Image# 201808179119673242					PAGE 1 / 295
	EPORT OF F ND DISBURS Other Than An Author	SEMENT	S	Office U	se Only
1. NAME OF TYP COMMITTEE (in full)	PE OR PRINT ▼	Example: If typir over the lines.	ng, type	2FE4M5	
UnitedHealth Group Incor	porated PAC (Unite	edHealth Grou	p PAC)		
ADDRESS (number and street)	01 Pennsylvania Ave, NW				
Check if different	Suite 200			C 2000	4
2. FEC IDENTIFICATION NUMB		A	STA	TE 🔺	ZIP CODE
C C00274431	3. IS RE		NEW N) OR	AMENDED (A)	
 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) 	Report Due On: Mar 2	0 (M3)	Jun 20 (M6) Jul 20 (M7) ') 12C)	 Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) General (12G) Special (12S) 	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12 (Non-Election Year Only) Jan 31 (YE) Runoff (12R)
January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report	(d) 30-Day POST-Election Report for the:		à)	Runoff (30R)	State of Special (30S)
(TER)	Election	on/		Y Y Y	in the State of
5. Covering Period	01 / Y Y Y Y 01 2018	through	07_ /	D D / Y Y 31 20	Y Y 18
I certify that I have examined this R Type or Print Name of Treasurer Signature of Treasurer	Sherwood, Susan, , ,	ny knowledge and l			- D / Y - Y - Y - Y - Y
NOTE: Submission of false, erroneous Office Use Only	, or incomplete information	may subject the pers	son signing this R	FEC	ies of 52 U.S.C. § 3010 C FORM 3X Rev. 05/2016

08/17/2018 11 : 32

X

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name

FEC Form 3X (Rev. 05/2016)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

R	eport Covering the Period: From: 07	M / D D / Y Y Y Y 01 2018 To	07 / D D / Y Y Y Y 2018
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2018		621080.35
	(b) Cash on Hand at Beginning of Reporting Period	807081.44	
	(c) Total Receipts (from Line 19)	154117.65	1109678.72
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	961199.09	1730759.07
7.	Total Disbursements (from Line 31)	68500.00	838059.98
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	892699.09	892699.09
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)

R	eport Covering the Period: From: 07	/ D D / Y Y Y Y 01 2018 To	: 07 / D D / Y Y Y Y 2018
	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)	150038.43	970500.08
	(ii) Unitemized	4079.22	133547.81
	(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	154117.65	1104047.89
	(b) Political Party Committees(c) Other Political Committees	0.00	0.00
	(such as PACs)	0.00	2080.83
	(d) Total Contributions (add Lines		
	11(a)(iii), (b), and (c)) (Carry		
	Totals to Line 33, page 5)▶	154117.65	1106128.72
12.	Transfers From Affiliated/Other		
	Party Committees	0.00	0.00
10	All Loans Received	0.00	0.00
13.			
14	Lean Densympate Dessived	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures		
15.	(Refunds, Rebates, etc.)		
	(Carry Totals to Line 37, page 5)	0.00	0.00
16.	Refunds of Contributions Made	4 4 4	47. 47. 48.
	to Federal Candidates and Other		
	Political Committees	0.00	2500.00
17.	Other Federal Receipts		
	(Dividends, Interest, etc.)	0.00	1050.00
18.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account		
	(from Schedule H3)	0.00	0.00
		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))▶	154117.65	1109678.72
	T		
20.	Total Federal Receipts	154117.65	1100670 72
	(subtract Line 18(c) from Line 19)▶	104117.00	1109678.72

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016) Page 4 COLUMN A COLUMN B **II. Disbursements Total This Period Calendar Year-to-Date** 21. Operating Expenditures: Allocated Federal/Non-Federal (a) Activity (from Schedule H4) 0.00 0.00 Federal Share (i) 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 0.00 0.00 Expenditures (c) Total Operating Expenditures 0.00 (add 21(a)(i), (a)(ii), and (b)) 0.00 22. Transfers to Affiliated/Other Party Committees..... 0.00 0.00 23 Contributions to Federal Candidates/Committees 529000.00 and Other Political Committees... 12500.00 24. Independent Expenditures (use Schedule E).... Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).... 0.00 0.00 25. 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 Loans Made.... Refunds of Contributions To: (a) Individuals/Persons Other 0.00 27. 28. 0.00 Than Political Committees 549.98 0.00 (b) Political Party Committees 0.00 0.00 Other Political Committees (C) (such as PACs)..... 0.00 0.00 Total Contribution Refunds (d) (add Lines 28(a), (b), and (c))...... 0.00 549.98 29. Other Disbursements (Including Non-Federal Donations)..... 308510.00 56000.00 30. Federal Election Activity (52 U.S.C. § 30101(20)) (a) Allocated Federal Election Activity (from Schedule H6) (i) Federal Share 0.00 0.00 (ii) "Levin" Share..... 0.00 0.00 (b) Federal Election Activity Paid Entirely With Federal Funds 0.00 0.00 Total Federal Election Activity (add (C) Lines 30(a)(i), 30(a)(ii) and 30(b)) 0.00 0.00 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 68500.00 838059.98 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... 68500.00 838059.98

DETAILED SUMMARY PAGE

of Disbursements

COLUMN A

Total This Period

FFC	Form	3X	(Rev	05/2016)
I LO	1 01111	JA	(1100.	03/2010	,

III. Net Contributions/ Operating Expenditures

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

(subtract Line 37 from Line 36)

	-			-7	154117.65
	- J -			-	0.00
					454447.05
 4	7			-	154117.65
					0.00
	7			-7	0.00
		1			0.00
	7			-7	0.00
1					0.00
-	-7-		-	-7	0.00

	-7-		-,-	1106128.72
	-7		-	549.98
				4405570 74
	 -	 	-	1105578.74
				0.00
1.4	 7	 	-7	0.00
			1	
	 7		7	0.00
1.1			-	0.00

COLUMN B

Calendar Year-to-Date

Page 5

SCHEDULE A (FEC Form 3X) DEAEIDTA

FOR LINE NUMBER:

