaction ID : PR2759986065821							
COVINGTON	LA	70435-7809	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		76.92							
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item							
United HealthCare Services Inc	VP	Compli								
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify) ▼		576.90	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. DECKER, WYATT, , ,	Initial) or Full C	Prganization Name	Date of Receipt							
Mailing Address 1482 HUNTER DRIVE			07 / D D / Y Y Y Y 2022							
City WAYZATA	State MN	Zip Code 55391-9658	Transaction ID : PR2760134065821							
FEC ID number of contributing	_		Amount of Each Receipt this Period							
federal political committee.	C		384.60							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CEO	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify)		2884.50	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle GRUHN, GINA, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 13 WEATHER VANE DRIV	1	Zin Oode	M M / D D / Y Y Y Y Y 31 2022							
City MORRISTOWN	State NJ	Zip Code 07960-4758	Transaction ID : PR2760769465821 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) Clnt Svc Acct Mgmt	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼	P/R Deduction (\$192.30 Bi-Weekly)							
Other (specify)		2884.50	1							
SUBTOTAL of Receipts This Page (optional).			846.12							
TOTAL This Period (last page this line numb	er only)									

Use separate schedule(s)

FOR LINE NUMBER:

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	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11b	11c	12	<u> </u>	
Any information copied from such Reports and									
or for commercial purposes, other than using t	ne name and a	uuress or any political committe	e lo solicit c	UNTRID	outions f	IOTTI SUCP	committe	.	
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle MASTEN, DALE, , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt				
Mailing Address 9845 BENNINGTON DRIVE	1		M 07	M /	D D 31	/ Y	y y 2022	Y	
City SHARONVILLE	State OH	Zip Code 45241-3619					7 586582 is Period	1	
FEC ID number of contributing federal political committee.	С						384.6	60	
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Regl Affs	_ _ '	Memc	tem				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R De	ducti	on (\$192	2.30 Bi-W	'eekly)		
Full Name of Individual (Last, First, Middle DELMONICO, SUSAN, , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt				
Mailing Address 12 MULBERRY CIRCLE			07	M /	D D D	/ Y	y y 2022	Ŷ	
City JOHNSTON	State RI	Zip Code 02919-2519					81765821 is Period	l	
FEC ID number of contributing federal political committee.	С						230.7	6	
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) c Gen Counsel	- D	Memo	tem				
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) ▼		1730.70	P/R De	ductio	on (\$115	i.38 Bi-W	eekly)		
Full Name of Individual (Last, First, Middle C. GALLE, JOHN, , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt				
Mailing Address 307 BRELLINGER STREE	T State	Zin Code	07		31		ү ү 2022		
City COLUMBIA	IL	Zip Code 62236-3815					'9886582 is Period	1	
FEC ID number of contributing federal political committee.	С				,		38.4	16	
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Pharm Ops		Memo	tem				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 499.98	P/R De	educti	on (\$38.	46 Bi-We	ekly)		
SUBTOTAL of Receipts This Page (optional).					,	7	653.8	2	
TOTAL This Period (last page this line number	er only)								

Use separate schedule(s)

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	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 1	-	11b	11c	12		
Any information copied from such Reports ar			erson for						
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and a	ddress of any political committee	e to solici		ributions	s from suc	n committ	ee.	
UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle BARR, CHRISTY M, , ,	e Initial) or Full C	rganization Name	Da	te of F	Receipt				
Mailing Address 6348 CARRIAGE OAK W	AY			07	/ D 3		y y 2022	Y	
City LIBERTY TWP	State OH	Zip Code 45011-2763				: PR2760 Receipt th		1	
FEC ID number of contributing federal political committee.	С			_	-gr.		76.9	92	
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Pharm Ops		Mer	no Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R	Deduc	ction (\$3	38.46 Bi-W	eekly)		
Full Name of Individual (Last, First, Middle B. CRAWFORD, KEVIN, , ,	e Initial) or Full C	rganization Name	Da	te of F	Receipt				
Mailing Address 127 CHUZZLEWIT DOWN	1			07	/ D	D / Y	y y 2022	Y	
City BRENTWOOD	State	Zip Code 37027-7627				: PR2760		1	
FEC ID number of contributing federal political committee.	С					Receipt th	230.7	76	
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs		Mer	no Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1730.70	P/R	Deduc	tion (\$1	15.38 Bi-V	Veekly)		
Full Name of Individual (Last, First, Middle C. VELASCO, JOEL, , ,	e Initial) or Full C	rganization Name	Da	te of f	Receipt				
Mailing Address 6352 31 PLACE NW ST				07 ^M	/ 03	D / Y	y y 2022	Y	
City WASHINGTON	State DC	Zip Code 20015-2358				: PR2760 Receipt th		1	
FEC ID number of contributing federal political committee.	С			_	,	y	384.6	60	
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Intl Relations		Mer	no Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P/R	Deduo	ction (\$1	192.30 Bi-V	Veekly)		
SUBTOTAL of Receipts This Page (optional)				,	. ,	692.2	28	
TOTAL This Period (last page this line num	ber only)				-q=	-			

SCHEDULE A (FEC Form 3X) DEOFIDTO

Use separate schedule(s)

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	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a		11b	11c	12		
Any information copied from such Reports and or for commercial purposes, other than using the									
NAME OF COMMITTEE (In Full)				JIIII		TOTT SUCI	r commu	ee.	
UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle I WINN, JOSEPH, , ,	nitial) or Full O	rganization Name	Date of	of Re	eceipt				
Mailing Address 4401 GREGG ROAD			07	VI /	D D 31	/ Y	y y 2022	Y	
City BROOKEVILLE	State MD	Zip Code 20833-1033					94026582 is Period	1	
FEC ID number of contributing federal political committee.	С					-	384.6	60	
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs		/lemc	tem				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R De	ducti	on (\$192	2.30 Bi-W	/eekly)		
Full Name of Individual (Last, First, Middle I B. MILLER, CORINNA, , ,	nitial) or Full O	rganization Name	Date of	of Re	eceipt				
Mailing Address 6083 OLD BRICKSTORE R			07	VI /	D D D 31	/ Y	2022	Y	
City GREENSBORO	State NC	Zip Code 27455-8335					9006582 is Period	1	
FEC ID number of contributing federal political committee.	С				1		38.4	46	
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Gen Mgmt		/lemc	tem				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.45	P/R Dec	ductio	on (\$19.:	23 Bi-We	ekly)		
Full Name of Individual (Last, First, Middle I C. OBRIEN, MICHAEL, , ,	nitial) or Full O	rganization Name	Date o	of Re	eceipt				
Mailing Address 11017 CAVELL CIR			07		31	/ Y	2022	Y	
City BLOOMINGTON	State MN	Zip Code 55438-2284					13826582 is Period	1	
FEC ID number of contributing federal political committee.	С				,		96.4	14	
Name of Employer (for Individual) United HealthCare Services Inc	Occi Dir T	upation (for Individual) Fax		Vemo	o Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 721.05	P/R De	ducti	on (\$48.	.07 Bi-We	eekly)		
SUBTOTAL of Receipts This Page (optional)					7		519.2	20	
TOTAL This Period (last page this line numbe	r only)				-				