PAGE 6 OF

		Use separate schedule(s)	(ch	(check only one)							
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page		X 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	contribut	tions	
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	J PAC (L	JnitedHealth Group PA	AC)							
A.	Full Name of Individual (Last, First, Middle Initia SCHICK, WILLIAM, , ,	al) or Full Or	rganization Name		Date of	Re	ceipt				
	Mailing Address 1220 DENBIGH LN				м м 07	/	D D D 03	/ Y	үүү 2018	Ŷ	
	City WAYNE	State PA	Zip Code 19087-4644					4243039 eceipt th	9 is Period		
	FEC ID number of contributing federal political committee.	С					-		5000.0	00	
	Name of Employer (for Individual) Spouse	Occu Spou	ipation (for Individual) use		Me	emo	ltem				
Boogint For:			Year-to-Date ▼ 5000.00]							
в.	Full Name of Individual (Last, First, Middle Initia Verstandig, Grant, , ,	al) or Full Or	rganization Name		Date of	Re	ceipt				
	Mailing Address 1881 N Nash St PH 8 City	State	Zip Code		07	1	D D D 16	J L	2018	Y	
	Arlington	VA	22209-1511					4245593 eceipt th	0 is Period		
	FEC ID number of contributing federal political committee.	С			5000.00					00	
	Name of Employer (for Individual) Rally Health	Occupation (for Individual) Founder and CEO			Me	emo	Item				
	Receipt For:	Aggregate	Year-to-Date 🔻								
	Other (specify) ▼		5000.00]							
с.	Full Name of Individual (Last, First, Middle Initia DOLAN, BRIAN, , ,	al) or Full Or	rganization Name		Date of	Re	ceipt				
	Mailing Address 6 Spruce Meadow Court				^M 07	/	D D D 16	/ Y	2018	Ŷ	
	City Wilton	State CT	Zip Code 06897-1700					4245593 eceipt th	is Period		
	FEC ID number of contributing federal political committee.	С			Ľ.	_	y		5000.0	00	
Name of Employer (for Individual) Rally Health		Occupation (for Individual) Chief Strategy Officer				emo	Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 5000.00]							
s	UBTOTAL of Receipts This Page (optional)		••••••	•			,	9	15000.0	00	
т	OTAL This Period (last page this line number or	וy)		•							

FOR LINE NUMBER:

PAGE 7 OF

		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
			e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle KNUTSON, DIANE, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 701 Pennsylvania Ave NW Suite 200	I		M M / D D / Y Y Y Y Y 07 27 2018						
City Washington	State DC	Zip Code 20004-3610	Transaction ID : 42533121 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		38.46						
Name of Employer (for Individual) UHC International Services Inc		upation (for Individual) Ntwk Pricing	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 538.44	1						
Full Name of Individual (Last, First, Middle B. STREB, DEBORAH, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 2201 NORTH STAR ROA			07 / 10 / Y Y Y Y Y 07 31 2018						
City UPPER ARLINGTON	State OH	Zip Code 43221-3810	Transaction ID : PR1159794151134						
FEC ID number of contributing federal political committee.	С	43221-3010	Amount of Each Receipt this Period						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Proj Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. GAUDIO, JOSEPH, , ,	Initial) or Full C	Prganization Name	Date of Receipt						
Mailing Address 4842 E MOUNTAIN VIEW	RD		07 31 Y Y Y Y Y 2018						
City PARADISE VALLEY	State AZ	Zip Code 85253-1539	Transaction ID : PR1159811851134 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)		451.06						
TOTAL This Period (last page this line numl	per only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

PAGE 8 OF

	EMIZED RECEIPTS		Detailed Summary Page	×	11a		11		11c	12	Г	
An	y information copied from such Reports and State	ements ma	av not be sold or used by any per	rson f	13 or the	purr	14 pos		15 soliciting	16 contri		17 ns
	for commercial purposes, other than using the na											
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	UnitedHealth Group PA	C)								
A.	Full Name of Individual (Last, First, Middle Initial) WICHMANN, DAVID, , ,	or Full O	Organization Name		Date of	Re	ecei	pt				
	Mailing Address 7000 ANTRIM ROAD				м м 07	/	_	31	/ Y	2018	Y Y 3	1
	City	State	Zip Code		Trans	acti	ion	ID : F	PR1159	814751	134	
	EDINA	MN	55439-1708	A	Amount	of	Ea	ch Re	eceipt th	is Peri	od	
	FEC ID number of contributing federal political committee.	С					-			38	34.60	
	Name of Employer (for Individual) United HealthCare Services Inc	Occ	upation (for Individual) O		Me	emo) Ite	em				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50		/R Ded	uctic	on ((\$192.	.30 Bi-V	/eekly)		
в.	Full Name of Individual (Last, First, Middle Initial) MEAD, BRUCE, , ,	or Full O	Organization Name		Date of	Re	ecei	pt				
	Mailing Address 1232 GRAY BRANCH RD			07 31 2018								
	City MCKINNEY	State TX	A	Transaction ID : PR1159816151134 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			0.00							
	Name of Employer (for Individual) Optum Services, Inc	Occ VP		Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/	R Dedu	uctic	on ((\$0.00	Bi-Wee	ekly)		
с.	Full Name of Individual (Last, First, Middle Initial) PENSHORN, JOHN, , ,	or Full O	Organization Name		Date of	Re	ecei	pt				
	Mailing Address 120 BLACK OAKS LANE				^M 07	/		31	/ Y	2018		
	City	State	Zip Code						PR1159			
	WAYZATA	MN	55391-1363	A	Amount	of	Ead	ch Re	ceipt th	is Peri	od	
	FEC ID number of contributing federal political committee.	С					y		- y	38	34.60	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ? UnitedHIth Group		Me	emo	o Ite	əm				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P	/R Ded	uctio	on ((\$192	.30 Bi-V	Veekly)	I	
s	UBTOTAL of Receipts This Page (optional)									76	<u>5</u> 9.20	
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Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12							
Any information copied from such Reports an or for commercial purposes, other than using			13 14 15 16 17 erson for the purpose of soliciting contributions a to solicit contributions from such committee							
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle A. KALLMEYER, PAUL, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 468 HERALD DR			07 31 Y Y Y Y Y 2018							
City AMBLER	State PA	Zip Code 19002-1530	Transaction ID : PR1159817451134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		261.90							
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 ▼ 1559.50	P/R Deduction (\$130.95 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. QUIRK, THOMAS, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 6458 ORCHID LANE			07 / D D / Y Y Y Y 2018							
City DALLAS	State TX	Zip Code 75230-4121	Transaction ID : PR1159819151134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		32.30							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Care Initiv	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.25	P/R Deduction (\$16.15 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. BARATZ, MEREDITH, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1850 SOLEDAD AVENUE			07 / D D / Y Y Y Y 2018							
City LA JOLLA	State CA	Zip Code 92037-3820	Transaction ID : PR1159820051134 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	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)			322.28							
TOTAL This Period (last page this line numb	per 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						
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 FALK, DAVID, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 323 LAWRENCE AVE			07 31 Y Y Y Y Y 07 31 2018						
City HIGHLAND PARK	State NJ	Zip Code 08904-1851	Transaction ID : PR1159820251134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		28.00						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) I Dir	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 MIGLIORI, RICHARD, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address PO BOX 72			07 / D D / Y Y Y Y Y 2018						
City	State MN	Zip Code	Transaction ID : PR1159827451134						
		55391-0072	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, UHG Chief Medical 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 C. RIVET, JEANNINE, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 4305 TRILLIUM WAY			07 / D D / Y Y Y Y 07 31 2018						
City MINNETRISTA	State MN	Zip Code 55364-7708	Transaction ID : PR1159830051134 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) 9 UnitedHlth Grp	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).			604.90						
TOTAL This Period (last page this line numb	er only)								

Use separate schedule(s)