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			Use separate schedule(s)	(check only one)							
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		X 11a		11b	11c	12		
۸n	y information copied from such Reports and Stat	emente ma			13		14	15	16	17	
	for commercial purposes, other than using the n										
\backslash	NAME OF COMMITTEE (In Full)		haite dhi le chth. Oncom DA	\sim							
/	UnitedHealth Group Incorporated	PAC (L	United Health Group PA	(C)							
	Full Name of Individual (Last, First, Middle Initial) or Full Or	rganization Name			_					
Α.	ARYA, RAJIV, , , Mailing Address 4 GALWAY ROAD			_	Date of	Re	ceipt		Y Y	V	
					07		31	, , , ,	2022	T	
	City SKILLMAN	State NJ	Zip Code 08558-1731	_					64876582	1	
			00000-1701	_	Amount	of	Each R	leceipt th	is Period	_	
	FEC ID number of contributing federal political committee.	С					,		76.9	92	
	Name of Employer (for Individual)	Occu	pation (for Individual)		Me	emo	Item				
	Optum Services, Inc	Sr D	irector, Advisory Svcs								
	Receipt For:	Aggregate	Year-to-Date 🔻		·			40 0.147	a lala A		
	Other (specify) V		576.90		P/R Dedu	ICTIC	on (\$38.	.46 Bi-We	ekiy)		
				_							
B.	Full Name of Individual (Last, First, Middle Initial SONNIER, SUSAN, , ,) or Full Or	rganization Name		Date of	Re	ceipt				
	Mailing Address 301 DEMONBREUN ST UNIT 18	305			07	/	31	/ Y	2022	Y	
	City	State	Zip Code			actio	-	PR27626	4996582 ⁻		
	NASHVILLE	TN	37201-2248	_					is Period		
	FEC ID number of contributing federal political committee.	С					,		230.7	76	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev		Me	emo	Item				
		Aggregate	Year-to-Date 🔻								
	Other (specify)		1730.70		P/R Dedu	ictio	on (\$115	5.38 Bi-W	eekly)		
	Full Name of Individual (Last, First, Middle Initial CLAYTON, JUSTIN, , ,) or Full Or	rganization Name		Deta af	D -	ooint				
υ.	Mailing Address 163 BRIER RIDGE DRIVE				Date of	ne /			YY	Y	
					07		31		2022		
	City DURHAM	State NC	Zip Code 27703-0339	\vdash					7 4996582 is Period	1	
	FEC ID number of contributing				Amount						
	federal political committee.	C			<u> </u>	_	y		153.8	34	
	Name of Employer (for Individual)	Occu	pation (for Individual)		Me	emo	Item				
	United HealthCare Services Inc Receipt For:		Govt Affs	_							
	Primary General	Aggregate	Year-to-Date ▼		P/R Dedu	uctio	on (\$76	.92 Bi-We	ekly)		
	Other (specify)		1153.80				(,,		
	LIPTOTAL of Descints This Desc. (antional)				<u> </u>				461.5	52	
	UBTOTAL of Receipts This Page (optional)		••••••	-			,				
Т	OTAL This Period (last page this line number on	ly)									

FOR LINE NUMBER:

PAGE 214 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 an	d Statements ma	ay not be sold or used by any political committee	13 14 15 16 15 berson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle TARVESTAD, KATHERINE, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 5095 KELSEY TERR			07 31 2022							
City EDINA	State MN	Zip Code 55436-2717	Transaction ID : PR2762955965821 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 ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. BIDINGER, DANIEL, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 3757 INDEPENDENCE R			07 31 2022							
City MAPLE PLAIN	State MN	Zip Code	Transaction ID : PR2762957565821							
	_	55359-9759	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		40.00							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ef of Staff	Memo Item							
Receipt For:	Aggregate	Year-to-Date V								
Other (specify)		300.00	P/R Deduction (\$20.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. DAVIS, JENNIFER, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 4330 CROWN POINT DR			07 / D D / Y Y Y Y 2022							
City COLUMBUS	State OH	Zip Code 43220-4424	Transaction ID : PR2763180365821 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		96.14							
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 ▼ 721.05	P/R Deduction (\$48.07 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			520.74							
TOTAL This Period (last page this line numb										

Use separate schedule(s)

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			Use separate schedule(s)	(check only one)							
116			for each category of the Detailed Summary Page		× 11a		11b	11c	12		
Δn	y information copied from such Reports and Sta	ements ma	av not be sold or used by any ne	rson	13		14	15 soliciting	16	17	
	for commercial purposes, other than using the n										
\backslash				\sim							
/	UnitedHealth Group Incorporated	PAC (L	United Health Group PA	C)							
	Full Name of Individual (Last, First, Middle Initia	l) or Full O	rganization Name								
Α.	LAUSCH, KERSTEN, , ,			_	Date of	Re					
	Mailing Address 236 E NEWELL STREET				м м 07	/	31	/ Y	2022	Y	
	City	State	Zip Code		Transa	acti	on ID :	PR27670)4776582	1	
	WINTER GARDEN	FL	34787-2800	_	Amount	of	Each R	eceipt th	is Period		
	FEC ID number of contributing federal political committee.	С							28.0	06	
									4		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs		Me	emo	Item				
	Receipt For:		Year-to-Date V	-							
	Primary General	Aggregate			P/R Dedu	uctic	on (\$14.	03 Bi-We	ekly)		
	Other (specify) v		210.45								
	Full Name of Individual (Last, First, Middle Initia) or Full O	rganization Name								
	LEFF, ERIN, , ,	,			Date of	Re	ceipt				
	Mailing Address 2633 WEST VIEWMONT WAY	VEST			м м 07	/	D D D 31	/ Y	y y 2022	Y	
	City	State	Zip Code		Transa	acti	on ID :	PR27673	6686582 ⁻	1	
	SEATTLE	WA	98199-3018	_	Amount	of	Each R	eceipt th	is Period		
	FEC ID number of contributing federal political committee.	С			<u> </u>		7	-	384.6	60	
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Clin Ops		Me	emo	Item				
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼	· · · ·	2884.50	F	P/R Dedu	ictic	on (\$192	2.30 Bi-W	eekly)		
	Full Name of Individual (Last, First, Middle Initia	l) or Full O	rganization Name			_					
	FOLEY, BARBARA, , , Mailing Address 6260 BLACK FOX WAY			_	Date of	Re	· .		Y Y	M	
	BLACK FOX WAT				07		D D D 31	/ 1	2022	T	
	City TALLAHASSEE	State FL	Zip Code 32312-4504						23926582	1	
		112	32312-4304	_	Amount	of	Each R	eceipt th	is Period	_	
	FEC ID number of contributing federal political committee.	С			Ļ.	_	y	y y	92.3	30	
	Name of Employer (for Individual)		upation (for Individual)		Me	emo	ltem				
	United HealthCare Services Inc Receipt For:		/ktg Bus Dev	_							
	Primary General	Aggregate	Year-to-Date ▼		P/R Dedu	uctio	on (\$46.	.15 Bi-We	ekly)		
	Other (specify)		692.25						,		
61	JBTOTAL of Receipts This Page (optional)								504.9	96	
3	CONCINE OF NECERIFIS THIS FAGE (OPTIONAL)		•	-			9	,			
т	DTAL This Period (last page this line number on	ly)	••••••				-	1.92			

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a11b11c12							
			13 14 15 16 17							
or for commercial purposes, other than using			erson for the purpose of soliciting contributions to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (JnitedHealth Group PA	.C)							
Full Name of Individual (Last, First, Middle A. OBARSKI, DANIEL, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 2035 S CLARKSON ST			07 31 / Y Y Y Y 2022							
City DENVER	State CO	Zip Code 80210-4105	Transaction ID : PR2769243965821							
		00210-4105	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		30.76							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Health Plan Operations	Memo Item							
Receipt For:		Year-to-Date V	_							
Primary General Other (specify) ▼		230.70	P/R Deduction (\$15.38 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. KEDZUF, LINDSAY, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 15540 56TH AVE N			07 31 2022							
City	State	Zip Code	Transaction ID : PR2769244065821							
PLYMOUTH	MN	55446-2982	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		38.46							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Found/Social Resp	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.45	P/R Deduction (\$19.23 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. MOORE, MALVIN, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 4520 SUNSET RIDGE			07 / D D / Y Y Y Y 07 31 2022							
City	State	Zip Code	Transaction ID : PR2769866465821							
MINNEAPOLIS	MN	55416-3333	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.06							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Found/Social Resp	Memo Item							
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 210.45	P/R Deduction (\$14.03 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			97.28							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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			for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
An or	y information copied from such Reports and State for commercial purposes, other than using the nar	ments ma me and a	ay not be sold or used by any pe address of any political committee	rson for the purpose of soliciting contributions						
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	UnitedHealth Group PA	C)						
Α.	Full Name of Individual (Last, First, Middle Initial) RICHARDSON, GENEVRA, , ,	or Full C	Drganization Name	Date of Receipt						
	Mailing Address 3618 N 51ST PLACE			07 31 Y Y Y Y Y 2022						
	City	State AZ	Zip Code	Transaction ID : PR2778357565821						
	PHOENIX	AZ	85018-6158	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		cupation (for Individual) Govt Affs	Memo Item						
	Receipt For: A	aareaate	Year-to-Date V	-						
	Primary General Other (specify) ▼		2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
В.	Full Name of Individual (Last, First, Middle Initial) HAUSMAN, ERIC, , ,	or Full C	Drganization Name	Date of Receipt						
	Mailing Address 1617 WEST 25TH STREET			07 31 2022						
	City	State	Zip Code	Transaction ID : PR2778612765821						
	MINNEAPOLIS	MN	55405-2466	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		cupation (for Individual) Comm	Memo Item						
	Receipt For: A Primary General Other (specify) ▼ I	ggregate	Year-to-Date ▼ , 2884,50	P/R Deduction (\$192.30 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Initial) BAKER, OMAR, , ,	or Full C	Drganization Name	Date of Receipt						
	Mailing Address 8100 SPRING HILL FARM DR			07 31 2022						
	5	State	Zip Code	Transaction ID : PR2778986665821						
	MCLEAN	VA	22102-2330	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		cupation (for Individual) P Strat Intv & CMO HIth Svc	Memo Item						
	Receipt For: A Primary General Other (specify) I	ggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)			1153.80						
Т	OTAL This Period (last page this line number only)	····· •							

SCHEDULE A (FEC Form 3X) DEOFIDTO

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (l	JnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, Middle Ir A. PIERINI, RYAN, , ,	nitial) or Full O	rganization Name	Date of Receipt					
Mailing Address 3761 SAN YSIDRO WAY			07 31 2022					
City SACRAMENTO	State CA	Zip Code 95864-2866	Transaction ID : PR2778987365821 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		76.92					
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 ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)					
Full Name of Individual (Last, First, Middle Ir B. TROTTI, MEGAN, , ,	nitial) or Full O	rganization Name	Date of Receipt					
Mailing Address 4900 CEDAR LAKE ROAD APT 605			07 / D D / Y Y Y Y 2022					
City ST LOUIS PARK	State MN	Zip Code 55416-5328	Transaction ID : PR2779272965821 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		28.06					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Found/Social Resp	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.45	P/R Deduction (\$14.03 Bi-Weekly)					
Full Name of Individual (Last, First, Middle Ir c. GHAZANFARIANTALEGHANI, A		rganization Name	Date of Receipt					
Mailing Address 1039 MOUNTAIN AVE	1		07 31 Y Y Y Y Y 2022					
City BERKELEY HEIGHTS	State NJ	Zip Code 07922-2343	Transaction ID : PR2782602165821 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		76.92					
Name of Employer (for Individual) Optum Care, Inc. Receipt For:		upation (for Individual) Gen Mgmt	Memo Item					
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			181.90					
TOTAL This Period (last page this line number	r only)							

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 219 OF

			Use separate schedule(s)	(ch	(check only one)							
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page		′ 11a 13		11b	11c		12 16	17	
	y information copied from such Reports and Sta for commercial purposes, other than using the n				for the		pose of	soliciting	g con	tributi	ions	
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	AC)								
A.	Full Name of Individual (Last, First, Middle Initia ROMANOW, KATHLEEN, , ,	l) or Full Oi	rganization Name		Date of	Re	ceipt					
	Mailing Address 6804 MARBURY ROAD				м м 07	/	D D D 31	/ Y	y 202	ү 22	Y	
	City BETHESDA	State MD	Zip Code 20817-6052					PR2782 eceipt th				
	FEC ID number of contributing federal political committee.	С								192.3	0	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs		Me	emo	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1442.25		P/R Ded	uctio	on (\$96.	15 Bi-We	ekly))		
в.	Full Name of Individual (Last, First, Middle Initia SABAL, PETER, , ,	l) or Full Oi	rganization Name		Date of	Re	ceipt					
	Mailing Address 6151 WILLOW ROCK ST			м м 07	/	D D D 31	/ Y	y 202	22 22	Y		
	City LAS VEGAS	State Zip Code NV 89135-1482				Transaction ID : PR2783559965821 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С				U			lis re	76.9	2	
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		Me	emo	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initia MOYER, CASEY, , ,	l) or Full Oi	rganization Name		Date of	Re	ceipt					
	Mailing Address 7568 W SNOWBERRY				м м 07	/	D D D 31	/ Y	202	22 [°]	Y	
	City BOISE	State ID	Zip Code 83709-1674				-	PR2783 eceipt th				
	FEC ID number of contributing federal political committee.	С			30.76							
Name of Employer (for Individual) Optum Services, Inc		Occu Dir, S		Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.70		P/R Ded	uctio	on (\$15.	.38 Bi-W	eekly))		
s	UBTOTAL of Receipts This Page (optional)		•••••	•			, .	. ,		299.9	8	
т	OTAL This Period (last page this line number on	ly)		•				- 41-				