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PAGE 11 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a11b11c12							
				13 14 15 16 17							
or 1	v information copied from such Reports and Sta for commercial purposes, other than using the										
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (Un	itedHealth Group PA	C)							
	Full Name of Individual (Last, First, Middle Initia MATTEO, MICHAEL, , ,	I Name of Individual (Last, First, Middle Initial) or Full Organization Name ATTEO, MICHAEL, , ,									
-	Mailing Address 25 JEREMIAHS WAY			Date of Receipt							
(City	State	Zip Code	Transaction ID : PR1551133451134							
-	SOUTH GLASTONBURY	CT	06073-3621	Amount of Each Receipt this Period							
	FEC ID number of contributing rederal political committee.	С		230.76							
	Name of Employer (for Individual) Optum Services, Inc		tion (for Individual) rowth Off	Memo Item							
Ì	Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 1730.70	P/R Deduction (\$115.38 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Initia CARR, ANTHONY, , ,	al) or Full Orga	nization Name	Date of Receipt							
-	Mailing Address 5400 THOROUGHBRED LN	07 / D D / Y Y Y Y 07 31 2018									
(City	State	Zip Code	Transaction ID : PR1554323451134							
-	SOUTHWEST RANCHES	FL	33330-2411	Amount of Each Receipt this Period							
	FEC ID number of contributing rederal political committee.	С		384.60							
	Name of Employer (for Individual) Jnited HealthCare Services Inc		tion (for Individual) PEOs Trusts	Memo Item							
ļ	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 MILLER, KATHERINE, , ,	al) or Full Orga	nization Name	Date of Receipt							
	Mailing Address 2321 HARBOR LAKE DRIVE		1	07 / D D / Y Y Y Y 07 31 2018							
(State FL	Zip Code	Transaction ID : PR1554324351134							
-	ORANGE PARK	' L	32003-7799	Amount of Each Receipt this Period							
	FEC ID number of contributing rederal political committee.	С		384.60							
	Name of Employer (for Individual) United HealthCare Services Inc		tion (for Individual) res Ntwk Mgmt	Memo Item							
I	Receipt For: Primary General Other (specify)	Aggregate Yea	ar-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)							
รเ	JBTOTAL of Receipts This Page (optional)			999.96							

FOR LINE NUMBER:

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ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)								
11			for each category of the Detailed Summary Page	X 11a	11b	11c	12	<u> </u>				
	y information copied from such Reports and Si											
or	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and a	address of any political committee	to solicit con	tributions fro	om such	commit	ee.				
	UnitedHealth Group Incorporate	d PAC (UnitedHealth Group PA	C)								
Α.	Full Name of Individual (Last, First, Middle Init ANDERSON, CRAIG, , ,	al) or Full C	Organization Name	Date of Receipt								
	Mailing Address 47 AMATO CIRCLE			07 31 Y Y Y Y 2018								
	City WETHERSFIELD	State CT	Zip Code 06109-3971		of Each Re							
	FEC ID number of contributing federal political committee.					-	384.	60				
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) gn Pres Ntwk Mgmt	Me	mo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2884.50	P/R Dedu	ction (\$192.	30 Bi-W	eekly)					
в.	Full Name of Individual (Last, First, Middle Init ERICKSON, KAREN, , ,	al) or Full C	Drganization Name	Date of	Receipt							
	Mailing Address 15348 RED OAKS ROAD SE			07 / D D / Y Y Y Y 2018								
	City PRIOR LAKE	State MN	Zip Code 55372-1834		ction ID : P							
	FEC ID number of contributing federal political committee.	tributing					Amount of Each Receipt this Period 384.60					
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) otum Exec	Me	mo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2884.50	P/R Dedu	P/R Deduction (\$192.30 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Init MONFILETTO, ERNEST, , ,	al) or Full C	Organization Name	Date of	Receipt							
	Mailing Address 3062 COMFORT ROAD			07	/ D D 31		y y 2018					
	City NEW HOPE	State PA	Zip Code 18938-5622		of Each Re							
	FEC ID number of contributing federal political committee.	С			,	g	153.	84				
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Ntwk Prgms	Me	mo Item							
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1153.80	P/R Dedu	iction (\$76.9	2 Bi-We	ekly)					
s	UBTOTAL of Receipts This Page (optional)					,	923.	04				
Т	OTAL This Period (last page this line number of	only)										

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PAGE 13 OF

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ITEMIZED RECEIPTS			for each category of the Detailed Summary Page			11a		11b	11c	12			
Ar	y information copied from such Reports and Stat	tements ma			rson fo	13 or the	purp	14 Dose of	15 soliciting	16 g contribu	17 Itions		
	for commercial purposes, other than using the n												
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	JnitedHealth	Group PA	C)								
A.	Full Name of Individual (Last, First, Middle Initial VALENTA, LEE, , ,	l) or Full Oi	rganization Name		D	ate of	Re	ceipt					
	Mailing Address 5033 PARK TERRACE				07 31 2018								
	City EDINA	State MN	Zip Code 55436-1098		Transaction ID : PR1575958551134 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.								.		384.	60		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individu 9 Gen Mgmt	al)		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V	P/F	R Dedi	uctio	on (\$19	2.30 Bi-V	Veekly)				
в.	Full Name of Individual (Last, First, Middle Initial KELLY, JOHN, , ,	l) or Full Oi	rganization Name		D	ate of	Re	ceipt					
	Mailing Address 341 PLEASANT AVENUE	1		07 31 2018									
	City SAINT PAUL	StateZip CodeMN55102-2333					Transaction ID : PR1575959751134 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) SVP Tax				384.60							
	Name of Employer (for Individual) United HealthCare Services Inc					Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$192.30 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initial CAHILL, LAURA, , ,	l) or Full Oi	rganization Name		D	ate of	Re	ceipt					
	Mailing Address 119 SILVER BEECH ROAD				44	07 ^M	1	31		2018			
	City SOUTHBURY	State CT	Zip Code 06488-2786					-		86365113 his Period	-		
	FEC ID number of contributing federal political committee.	С			28				28.	08			
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individu	,	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼	210.60	P/I	R Ded	uctio	on (\$14	.04 Bi-W	eekly)			
s	UBTOTAL of Receipts This Page (optional)			•••••				,	. ,	797.	28		
т	OTAL This Period (last page this line number on	ly)		•••••				,					

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 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	orated PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Midd MEBB, ROBERT, , , Mailing Address 4516 DREXEL AVENUE									
City	State	Zip Code	07 31 2018 Transaction ID : PR1580865351134						
EDINA	MN	55424-1130	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼	SVF	upation (for Individual) P UnitedHIth Grp Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Midd B. HUGHES, RICHARD, , , Mailing Address 3905 COUNTY ROAD 44		rganization Name	Date of Receipt						
City MINNETRISTA	State MN	Zip Code 55364-9572	07 31 2018 Transaction ID : PR1596304151134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		452.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P COO of Human Capital	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2508.00	P/R Deduction (\$226.00 Bi-Weekly)						
Full Name of Individual (Last, First, Midd JOHNSON, THAD, , ,	lle Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 9741 GLACIER BAY			07 / D D / Y Y Y Y 2018						
City EDEN PRAIRIE	State MN	Zip Code 55347-2615	Transaction ID : PR1596304351134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Mkt	upation (for Individual) Group Gen Counsel	Memo Item						
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (option	al)	••••••	1221.20						
TOTAL This Period (last page this line nur	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	<i>,</i>			
Any information copied from such Reports and s or for commercial purposes, other than using th										
NAME OF COMMITTEE (In Full)					UIII SUCI	Commu				
UnitedHealth Group Incorporat	ed PAC (l	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle In SCHUMACHER, DANIEL, , ,	iitial) or Full O	rganization Name	Date of	f Receipt						
Mailing Address 5401 LARADA LANE			м м 07							
City EDINA	State MN	Zip Code 55436-1024		action ID : F			4			
FEC ID number of contributing federal political committee.	С					384.6	50			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Grp Pres & COO	M	emo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Ded	uction (\$192	.30 Bi-W	′eekly)				
Full Name of Individual (Last, First, Middle In B. THEISEN, SCOTT, , ,	iitial) or Full O	rganization Name	Date of	f Receipt						
Mailing Address 1950 MEADOWWOODS TRA			М М 07	/ D D 31	/ Y	y y 2018	Ŷ			
City LONG LAKE	State MN	Zip Code 55356-9312		Transaction ID : PR15963056 Amount of Each Receipt this F						
FEC ID number of contributing federal political committee.	С			384.60						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Bus Ops	M	emo 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 OBERRENDER, ROBERT, , ,	iitial) or Full O	rganization Name	Date of	f Receipt						
Mailing Address 4505 MOORLAND AVENUE			07	/ D D 31	/ Y	2018	Y			
City EDINA	State MN	Zip Code 55424-1158		action ID : I			4			
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) 9 Treas & Chief Invstmnt Off	M	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P/R Ded	luction (\$192	2.30 Bi-W	/eekly)				
SUBTOTAL of Receipts This Page (optional)		••••••		y		1153.8	80			
TOTAL This Period (last page this line number	only)									

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		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			13 14 15 16 17 erson for the purpose of soliciting 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 ANDERSON, KENNETH, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 12700 NE 245TH AVE			07 31 2018							
City BRUSH PRAIRIE	State WA	Zip Code 98606-7761	Transaction ID : PR1596309251134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		39.82							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Business Development Exe	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 298.65	P/R Deduction (\$19.91 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. ANDERSON, MICHAEL, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 17907 INVERNESS CURVI	E		07 31 / Y Y Y Y 07 31 2018							
	State MN	Zip Code	Transaction ID : PR1596309351134							
EDEN PRAIRIE FEC ID number of contributing federal political committee.	C	55347-2155	Amount of Each Receipt this Period							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual)	Memo Item							
Receipt For:	1	Clin Pharm Year-to-Date ▼	-							
Primary General Other (specify) ▼		307.84	P/R Deduction (\$62.92 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. FLYNN, DIANE, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 3318 FOXRIDGE CIRCLE			07 / D D / Y Y Y Y Y 07 31 2018							
City TAMPA	State FL	Zip Code 33618-2149	Transaction ID : PR1596309751134 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) n Exec Dir	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 585.00	P/R Deduction (\$39.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			243.66							
TOTAL This Period (last page this line number	er only)									

SCHEDULE A (FEC Form 3X) _____ _

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TEMIZED 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			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 the any pointed commute								
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle DAVIDSON, TRACY, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 6058 HARBOUR TOWN C	IR		07 31 2018							
City WESTERVILLE	State OH	Zip Code 43082-8144	Transaction ID : PR1596311651134 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 DUNLOP, RICHARD , , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 2964 WYSE COURT	01-1	Zin Onde	07 / 07 / 07 / 07 / 07 / 07 / 07 / 07 /							
City LEWIS CENTER	State OH	Zip Code 43035-8253	Transaction ID : PR1596312351134							
FEC ID number of contributing			Amount of Each Receipt this Period							
federal political committee.	C		200.00							
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) ▼		1500.00	P/R Deduction (\$100.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle GARCIA, STEVAN, , ,	,	rganization Name	Date of Receipt							
Mailing Address 1375 GRAYHAWK PLACE			07 / D D / Y Y Y Y 2018							
City LARKSPUR	State CO	Zip Code 80118-8623	Transaction ID : PR1596312951134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		0.00							
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 ▼ 4999.90	P/R Deduction (\$0.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			584.60							
TOTAL This Period (last page this line numb	er only)									

SCHEDULE A (FEC Form 3X) DEAEIDTA

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c						
Any information copied from such Reports an or for commercial purposes, other than using									
		uness of any pointed contrintitle							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	C)						
Full Name of Individual (Last, First, Middle HEUMANN, KURT, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 9825 GERALD DR			07 31 2018						
City SAINT LOUIS	State MO	Zip Code 63128-1767	Transaction ID : PR1596 Amount of Each Receipt t						
FEC ID number of contributing federal political committee.	С			76.92					
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 ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle MALLATT, KATHLEEN, , ,	Date of Receipt								
Mailing Address 4304 SOUTH 167 AVENU			07 31 /	2018					
City OMAHA	State NE	Zip Code 68135-1353	Transaction ID : PR1596 Amount of Each Receipt t						
FEC ID number of contributing federal political committee.	384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	1						
Primary General Other (specify) ▼		2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle ROSENTHAL, DANIEL, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 8 VIA HERMOSA			07 / D D / Y Y Y Y 07 31 2018						
City ORINDA	State CA	Zip Code 94563-1828	Transaction ID : PR159 Amount of Each Receipt t						
FEC ID number of contributing federal political committee.	С		, ,	384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-	Weekly)					
SUBTOTAL of Receipts This Page (optional)				846.12					
TOTAL This Period (last page this line numb	er only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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ITEIWIZED RECEIPTS				r each category of the etailed Summary Page	×	11a		11	b	110	; [12		
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	y information copied from such Reports and State for commercial purposes, other than using the na													
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Unit	edHealth Group PA	C)									
Α.	Full Name of Individual (Last, First, Middle Initial) RUTH, KEVIN, , ,	or Full O	Organi	zation Name		Date of Receipt								
	Mailing Address 16621 ALEXANDER MANOR DR	IVE				07 31 2018								
	City	State	2	Zip Code		Transaction ID : PR1596317451134								
	SILVER SPRING	MD		20905-5028	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		•	on (for Individual) Advancement		Memo Item								
	Receipt For:	Aggregate	Year-	to-Date ▼										
	Primary General Other (specify) ▼		-7-	2884.50	P	/R Ded	uctic	on	(\$192	.30 B	i-We	ekly)		
	Full Name of Individual (Last, First, Middle Initial) STURKEY, DAVID, , ,	zation Name		Date of	Re	cei	ipt							
	Mailing Address 1941 MARINA ROAD					07 31 / Y Y Y Y 2018								
	City	State		Zip Code		Transaction ID : PR1596318451134 Amount of Each Receipt this Period								
	IRMO	SC		29063-8579	_	Amount	of	Ea	ch Re	eceipt	this	Perio	d	
	FEC ID number of contributing federal political committee.	ů l						78.00						
	Name of Employer (for Individual) United HealthCare Services Inc		•	on (for Individual) cct Mgmt		M	emo) Ite	em					
	Receipt For: A Primary General Other (specify) ▼	Aggregate Year-to-Date ▼					P/R Deduction (\$39.00 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initial) TODD, JEFFREY, , ,	or Full O	Organi	zation Name		Date of	Re	cei	ipt					
	Mailing Address 467 PRAIRIE WAY SOUTH					м м 07	/	Ľ	D D D 31	1		2018 [°]	Y	
	City	State		Zip Code		Trans	acti	ion	1D : I	PR15	9631	190511	34	
	BAYPORT	MN		55003-1607	_ '	Amount	of	Ea	ch Re	eceipt	this	Perio	d	
	FEC ID number of contributing federal political committee.	С						,		,		50	0.00	
	Name of Employer (for Individual)		•	on (for Individual)		М	emo	o Ite	em					
	United HealthCare Services Inc Receipt For:			writing	_									
	Primary General Other (specify)	Aggregate	Year-	to-Date ▼ 375.00	P	/R Ded	uctio	on	(\$25.0	00 Bi-	Wee	kly)		
s	UBTOTAL of Receipts This Page (optional)							,				512	2.60	
T	OTAL This Period (last page this line number only	/)		•••••				,		,			-	