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER:

PAGE 220 OF

			Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS			for each category of the Detailed Summary Page	X 11a	11b 11c	12	_ _				
	y information copied from such Reports and S for commercial purposes, other than using the										
	NAME OF COMMITTEE (In Full)	name and a					<u>. </u>				
	UnitedHealth Group Incorporate	ed PAC (UnitedHealth Group PA	C)							
Α.	Full Name of Individual (Last, First, Middle Init BRADY, NICOLE, , ,	ial) or Full C	Organization Name	Date of Re	eceipt						
	Mailing Address N7623 OLSON RD			M M /	31 / Y	y y 2022	Y				
	City ONEIDA	State WI	Zip Code 54155-9619		tion ID : PR2786 Each Receipt th		l				
	FEC ID number of contributing federal political committee.	С			age. 1 1 age.	28.0)6				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Dir	Memo	o Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.45	P/R Deducti	ion (\$14.03 Bi-We	ekly)					
в.	Full Name of Individual (Last, First, Middle Init OWEN, CHRISTOPHER, , ,	ial) or Full C	Organization Name	Date of Re	eceipt						
	Mailing Address 9011 LESLIES GATE			M M /	31 / Y	y y 2022	Y				
	City BOERNE	State TX	Zip Code 78015-4779		ion ID : PR27869		I				
	FEC ID number of contributing federal political committee.	C			Each Receipt th	384.6	30				
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) P Mktg	Memo	o Item						
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Init CONWAY, PATRICK, , ,	ial) or Full C	Organization Name	Date of Re	eceipt						
	Mailing Address 190 WINDING RIVER RD			07 /	M M / D D / Y Y Y Y Y						
	City WELLESLEY	State MA	Zip Code 02482-7320		tion ID : PR2787 Each Receipt th		1				
	FEC ID number of contributing federal political committee. Name of Employer (for Individual) Optum Services, Inc				384.60						
			upation (for Individual) Unit CEO	Mem	o Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduct	ion (\$192.30 Bi-V	/eekly)					
s	UBTOTAL of Receipts This Page (optional)				, , , ,	797.2	26				
T	OTAL This Period (last page this line number	only)									

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 221 OF

		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
Any information copied from such Reports and or for commercial purposes, other than using			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)	name anu d								
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle CLARKE, LACEY, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 15 MILO STREET			07 / D D / Y Y Y Y 07 31 2022						
City HUDSON	State NY	Zip Code 12534-2722	Transaction ID : PR2789668265821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		153.84						
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 ▼ 1153.80	P/R Deduction (\$76.92 Bi-Weekly)						
Full Name of Individual (Last, First, Middle BILLS, MATTHEW, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 18961 DEVONSHIRE ST			07 / D D / Y Y Y Y 2022						
City BEVERLY HILLS	State MI	Zip Code 48025-4031	Transaction ID : PR2790558765821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		92.30						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) CInt Svc Acct Mgt	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) ▼		692.25	P/R Deduction (\$46.15 Bi-Weekly)						
Full Name of Individual (Last, First, Middle HAMDORF, JON, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 17600 W 84TH STREET	Ototo	Zip Code	07 31 2022						
City LENEXA	State KS	Zip Code 66219-8062	Transaction ID : PR2791330865821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		115.38						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Health Plan Operations	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 865.35	P/R Deduction (\$57.69 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			361.52						
TOTAL This Period (last page this line numb	er only)								

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 222 OF

		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12	17					
			13 14 15 16 erson for the purpose of soliciting contributions e to solicit contributions from such committee.	17					
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle A. SEGERMAN, ANDREW, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 7306 REDBRIDGE CT			07 31 2022						
City SPRINGFIELD	State VA	Zip Code 22153-1511	Transaction ID : PR2791475865821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		38.46						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) t Affs Dir	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.45	P/R Deduction (\$19.23 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. SMITH, TAMEEKA, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1605 PARK AVE		07 / D D / Y Y Y Y Y 07 31 2022							
City RICHMOND	State VA	Zip Code 23220-2908	Transaction ID : PR2791832965821 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) I Plan CEO	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	-						
Primary General Other (specify) ▼		2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. SMITH, CHRISTOPHER, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2915 E MIGRATORY DR			07 / D D / Y Y Y Y 2022						
City BOISE	State ID	Zip Code 83706-6935	Transaction ID : PR2793353465821 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.			28.06						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Dir Comm	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.45	P/R Deduction (\$14.03 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)		451.12						
TOTAL This Period (last page this line num	ber only)			T					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

PAGE 223 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
or for commercial purposes, other than us	and Statements maing the name and a	ay not be sold or used by any p ddress of any political committed	erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorp	orated PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Mid MORSE, SARA, , , Mailing Address 6398 VALE STREET	ddle Initial) or Full C	rganization Name	Date of Receipt							
City	State	Zip Code	07 31 2022 Transaction ID : PR2794473465821							
ALEXANDRIA	VA	22312-1435	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 ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Mic	ddle Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address										
City	State	Zip Code	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C									
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V]							
Full Name of Individual (Last, First, Mid	ddle Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address			M = M / D = D / Y = Y = Y							
City	State	Zip Code	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С									
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date V]							
SUBTOTAL of Receipts This Page (option	nal)		384.60							
TOTAL This Period (last page this line n		· · ·	115467.53							

SCHEDULE A (FEC Form 3X) - DEAEIDTA

FOR LINE NUMBER:

PAGE 224 OF

Use separate schedule(s)		(check only one)					
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b 11c 12 13 14 15 × 16 17				
Any information copied from such Reports an or for commercial purposes, other than using	d Statements m the name and a	A not be sold or used by any paddress 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)							
angle UnitedHealth Group Incorpora	ated PAC (UnitedHealth Group P	4C)				
Full Name of Individual (Last, First, Middle Kurt Schrader for Congress	Initial) or Full C	Organization Name	Date of Receipt				
Mailing Address PO Box 3314			07 28 2022				
City	State	Zip Code	Transaction ID : 47862933				
Oregon City	OR	97045	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C co	0446906	2500.00				
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item				
Receipt For: 2022 Primary ✗ General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2500.00	Refund of Contribution to the 2022 US General				
Full Name of Individual (Last, First, Middle	Initial) or Full C	Organization Name					
Mailing Address		Date of Receipt					
City	State	Zip Code					
			Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C						
Name of Employer (for Individual)	Occ	supation (for Individual)	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V]				
Full Name of Individual (Last, First, Middle	Initial) or Full C	Organization Name	Date of Receipt				
Mailing Address							
City	State	Zip Code					
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period				
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date V]				
SUBTOTAL of Receipts This Page (optional)			2500.00				
TOTAL This Period (last page this line numb	per only)		2500.00				