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116			for each category of the Detailed Summary Page	X 11a 11b 11c 12							
	/ information copied from such Reports and State for commercial purposes, other than using the nat										
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	C)							
Α.	Full Name of Individual (Last, First, Middle Initial) WASSERSTEIN, M LAURIE, , ,	or Full O	Date of Receipt								
	Mailing Address 92 GOODWIN CIRCLE	07 / D D / Y Y Y Y 2018									
	City HARTFORD	State CT	Zip Code 06105-5205	Transaction ID : PR1596319551134							
		С		Amount of Each Receipt this Period							
	Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Dir 1	upation (for Individual) Ntwk Prgms Year-to-Date ▼	Memo Item							
	Primary General Other (specify) ▼	99109410	269.22	P/R Deduction (\$19.23 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Initial) DODDY, JOHN, , ,	or Full O	rganization Name	Date of Receipt							
	Mailing Address 50 WALSINGHAM ROAD	07 / D D / Y Y Y Y 07 31 2018									
	City MENDHAM	State NJ	Zip Code 07945-1827	Transaction ID : PR1600597351134 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) Info Tech	Memo Item							
	Receipt For: A Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 585.00	P/R Deduction (\$39.00 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Initial) MICHAUX, MICHAEL, , ,	or Full O	rganization Name	Date of Receipt							
	Mailing Address 742 GOODRICH AVE			07 31 2018							
	City SAINT PAUL	State MN	Zip Code 55105-3343	Transaction ID : PR1600598551134 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		200.00							
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) GM PCM	Memo Item							
	Receipt For: A Primary General Other (specify)	ggregate	Year-to-Date ▼ 1500.00	P/R Deduction (\$100.00 Bi-Weekly)							
SI	JBTOTAL of Receipts This Page (optional)			297.23							
	OTAL This Period (last page this line number only										

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	X 11a 11b 11c							
Any information copied from such Reports and or for commercial purposes, other than using th										
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorporat	ed PAC (I	JnitedHealth Group PA	C)							
Full Name of Individual (Last, First, Middle Ir A. SANDY, LEWIS, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 4800 SUNNYSLOPE ROAD	E		07 31 2018							
City EDINA	State MN	Zip Code 55424-1163	Transaction ID : PR1600							
FEC ID number of contributing federal political committee.	С			384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Clin Advancement	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-W	/eekly)						
Full Name of Individual (Last, First, Middle Ir B. PETERSON, MATTHEW, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 2260 FOX STREET			07 / D D / Y	2018						
City ORONO	State MN	Zip Code 55356-8316	Transaction ID : PR16026 Amount of Each Receipt th							
FEC ID number of contributing federal political committee.	С			384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) D Ancillary & Ind/Sgt CAO	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 c. MALONEY, JEFFREY, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 6327 PASADENA POINT BL			07 31	2018						
City GULFPORT	State FL	Zip Code 33707-3867	Transaction ID : PR16132 Amount of Each Receipt th							
FEC ID number of contributing federal political committee.	С			192.30						
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 ▼ 1442.25	P/R Deduction (\$96.15 Bi-We	ekly)						
SUBTOTAL of Receipts This Page (optional)			· · · · · · ·	961.50						
TOTAL This Period (last page this line number	only)									

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)						
II EIVIIZED KEGEIFIJ		for each category of the Detailed Summary Page	✗ 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 Incorport	rated PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middl CELLI, PAT, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1210 COUNTRY CLUB E	R		07 31 Y Y Y Y 2018						
City CUTCHOGUE	State NY	Zip Code 11935-1728	Transaction ID : PR1613243751134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middl B. KENNEDY, WILLIAM, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 14 MYRA LN			07 31 2018						
City	State	Zip Code	Transaction ID : PR1653443151134						
BURLINGTON	СТ	06013-1327	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) Software Engineering	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	P/R Deduction (\$20.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middl c. BELLAMY, THOMAS, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 2743 THOMAS AVENUE			07 / D D / Y Y Y Y 2018						
City MINNEAPOLIS	State MN	Zip Code 55416-4346	Transaction ID : PR1653444351134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) SIs 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 (optiona	l)		809.20						
TOTAL This Period (last page this line num	iber only)								

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					
Any information copied from such Reports and S or for commercial purposes, other than using the			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (UnitedHealth Group PA	.C)					
Full Name of Individual (Last, First, Middle Ini SEVIGNY, BRIAN, , ,	tial) or Full C	Organization Name	Date of Receipt					
Mailing Address 137 CREEKVIEW LANE			07 / D D / Y Y Y Y 2018					
City LORETTO	State MN	Zip Code 55357-2111	Transaction ID : PR1653445751134					
		55557-2111	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		28.08					
Name of Employer (for Individual)		upation (for Individual)	Memo Item					
Optum Services, Inc Receipt For:		ector Tech Support	_					
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)					
Full Name of Individual (Last, First, Middle Ini B. SULLIVAN, DANIEL, , ,	tial) or Full C	Organization Name	Date of Receipt					
Mailing Address 57 QUORN HUNT ROAD			07 31 2018					
City	State	Zip Code	Transaction ID : PR1653445851134					
WEST SIMSBURY	СТ	06092-2524	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		cupation (for Individual) Proj-Prgm 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 Ini C. EMERSON, PAUL, , ,	tial) or Full C	Organization Name	Date of Receipt					
Mailing Address 18855 MEADOW VIEW BLVE)		07 / D D / Y Y Y Y 07 31 2018					
City PRIOR LAKE	State MN	Zip Code 55372-3133	Transaction ID : PR1806750351134 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) Optum360 Services Inc	Occ CO	upation (for Individual) D	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)			489.60					
TOTAL This Period (last page this line number								

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 t	Statements mathematic here and a	l ay not be sold or used by any p Iddress of any political committe	13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle A. ULLOA, SHAUNA, , ,	Initial) or Full C	Prganization Name	Date of Receipt						
Mailing Address 9 STRATFORD ROAD			07 31 2018						
City FARMINGTON	State CT	Zip Code 06032-1444	Transaction ID : PR1832379151134 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)						
Full Name of Individual (Last, First, Middle B. ANDERSON, CATHERINE, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 57 SIMMONS LANE	1		07 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
City SEVERNA PARK	State MD	Zip Code 21146-1921	Transaction ID : PR1903550751134						
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 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 DUFEK, ROBERT, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 816 PROMONTORY PLAC			07 / 0 D / Y Y Y Y 07 31 2018						
City EAGAN	State MN	Zip Code 55123-2297	Transaction ID : PR1903577151134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		50.00						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Dir Info Security	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).			462.68						
TOTAL This Period (last page this line number	er only)								

SCHEDULE A (FEC Form 3X) _____ _

Use separate schedule(s)

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		Use separate schedule(s)	(check o	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11b	11c	12	1 -7		
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma	l ay not be sold or used by any p ddress of any political committee	erson for th	e pui	pose of	15 soliciting	contribut	ions		
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle In A. JOHNSON, CHRISTOPHER, , ,	itial) or Full C	rganization Name	Date	of Re	eceipt					
Mailing Address 12880 53RD STREET NORT	H			07 31 2018						
City STILLWATER	State MN	Zip Code 55082-1063					9115113 is Period	1		
FEC ID number of contributing federal political committee.	C					-	78.0	00		
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		Mem	o Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 585.00	P/R D	educt	ion (\$39.	00 Bi-We	ekly)			
Full Name of Individual (Last, First, Middle In PENN, STEVEN, , ,	itial) or Full C	rganization Name	Date	of Re	eceipt					
Mailing Address 6766 IDLEWOOD WAY			07		31	/ Y	2018	Y		
City EDEN PRAIRIE	State MN	Zip Code 55346-3506					12951134	l		
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period							
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) IT		Mem	o 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 In C. SANTELLI, JOHN, , ,	itial) or Full C	rganization Name	Date	of Re	eceipt					
Mailing Address 25510 BIRCH BLUFF ROAD	1		07		31	/ Y	ү ү 2018	Ŷ		
City EXCELSIOR	State MN	Zip Code 55331-8520					52205113 is Period	4		
FEC ID number of contributing federal political committee.	С				y	9	384.6	60		
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) PCIO		Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P/R D	educt	ion (\$192	2.30 Bi-W	/eekly)			
SUBTOTAL of Receipts This Page (optional)					, .	9	490.6	0		
TOTAL This Period (last page this line number	only)					-				

SCHEDULE A (FEC Form 3X) DEAEIDTA

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	INILED REVEIPIS			ach category of the ed Summary Page		4 11a 13		11b 14	11c		12 16	17
	r information copied from such Reports and Stat or commercial purposes, other than using the na					for the		pose of	soliciting	g con	tributi	ons
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	Jnited	Health Group PA	C)							
	Full Name of Individual (Last, First, Middle Initial STEERUP, LORI, , ,) or Full Or	rganizati	on Name		Date of	f Re	eceipt				
I	Mailing Address 7019 DONLEA LANE					07 31 2018						
	City State EDEN PRAIRIE MN			Code 5346-3164					PR1903 Receipt th			
	FEC ID number of contributing rederal political committee.	С							-		28.0	0
l	Name of Employer (for Individual) Jnited HealthCare Services Inc		•	for Individual) apital Partner		М	emo	tem				
Receipt For: Aggregate Y Primary General Other (specify) ▼				Date ▼ 210.00	F	P/R Ded	ucti	on (\$14	.00 Bi-W	eekly))	
	Full Name of Individual (Last, First, Middle Initial WEYMOUTH, PAUL, , ,) or Full Or	rganizati	on Name		Date of	f Re	eceipt				
Mailing Address 317 WRIGHTS MILL RD						07 / D D / Y Y Y Y 07 31 2018						
	City	State CT		Code 238-1559	-				PR1903			
-	EC ID number of contributing ederal political committee.	Occupation (for Individual) VP IT			Amount of Each Receipt this Period						0	
	Name of Employer (for Individual) Dptum Services, Inc					M	emo	tem				
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-I	Date ▼ 2036.84	P/R Deduction (\$269.00 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Initial BRYAN, KATHIE, , ,) or Full Or	rganizati	on Name		Date of	f Re	eceipt				
I	Mailing Address 912 JOSHUA PLACE					^M 07	/	31		201	18	Y
	City SAN DIEGO	State CA	·	Code 154-2537				-	PR2119 Receipt th			•
FEC ID number of contributing federal political committee. Name of Employer (for Individual) United HealthCare Services Inc		С				<u> </u>		y .	. ,		50.0	0
			pation (Cnslt	for Individual)		М	emo	tem				
F	Receipt For: Primary General Other (specify)	Aggregate	Year-to-I	Date ▼ 375.00	F	P/R Ded	lucti	on (\$25	.00 Bi-W	eekly))	
รเ	JBTOTAL of Receipts This Page (optional)			•				, ,		(616.00	D
тс	TAL 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 15 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	AC)						
Full Name of Individual (Last, First, Middle CAMPBELL, COLLEEN, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 4936 LONGMEADOW PA	RK ST		07 31 2018						
City ORLANDO	State FL	Zip Code 32811-7485	Transaction ID : PR2119469951134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		30.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir 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 DEMBROSKI, TODD, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1390 FINCH LN			07 / D D / Y Y Y Y Y 2018						
City GREEN BAY	State WI	Zip Code 54313-6400	Transaction ID : PR2119472851134 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)						
Full Name of Individual (Last, First, Middle C. GILDERNICK, AMY, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 2709 WILLIAMS GRANT			07 31 / Y Y Y Y 2018						
City DE PERE	State WI	Zip Code 54115-9456	Transaction ID : PR2119475251134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		40.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Clms	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 300.00	P/R Deduction (\$20.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)		100.00						
TOTAL This Period (last page this line numl	per only)								

Use separate schedule(s)

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		Use separate schedule(s)	(check or	(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 th NAME OF COMMITTEE (In Full)	le name and a				utions i	rom sucr	Commu	ee.		
UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle I	nitial) or Full O	rganization Name	Date of	of Re	ceipt					
Mailing Address 33 VIA CONOCIDO			07	07 31 2018						
City SAN CLEMENTE	State CA	Zip Code 92673-7044					7675113 is Period	4		
FEC ID number of contributing federal political committee.	С						270.0	00		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In Pres Ntwk Mgmt		/lemc	tem					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2025.00	P/R De	ducti	on (\$135	5.00 Bi-W	/eekly)			
Full Name of Individual (Last, First, Middle I B. HARLAN, MADELINE, , ,	nitial) or Full O	rganization Name	Date of	of Re	ceipt					
Mailing Address 3444 CORTES PLACE			07	07 / D D / Y Y Y Y 2018						
City ROUND ROCK	State TX	Zip Code 78665-5666			-		76951134 is 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) Regl Affs		/lemc	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 C. HO, SAMUEL, , ,	nitial) or Full O	rganization Name	Date o	of Re	ceipt					
Mailing Address 4220 OCEAN DR	1		07		D D D 31	JL	2018			
City MANHATTAN BEACH	State CA	Zip Code 90266-3059					47795113 is Period	4		
FEC ID number of contributing federal political committee.	С				,	,	384.6	60		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) dvsr		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)			
SUBTOTAL of Receipts This Page (optional)					,		682.6	68		
TOTAL This Period (last page this line numbe	r only)	••••••								