SCHEDULE B (FEC Form 3X)			FC	DR LI	NE	NUMBER	:			PA	AGE	225 OF 2	237
ITEMIZED DISBURSEMENTS	Use separate schedule(s) (che for each category of the				only 1b	y one) 22 23 26 27							
	Detailed	Summary Page			8a	28b		23 28c	\vdash	29	-	30b	
Any information copied from such Reports and State or for commercial purposes, other than using the na													
				_		、							
UnitedHealth Group Incorporated	PAC (Un	itedHealth G	irou	р Р.	AC)							
Full Name (Last, First, Middle Initial) A. DEWALL, PATRICK, , ,						Date c	of Dis	burse	eme				
Mailing Address 7662 RIDGEVIEW WAY						07		2	28	/		022	
City CHANHASSEN	State MN	Zip Code 55317-4507				FEC lo	dentif	icatio	n N	umbe	r		
Purpose of Disbursement Refund of PAC Contributions			0	10	1	С	_			477.0			
Candidate Name				egory/				ction Each				this Period	d
Senate	Primary	General	.,			Ľ		y	Ref	und o		576.90 C Contributi	ons
State: District:	Other (spec	city) 🔻				Me	emo	ltem					
Full Name (Last, First, Middle Initial) B.						Date c	of Dis	burse	eme	nt			
Mailing Address						M	/	D	D	1	Y Y	Y Y	
		1											
City	State	Zip Code				FEC lo	dentif	icatio	n N	umbe	r		
Purpose of Disbursement			_		1	С							
Candidate Name			Category/ Type			Amount of Each Disbursement this Period				d			
Office Sought: House Disburse	ement For: Primary	General		·				,	_			_ 45 _	
State: District:	Other (spec	cify)				Me	emo	ltem					
Full Name (Last, First, Middle Initial)						Date c	of Dis	burse	eme	nt			
Mailing Address						M	/	D	D	/	Y Y	YY	
City	State	Zip Code				FEC lo	dentif	icatio	n N	umbe	r		
Purpose of Disbursement					1	С							
Candidate Name				egory/ /pe		Amour	nt of	Each	Dis	burse	ement	this Period	b
Office Sought: House Disburse Senate	ement For: Primary	General				L.		<u> </u>	_				
State: District:	Other (spec	cify) ▼				Me	emo	Item					
CUDTOTAL of Dichursomente This Date (atting the								-	_	_		576.90	٦
SUBTOTAL of Disbursements This Page (optional)					_	+	-		-		-	1 40 1	4
TOTAL This Period (last page this line number onl	y))				,				576.90	

CHEDULE B (FEC Form 3X)	Use separate schedule(s)		E NUMBER: PAGE 226 OF 237					
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 28a	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$					
ny information copied from such Reports and Stat r for commercial purposes, other than using the n	ements may not be sold or us ame and address of any politi	sed by any perso cal committee to	on for the purpose of soliciting contributions solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (UnitedHealth	Group PAC)					
Full Name (Last, First, Middle Initial) Cooper for North Carolina			Date of Disbursement					
Mailing Address 434 Fayetteville Street Ste 2020	1		07 07 2022					
City Raleigh Purpose of Disbursement	StateZip CodeNC27601		FEC Identification Number					
Void - Cooper for North Carolina; Check Dated 4/ Candidate Name	11/2022	011 Category/	Transaction ID : 47765077 Amount of Each Disbursement this Period					
Cooper, Roy, , NC Gov., Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify) ▼	Туре	- 5000.00 Void - Cooper for North Carolina Memo Item Check Dated 4/11/2022					
Full Name (Last, First, Middle Initial) • Kim Reynolds for Iowa Mailing Address 983 S 50th Place	Reynolds for Iowa							
City West Des Moines Purpose of Disbursement Contribution		FEC Identification Number						
Candidate Name Reynolds, Kimberly, , IA Gov.,	ement For: Primary General Other (specify)	011 Category/ Type	Transaction ID : 47795050 Amount of Each Disbursement this Period 5000.00 Contribution					
State: District: Full Name (Last, First, Middle Initial)			Dete of Dickerson and					
House Republican Caucus Mailing Address 595 S Thacker Road			Date of Disbursement					
City Hammett	State Zip Code ID 83627		FEC Identification Number					
Purpose of Disbursement Contribution Candidate Name		011 Category/ Type	Transaction ID : 47806013 Amount of Each Disbursement this Period					
Office Sought: House Disburs	ement For: Primary General		500.00 Contribution					

	CHEDULE B (FEC Form 3X)	Use sepa	arate schedule(s)	FOR LINE I (check only				
	EMIZED DISBURSEMENTS		category of the Summary Page	21b 28a	22 23 26 27 28b 28c x 29 30b			
	y information copied from such Reports and State for commercial purposes, other than using the na							
\setminus	NAME OF COMMITTEE (In Full)							
	UnitedHealth Group Incorporated	PAC (Un	itedHealth G	Group PAC)			
A.	Full Name (Last, First, Middle Initial) Senate Republican PAC of Idaho				Date of Disbursement			
	Mailing Address PO Box 173				07 26 2022			
	City Boise	State ID	Zip Code 83701		FEC Identification Number			
	Purpose of Disbursement Contribution			011	C Transaction ID : 47806014			
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period			
	Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General		500.00 Contribution			
	State: District:		(iliy)		Memo Item			
B.	Full Name (Last, First, Middle Initial) Idaho Democratic Legislative Cam Mailing Address 1711 Ridenbaugh St	npaign C	ommittee		Date of Disbursement			
	City Boise	State ID	Zip Code 83702		FEC Identification Number			
	Purpose of Disbursement Contribution			011	C Transaction ID : 47806015			
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period			
	Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General Cify)		500.00 Contribution Memo Item			
с.	Full Name (Last, First, Middle Initial) Romanchuk for Ohio				Date of Disbursement			
	Mailing Address 4679 Winterset Dr				07 / 26 / Y Y Y Y 2022			
	City Columbus	State OH	Zip Code 43220		FEC Identification Number			
	Purpose of Disbursement Contribution Candidate Name Romanchuk, Mark, , OH Sen.,			011 Category/ Type	Transaction ID : 47806016 Amount of Each Disbursement this Period			
		ment For: Primary Other (spe	General cify) ▼	1990	2500.00 Contribution Memo Item			
⊢	UBTOTAL of Disbursements This Page (optional).				3500.00			