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle KNUTSON, MARK, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 19312 FAIRHAVEN EXT			07 31 Y Y Y Y Y 2018						
City SANTA ANA	State CA	Zip Code 92705-6310	Transaction ID : PR2119480251134 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. MACE-MEADOR, HEATHER, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 13531 CARLTON OAKS			07 / D D / Y Y Y Y Y 2018						
	State TX	Zip Code	Transaction ID : PR2119482551134						
		78232-4902	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		40.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	1						
Other (specify) ▼		300.00	P/R Deduction (\$20.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. NEURURER, SCOTT, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 23822 VIA MONTE			07 31 Y Y Y Y Y						
City COTO DE CAZA	State CA	Zip Code 92679-4001	Transaction ID : PR2119484951134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		96.15						
Name of Employer (for Individual) Optum Services, Inc	Occ VP 0	upation (for Individual) Ops	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1346.10	P/R Deduction (\$96.15 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			166.15						
TOTAL This Period (last page this line number	er only)								

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
			person for the purpose of soliciting contributions 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. NYGARD, KEITH, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 9225 W CHARLESTON B #2034	OULEVARD		07 31 Y Y Y Y Y 2018						
City LAS VEGAS	State NV	Zip Code 89117-7059	Transaction ID : PR2119485051134 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) c Dir Reg Adhr	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	P/R Deduction (\$20.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. OLLMANN-WAGNER, TRACY, ,		rganization Name	Date of Receipt						
Mailing Address 2839 TIMBER LANE		The Octo	07 / ^D 07 / ^Y Y Y Y Y 2018						
City GREEN BAY	State WI	Zip Code 54313-5841	Transaction ID : PR2119485251134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		30.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir SIs 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 PAXSON, LYNDA A, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3924 E GARNET PL			07 / D D / Y Y Y Y 2018						
City HIGHLANDS RANCH	State CO	Zip Code 80126-5044	Transaction ID : PR2119485851134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		50.00						
Name of Employer (for Individual) UNITED HEALTHCARE SVS INC	Sr F	upation (for Individual) ield Acct Mgr	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)		120.00						
TOTAL This Period (last page this line num	per only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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				Detailed Summary Page	×	11a 13	\square	11 14		_	11c 15	12 16	17		
	y information copied from such Reports and State for commercial purposes, other than using the na					or the		pos	se of s	sol	iciting	contribut	ions		
<u> </u>	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated														
Α.	Full Name of Individual (Last, First, Middle Initial) PETERS, MICHELLE, , ,) or Full O	rgar	nization Name	C	Date of Receipt									
	Mailing Address 1128 COUNTRYSIDE DR	State		Zip Code		07 31 2018 Transaction ID : PR2119486451134									
	DE PERE	WI		54115-1040	A	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		upati Act S	ion (for Individual) Svs		Memo Item									
	Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 225.00							P/R Deduction (\$15.00 Bi-Weekly)							
в.	Full Name of Individual (Last, First, Middle Initial) PITTMAN, AUSTIN, , ,) or Full O	Orgar	nization Name	Date of Receipt										
	Mailing Address 4621 EDINA BLVD	Zin Codo		07 / D D / Y Y Y Y 2018						Y					
	City EDINA	Zip Code 55424-1154				-				8675113 s Period	4				
	FEC ID number of contributing federal political committee.						384.60						60		
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) gment CEO		Memo Item									
	Receipt For: // Primary General Other (specify) ▼	r-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)												
C.	Full Name of Individual (Last, First, Middle Initial) PROCHNOW, JAMES, , ,) or Full O	Orgar	ization Name	C	Date of	Re	ecei	ipt						
	Mailing Address 143 RUSTIC OAK DRIVE					07	/	L	31			2018 Y			
	City LUXEMBURG	State WI		Zip Code 54217-7320	A							8725113 s Period	4		
	FEC ID number of contributing federal political committee.	С						<u>,</u>			9	28.0	00		
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Dir F	•	ion (for Individual)		Me	emo	o Ite	em						
	Receipt For: // Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 210.00	P/	R Ded	uctio	on	(\$14.0	00	Bi-We	ekly)			
s	UBTOTAL of Receipts This Page (optional)			•	[,			,	442.6	50		
Т	OTAL This Period (last page this line number onl	y)		•				-							

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and 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 PA	AC)						
Full Name of Individual (Last, First, Middle RICCIUTI, SHARON, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 55 PERENNIAL			07 31 / Y Y Y Y Y 2018						
City IRVINE	State CA	Zip Code 92603-0621	Transaction ID : PR2119487951134 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 Qlty	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 THOMSON, CHERYL, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 222 FOREST DR			07 / D D / Y Y Y Y Y 2018						
City	State WI	Zip Code	Transaction ID : PR2119491651134						
SOBIESKI		54171-9748	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) Compli	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	-						
Other (specify) ▼		225.00	P/R Deduction (\$15.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle TUCKER , STEVEN, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3784 8TH AVENUE			07 / D D / Y Y Y Y 07 31 2018						
City SAN DIEGO	State CA	Zip Code 92103-4305	Transaction ID : PR2119492051134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		192.00						
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 ▼ 1440.00	P/R Deduction (\$96.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			250.08						
TOTAL This Period (last page this line numb	er only)								