SCHEDULE B (FEC Form 3X)			FOR LINE	
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a	v one) 22 23 26 27 28b 28c x 29 30b
Any information copied from such Reports and State or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (Un	itedHealth G	Group PAC	;)
Full Name (Last, First, Middle Initial) A. Hackett for Ohio				Date of Disbursement
Mailing Address 2050 Palouse Drive				07 26 Y Y Y Y Y 2022
City London	State OH	Zip Code 43140		FEC Identification Number
Purpose of Disbursement Contribution Candidate Name			011	C Transaction ID : 47806017
Hackett, Robert, , OH Sen.,	ement For:		Category/ Type	Amount of Each Disbursement this Period 2500.00
State: District:	Primary Other (spec	General cify) ▼		Contribution Memo Item
Full Name (Last, First, Middle Initial) B. Matt Lehman for State Represent	ative			Date of Disbursement
Mailing Address 663 Lehman St		07 26 2022		
Berne Purpose of Disbursement Contribution	State IN	Zip Code 46711	011	FEC Identification Number
	ement For:		Category/ Type	Amount of Each Disbursement this Period
State: District:	Primary Other (spec	Cify) General		Contribution Memo Item
Full Name (Last, First, Middle Initial) C. Steve Huffman for Ohio				Date of Disbursement
Mailing Address 331 South Market St				07 26 Y Y Y Y Y 2022
City Troy Purpose of Disbursement Contribution	State OH	Zip Code 45373	011	FEC Identification Number
Candidate Name Huffman, Stephen, , OH Sen., Office Sought: House Disburse	ement For:		Category/ Type	Transaction ID : 47806019 Amount of Each Disbursement this Period 2000.00
Senate President State: District:	Primary Other (spec	General cify) ▼		Contribution Memo Item
SUBTOTAL of Disbursements This Page (optional).			•••••	5500.00
TOTAL This Period (last page this line number only	y)		••••••	

SC	HEDULE B (FEC Form 3X)			FC	DR I	INE M	NUMBER: PAGE 229 OF 237
ITI	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the			heck	only 21b	
			Summary Page			210 28a	28b 28c x 29 30b
	y information copied from such Reports and State for commercial purposes, other than using the na						
$\left \right\rangle$	NAME OF COMMITTEE (In Full)					• ~ `	N
	UnitedHealth Group Incorporated	PAC (Ur	nitedHealth G	rou	pР	AC))
	Full Name (Last, First, Middle Initial) Citizens to Elect Allison Russo						Date of Disbursement
	Mailing Address 545 E Town Street		07 26 2022				
	City Columbus	State OH	Zip Code 43215				FEC Identification Number
	Purpose of Disbursement Contribution		10210	0	11	٦	
	Candidate Name				gory	1	Transaction ID: 47806020 Amount of Each Disbursement this Period
	Russo, C. Allison, , OH Rep., Office Sought: House Disburse	ement For:		Ту	ype		1000.00
	Senate President	Primary Other (spe	General cify) ▼				Contribution Memo Item
	State: District:						
В.	Full Name (Last, First, Middle Initial) Friends of Matt Dolan						Date of Disbursement
	Mailing Address 2226 Edgeview Drive		07 26 2022				
	City Hudson	State OH	Zip Code 44236				FEC Identification Number
	Purpose of Disbursement Contribution 011						
	Candidate Name			gory	/	Transaction ID : 47806021 Amount of Each Disbursement this Period	
	Dolan, Matt, , OH Sen., Office Sought: House Disburse	ement For:		Туре			2000.00
	Senate	Primary	General				Contribution
	State: District:	Other (spe	cify)				Memo Item
	Full Name (Last, First, Middle Initial) Mishler for State Senate						Date of Disbursement
	Mailing Address P.O. Box 202					07 / D D / Y Y Y Y Y 26 2022	
	City	State	Zip Code				FEC Identification Number
	Bremen Purpose of Disbursement	IN	46506			_	\mathbf{C}
	Contribution						C Transaction ID : 47806022
	Candidate Name Category/ Type						Amount of Each Disbursement this Period
	Mishler, Ryan, , IN Sen., Office Sought: House Disbursement For:						1000.00
	Senate	General				Contribution	
	State: District:	Other (spe	cify) 🔻				Memo Item
Г						I	
S	UBTOTAL of Disbursements This Page (optional).						4000.00
т	OTAL This Period (last page this line number only	/)					, ,

SCHEDULE B (FEC Form 3X)	[FOR LINE	NUMBER: PAGE 230 OF 237	
ITEMIZED DISBURSEMENTS	for each Detailed	arate schedule(s) category of the Summary Page	(check only 21b 28a	22 23 26 27 28b 28c x 29 30b	
Any information copied from such Reports and Stat or for commercial purposes, other than using the n					
NAME OF COMMITTEE (In Full)				`	
UnitedHealth Group Incorporated		nitedHealth (JOUD PAC)	
Full Name (Last, First, Middle Initial) A. The Mayfield Campaign				Date of Disbursement	
Mailing Address 50 S. Madison St.				07 26 2022	
City Mooresville	State IN	Zip Code 46158		FEC Identification Number	
Purpose of Disbursement Contribution		40136	011	C	
Candidate Name			Category/	Transaction ID : 47806024 Amount of Each Disbursement this Period	
Mayfield, Peggy, , IN Rep.,			Туре		
Office Sought: House Disburs Senate President	ement For: Primary Other (spe	General ecify) ▼		Contribution Memo Item	
State: District:				Mento item	
Full Name (Last, First, Middle Initial) B. McMaster for Governor Mailing Address P.O. Box 11063	McMaster for Governor				
City Columbia	State SC	Zip Code 29211		FEC Identification Number	
Purpose of Disbursement Contribution			011	C Transaction ID : 47806025	
Candidate Name			Category/	Amount of Each Disbursement this Period	
McMaster, Henry, , SC Gov., Office Sought: House Disburs	ement For:		Туре	3500.00	
Senate	Primary	General		Contribution	
State: District:	Other (spe	ecify)		Memo Item	
Full Name (Last, First, Middle Initial) C. Arizonans for Matt Gress				Date of Disbursement	
Mailing Address 1677 E. Maryland Avenue				M M / D D / Y Y Y Y 07 27 2022	
City Phoenix	State AZ	Zip Code 85016		FEC Identification Number	
Purpose of Disbursement Contribution			011	C Transaction ID : 47807865	
Candidate Name Gress, Matt, , AZ Rep.,					
Office Sought: House Disburs	ement For:		500.00		
State: District:	Primary Other (spe	ecify) ▼		Contribution Memo Item	
SUBTOTAL of Disbursements This Page (optional)		····· •	4750.00	
TOTAL This Period (last page this line number on	ly)		····· ►	, ,	

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SCHEDULE B (FEC Form		opporate astantat	, FOR LINE				
ITEMIZED DISBURSEMENT	5 for e	e separate schedule(seach category of the ailed Summary Page		7 one) 22 23 26 27 28b 28c x 29 30b			
				on for the purpose of soliciting contributions oslicit contributions from such committee.			
NAME OF COMMITTEE (In Full)	oorated PAC	(UnitedHealth	Group PAC	·)			
Full Name (Last, First, Middle Initial) A. Vote Pingerelli				Date of Disbursement			
Mailing Address 9033 W. Ludlow Drive	Mailing Address 9033 W. Ludlow Drive						
City Peoria	State AZ	Zip Code 85381		FEC Identification Number			
Purpose of Disbursement Contribution			011	C Transaction ID : 47807866			
Candidate Name Pingerelli, Beverly, , AZ Re	•		Category/ Type	Amount of Each Disbursement this Period 500.00			
Office Sought: House Senate President State: District:	Disbursement F			Contribution Memo Item			
Full Name (Last, First, Middle Initial) B. Bowers for Arizona				Date of Disbursement			
Mailing Address 8831 E. Quill Street	Mailing Address 8831 E. Quill Street						
City Mesa Purpose of Disbursement	State AZ	Zip Code 85207		FEC Identification Number			
Contribution Candidate Name Bowers, Rusty, , AZ Sen.,		011 Category/ Type	Transaction ID : 47807867 Amount of Each Disbursement this Period				
Office Sought: House Senate President State: District:	Disbursement Formation Primari			1000.00 Contribution Memo Item			
Full Name (Last, First, Middle Initial) C. Chavez for AZ Senate	-			Date of Disbursement			
Mailing Address PO Box 23317			07 / D D / Y Y Y Y 27 2022				
City Phoenix Purpose of Disbursement Contribution	State AZ	Zip Code 85063	011	FEC Identification Number			
Candidate Name Chavez, Cesar, , AZ Rep. Office Sought: House	, Disbursement F	Category/ Type	Transaction ID : 47807894 Amount of Each Disbursement this Period 1000.00				
State: District:	Primai			Contribution Memo Item			
SUBTOTAL of Disbursements This Page				2500.00			
TOTAL This Period (last page this line r							

	CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	FOR LINE (check only 21b	-
	y information copied from such Reports and State	ements may	not be sold or use		
or	for commercial purposes, other than using the na	me and add	ress of any politica	al committee to	solicit contributions from such committee.
$\left \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (Un	itedHealth G	Froup PAC)
<u>ب</u>	Full Name (Last, First, Middle Initial)				
A.	Conservatives for Toma				Date of Disbursement
	Mailing Address 6290 W Parkside Ln				07 27 2022
	City	State	Zip Code		FEC Identification Number
	Glendale	AZ	85310		
	Purpose of Disbursement Contribution			011	С
	Candidate Name				Transaction ID : 47807899
	Toma, Ben, , AZ Rep.,			Category/ Type	Amount of Each Disbursement this Period
	·	ement For:			1000.00
	Senate	Primary	General		Contribution
	State: District:	Other (spe	city) 🔻		Memo Item
	Full Name (Last, First, Middle Initial)				
В.	Contreras for House				Date of Disbursement
	Mailing Address 12204 W Mohave St	07 27 2022			
	City Avondale	State AZ	Zip Code 85323		FEC Identification Number
	Purpose of Disbursement Contribution	011	C Transaction ID : 47807902		
	Candidate Name Contreras, Lupe, , AZ Rep.,			Category/	Amount of Each Disbursement this Period
		ement For:		Туре	1000.00
	Senate	Primary	General		Contribution
_	State: District:	Other (spe			Memo Item
_	Full Name (Last, First, Middle Initial)				
C.	Espinoza for Arizona				Date of Disbursement
	Mailing Address 127 S 110th Ave			07 / 27 / Y Y Y Y 2022	
	City	State	Zip Code		FEC Identification Number
	Avondale	AZ	85323		
	Purpose of Disbursement Contribution	С			
	Candidate Name	Transaction ID : 47807906 Amount of Each Disbursement this Period			
	Espinoza, Jose Diego, , AZ Sen.,				
	Office Sought: House Disburse		1000.00		
	Senate President	Primary Other (spec	General		Contribution
	State: District:	Other (spe	ciiy) 🔻		Memo Item
s	UBTOTAL of Disbursements This Page (optional).			••••••	3000.00
Т	OTAL This Period (last page this line number only	/)		••••••	, ,

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S	CHEDULE B (FEC Form 3X)			F	OR L		NUMBER: PAGE 233 OF 23		
IT	TEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the			only			
		Detailed	Summary Page			21b 28a	22 23 26 27 28b 28c x 29 30b		
	y information copied from such Reports and State for commercial purposes, other than using the na				any	perso	on for the purpose of soliciting contributions		
\backslash	NAME OF COMMITTEE (In Full)	// .		_	_				
	UnitedHealth Group Incorporated	PAC (Un	itedHealth G	Brou	ip P	PAC))		
Α.	Full Name (Last, First, Middle Initial) John Kavanagh for State Senator		Date of Disbursement						
	Mailing Address 16038 E. Seminole Ln						07 / 27 / Y Y Y Y 2022		
	City	State	Zip Code				FEC Identification Number		
	Fountain Hills Purpose of Disbursement	AZ	85268						
	Contribution			C	011		C		
	Candidate Name			Cate	egory	v/	Transaction ID: 47807907 Amount of Each Disbursement this Period		
	Kavanagh, John, , AZ Rep.,				ype	, 	500.00		
	Office Sought: House Disburse Senate	ment For: Primary	General				500.00		
	President	Other (spec					Contribution Memo Item		
	State: District:								
В.	Full Name (Last, First, Middle Initial) Lela Alston AZ Senate 2022						Date of Disbursement		
	Mailing Address 69 W Willetta St Apt 1		07 27 2022						
	City Phoenix	State AZ	Zip Code 85003				FEC Identification Number		
	Purpose of Disbursement Contribution Candidate Name		011			C Transaction ID : 47807909			
	Alston, Lela, , AZ Sen.,			Category/ Type			Amount of Each Disbursement this Period		
		ment For:			760		1000.00		
	Senate	Primary	General				Contribution		
	State: District:	Other (spec	cify)				Memo Item		
_	Full Name (Last, First, Middle Initial)						Data of Diskurssment		
С.	Morgan for Arizona						Date of Disbursement		
	Mailing Address 7 N. Longfellow Ave					07 27 2022			
	City	State	Zip Code				FEC Identification Number		
	Tucson Purpose of Disbursement	AZ	85711				0		
	Contribution 011								
	Candidate Name	v/	Transaction ID: 47807910 Amount of Each Disbursement this Period						
	Abraham, Morgan, , AZ Sen.,	Category/ Type							
	ĭ ⊢ –						500.00		
	President	Primary Other (spec	General				Contribution		
	State: District:		Siry) ▼				Memo Item		
							2000.00		
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т	OTAL This Period (last page this line number only	/)							

SCH	IEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 234 OF 237	
ITEI	MIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a		
	nformation copied from such Reports and State r commercial purposes, other than using the na					
	AME OF COMMITTEE (In Full) InitedHealth Group Incorporated	PAC (Un	itedHealth G	Group PAC	2)	
A. (ailing Address 13523 W Monte Vista Cir				Date of Disbursement	
Ci		State	Zip Code		FEC Identification Number	
Pu	oodyear urpose of Disbursement Contribution	AZ	85395	011	С	
С	andidate Name Osborne, Joanne, , AZ Sen., ffice Sought: House Disburse	ement For:		Category/ Type	Transaction ID : 47807911 Amount of Each Disbursement this Period 1000.00	
	ate: District:	Primary Other (spec	General cify) ▼		Contribution Memo Item	
_	II Name (Last, First, Middle Initial) Pace for AZ Senate				Date of Disbursement	
	ailing Address 7227 E Baseline Road Suite 129	07 27 2022				
Ρι	ty esa urpose of Disbursement Contribution	State AZ	Zip Code 85209	014	FEC Identification Number	
Ca F	andidate Name Pace, Tyler, , AZ Sen.,	ame rIer, , AZ Sen.,		011 Category/ Type	Transaction ID : 47807912 Amount of Each Disbursement this Period	
	Senate President	ement For: Primary Other (spec	General cify)		Contribution Memo Item	
Fu	ate: District: Ill Name (Last, First, Middle Initial) Sierra for Arizona				Date of Disbursement	
M	ailing Address PO Box 1002				07 27 2022	
-	ty ashion urpose of Disbursement	State AZ	Zip Code 85329		FEC Identification Number	
Ca	Contribution andidate Name Sierra, Lorenzo, , AZ Rep.,	011 Category/ Type	C Transaction ID : 47807913 Amount of Each Disbursement this Period			
Ō	· · · · · · · · · · · · · · · · · · ·	ement For: Primary Other (spec	General cify) ▼	Туре	Loop Line Line Line Line Line Line Line Line	
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тот	AL This Period (last page this line number only	/)		····· •	, ,	

SCHEDUL	E B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 235 OF 237	
ITEMIZED	DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a		
					on for the purpose of soliciting contributions solicit contributions from such committee.	
	COMMITTEE (In Full)	PAC (Ur	nitedHealth G	Group PAC)	
A. Tim Dur	Last, First, Middle Initial) on for AZ House ress 6324 E. Telegraph Street				Date of Disbursement 07 27 2022	
City Yuma		State AZ	Zip Code 85365		FEC Identification Number	
Contribution				011	C Transaction ID : 47807914	
Candidate N Dunn, T Office Sougl	im, , AZ Rep.,	ement For:		Category/ Type	Amount of Each Disbursement this Period 500.00	
State:	Senate President District:	Primary Other (spe	General cify) ▼		Contribution Memo Item	
	Last, First, Middle Initial)				Date of Disbursement	
	ress 12995 N Oracle Rd. Ste. 141 MS 113		07 27 2022			
City Tucson Purpose of Contribution	Disbursement n	State AZ	Zip Code 85739	011	FEC Identification Number	
Candidate N Leach, V Office Sough State:	/ince, , AZ Sen.,	ement For: Primary Other (spe	General cify)	Category/ Type	Transaction ID : 47807915 Amount of Each Disbursement this Period 500.00 Contribution Memo Item	
`	Last, First, Middle Initial) ingston For House LD28				Date of Disbursement	
Mailing Addr	ress 9559 W. Menadota Drive				07 27 2022	
City Peoria Purpose of Contribution	Disbursement n	State AZ	Zip Code 85382	011	FEC Identification Number	
Candidate N Livingst Office Sougl	on, David, , AZ Rep.,	ement For:	Category/ Type	Transaction ID : 47808098 Amount of Each Disbursement this Period 2000.00		
State:	Senate President District:	Primary Other (spe	General Gerify)		Contribution Memo Item	
SUBTOTAL of	f Disbursements This Page (optional))			3000.00	
TOTAL This F	Period (last page this line number on	ly)		••••••	, ,	

	EDULE B (FEC Form 3X)		arate schedule(s)		E NUMBER: PAGE 236 OF 237
ITEN	IIZED DISBURSEMENTS	for each	category of the Summary Page	(check or 211 284	22 23 26 27
	formation copied from such Reports and State commercial purposes, other than using the na				
	ME OF COMMITTEE (In Full) nitedHealth Group Incorporated	PAC (Un	itedHealth C	Group PA	C)
A . ∨	I Name (Last, First, Middle Initial) ote Wilmeth iling Address PO Box 73163				Date of Disbursement
City		State	Zip Code		FEC Identification Number
Pu	oenix rpose of Disbursement ontribution	AZ	85050	011	Transaction ID : 47808099
W	ndidate Name ilmeth, Justin, , AZ Rep., ice Sought: House Disburse	ment For:		Category/ Type	Amount of Each Disbursement this Period
Sta	te: District:	Primary Other (spec	General cify) ▼		Contribution Memo Item
	I Name (Last, First, Middle Initial) avid Cook				Date of Disbursement
Ма	iling Address PO Box 871	07 29 2022			
Pu	y obe rpose of Disbursement ontribution	State AZ	Zip Code 85502	011	FEC Identification Number
Ca C	ndidate Name ook, David, , AZ Rep.,			011 Category/ Type	Transaction ID : 47811184 Amount of Each Disbursement this Period
Sta	Senate President	ment For: Primary Other (spec	General Gify)		Contribution Memo Item
Ful	I Name (Last, First, Middle Initial)				Date of Disbursement
Ма	iling Address 4679 WINTERSET DRIVE				07 29 2022
	y lumbus rpose of Disbursement	State OH	Zip Code 43220		FEC Identification Number
Co Ca	ndidate Name raizer, Mark, , OH Rep.,	011 Category/ Type	Transaction ID : 47811186 Amount of Each Disbursement this Period		
	ice Sought: House Disburse Senate President	ment For: Primary Other (spec	General cify) ▼		Contribution Memo Item
SUB	TOTAL of Disbursements This Page (optional).				2750.00
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SCHEDULE B (FEC Form 3X)					NUMBER: PAGE 237 OF 237	
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(ch	eck only 21b 28a	22 23 26 27 28b 28c x 29 30b	
Any information copied from such Reports and State or for commercial purposes, other than using the nat						
NAME OF COMMITTEE (In Full)	PAC (Un	itedHealth G	rour		;)	
Full Name (Last, First, Middle Initial)					/	
A. Committee to Elect Terri Austin					Date of Disbursement	
Mailing Address 1030 W Riverview Drive					07 29 2022	
City Anderson	State IN	Zip Code 46011			FEC Identification Number	
Purpose of Disbursement Contribution			01	1	C Transaction ID : 47811188	
Candidate Name Austin, Terri, , IN Rep.,			Cate Ty		Amount of Each Disbursement this Period	
· · · · · · · · · · · · · · · · · · ·	ment For: Primary Other (spec	General	י y		750.00 Contribution	
State: District:] - (<i>.,</i> .			Memo Item	
Full Name (Last, First, Middle Initial) B.					Date of Disbursement	
Mailing Address	Mailing Address					
City	State	Zip Code			FEC Identification Number	
Purpose of Disbursement					С	
Candidate Name			Cateo Ty		Amount of Each Disbursement this Period	
Office Sought: House Disburse Senate President	ment For: Primary Other (spec	General				
State: District:					Memo Item	
Full Name (Last, First, Middle Initial)					Date of Disbursement	
Mailing Address						
City	City State Zip Code					
Purpose of Disbursement	С					
Candidate Name	Amount of Each Disbursement this Period					
Senate President	ment For: Primary Other (spec	General cify) ▼			Memo Item	
State: District:						
SUBTOTAL of Disbursements This Page (optional).				···· >	750.00	
TOTAL This Period (last page this line number only	r)			🕨	35250.00	