SCHEDULE A (FEC Form 3X) DEAEIDTA

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11			for each category of the Detailed Summary Page	× 11a	11b	11c	12			
	y information copied from such Reports and Sta for commercial purposes, other than using the n									
$\overline{\langle}$	NAME OF COMMITTEE (In Full)									
\rangle	UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	C)						
Α.	Full Name of Individual (Last, First, Middle Initia VANASTEN, SUSAN, , ,	l) or Full O	rganization Name	Date of	Receipt					
	Mailing Address N2249 NICOLE COURT			07 31 2018						
	City KAUKAUNA	State WI	Zip Code 54130-9462		action ID : P of Each Re			1		
	FEC ID number of contributing federal political committee.	С				-	80.0)0		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) R Telesls Dir	Me	emo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	P/R Dedu	uction (\$40.0	0 Bi-We	eekly)			
в.	Full Name of Individual (Last, First, Middle Initia WRIGHT, GREGORY, , ,	l) or Full O	organization Name	Date of	Receipt					
	Mailing Address 10471 STRAND TERRACE	1		07 / D D / Y Y Y Y 2018						
	City SANTA ANA	State CA	Zip Code 92705-1495		action ID : P			L		
	FEC ID number of contributing		92703-1493	Amount	of Each Re	ceipt th	is Period	_		
	federal political committee.	С		50.00						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Plan CEO	Me	emo Item					
		Aggregate	Year-to-Date ▼							
	Other (specify) ▼		, 375.00	P/R Dedu	iction (\$25.0	0 Bi-We	ekly)			
C.	Full Name of Individual (Last, First, Middle Initia YOUNG, GEORGE, , ,	l) or Full O	organization Name	Date of	Receipt					
	Mailing Address 36296 N 98TH WAY	-		07	/ D D 31	/ Y	2018	Y		
	City SCOTTSDALE	State AZ	Zip Code 85262-3138		action ID : P of Each Re			4		
FEC ID number of contributing federal political committee.					,	,	30.0)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 ▼ 225.00	P/R Ded	uction (\$15.0	0 Bi-We	ekly)			
s	UBTOTAL of Receipts This Page (optional)					9	160.0	0		
т	OTAL This Period (last page this line number on	ly)	•			-				

SCHEDULE A (FEC Form 3X) EMIZED DECEIDTE

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TEMIZED RECEIPTS			for each category of the Detailed Summary Page	X 11a 11b 11c 12						
				13 14 15 16 1 erson for the purpose of soliciting contributions to solicit contributions from such committee.						
NAM	itedHealth Group Incorporate									
	Name of Individual (Last, First, Middle Ini SON, JOHN, J, ,	tial) or Full O	rganization Name	Date of Receipt						
Maili	ng Address 524 N CRESCENT HEIGHTS	BLVD		07 31 2018						
City LOS	ANGELES	State CA	Zip Code 90048-2208	Transaction ID : PR2126373851134 Amount of Each Receipt this Period						
	ID number of contributing ral political committee.	С		384.60						
Unite	e of Employer (for Individual) ed HealthCare Services Inc		upation (for Individual) Comm	Memo Item						
	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2692.20	P/R Deduction (\$192.30 Bi-Weekly)						
	Name of Individual (Last, First, Middle Ini IRKE, FORREST, , ,	tial) or Full O	rganization Name	Date of Receipt						
Maili	ng Address 380 LEAF STREET			07 31 Y Y Y Y 2018						
City ORC	DNO	State MN	Zip Code 55356-9733	Transaction ID : PR2133132451134 Amount of Each Receipt this Period						
	ID number of contributing ral political committee.	С		384.60						
	ne of Employer (for Individual) ad HealthCare Services Inc		upation (for Individual) Unit CEO	Memo Item						
Rece	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
	Name of Individual (Last, First, Middle Ini JMMINGS, DANIEL, , ,	tial) or Full O	rganization Name	Date of Receipt						
	ng Address 1929 FAIRMOUNT AVE			07 / D D / Y Y Y Y 2018						
City SAI	NT PAUL	State MN	Zip Code 55105-1539	Transaction ID : PR2133132651134 Amount of Each Receipt this Period						
	ID number of contributing ral political committee.	С		30.00						
Unite	e of Employer (for Individual) ed HealthCare Services Inc	Occu Dir F	upation (for Individual) ïin	Memo Item						
	eipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 225.00	P/R Deduction (\$15.00 Bi-Weekly)						
SUBT	DTAL of Receipts This Page (optional)		•••••	. 799.20						

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middle A. HULTGREN, BROR, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 408 22ND ST			07 31 Y Y Y Y Y								
City GOLDEN	State CO	Zip Code 80401-2452	Transaction ID : PR2133133251134 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											
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. MORISATO, SUSAN, , ,	Date of Receipt										
Mailing Address 238 ARDMORE ROAD	Mailing Address 238 ARDMORE ROAD										
City DES PLAINES	State IL	Zip Code 60016-2119	Transaction ID : PR2133133851134 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	ů – Li – L										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) s Insurance Sols	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle NETTLETON, KIMBERLY, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 5003 DARNELL	07 / 07 / 2018										
City HOUSTON	State TX	Zip Code 77096-1510	Transaction ID : PR2133133951134 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) Bus Process	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).			799.20								
TOTAL This Period (last page this line number	er only)										

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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				led Summary Page	×	11a		11	- H	_	lc	12	<u> </u>		
	y information copied from such Reports and Stat								e of		iting				
<u> </u>	for commercial purposes, other than using the na NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated					ICIL COP	ILLID	utic	ons fr	om	SUCN	commit	ee.		
<u> </u>	Full Name of Individual (Last, First, Middle Initial PUTNAM, T JEFFREY, , ,	Organizati		Date of Receipt											
	Mailing Address 303 ELMWOOD PLACE WEST							07 31 2018							
	City MINNEAPOLIS	State MN	· · ·	Code 5419-1349	Transaction ID : PR2133134251134 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		384.60											
	Name of Employer (for Individual) United HealthCare Services Inc	Occi Mkt	Memo Item												
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/	P/R Deduction (\$192.30 Bi-Weekly)											
	Full Name of Individual (Last, First, Middle Initial FALKENBERG, ROBERT, , ,	del Initial) or Full Organization Name					Date of Receipt								
	Mailing Address 6 LANTANA						07 / 07 / 07 / 07 / 07 / 07 / 07 / 07 /								
	City NEWPORT COAST	State CA		Code 657-1646				-				2845113 s Period	4		
	FEC ID number of contributing federal political committee.	С					233.84								
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) HIth Plan CEO				Me	emo) Ite	əm						
	Receipt For: Primary General Other (specify) ▼	Aggregate	gregate Year-to-Date ▼ 1713.80				P/R Deduction (\$116.92 Bi-Weekly)								
c.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name RUMMEL, LEAH, , ,							Date of Receipt							
	Mailing Address 12100 TRAUTWEIN ROAD	1			07 31 Y Y Y Y 2018										
	City AUSTIN	State TX	· · ·	Code 737-9358	A							2955113 s Period	4		
	FEC ID number of contributing federal political committee.	C					30.00								
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) Dir Govt Affs Aggregate Year-to-Date ▼ 225.00				P/R Deduction (\$15.00 Bi-Weekly)									
	Receipt For: Primary General Other (specify)														
s	UBTOTAL of Receipts This Page (optional)			•	. [,			9	648.4	14		
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	y information copied from such Reports and S										
or	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and a	doress of any political committee	e to s	olicit cor	TITIC	outions t	rom sucr	Committ	ee.	
	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)							
Α.	Full Name of Individual (Last, First, Middle Ini SMITH, DANNETTE, , ,	tial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 4200 ALDEN DRIVE				07	1	D D D 31) / Y	2018	Y	
	City EDINA	State MN	Zip Code 55416-5010						2995113 is Period	4	
	FEC ID number of contributing federal political committee.	С							384.0	60	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Deputy Gen Counsel		M	emo	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	1	P/R Ded	ucti	on (\$192	2.30 Bi-W	/eekly)		
в.	Full Name of Individual (Last, First, Middle Init LEWIS, KURT, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt				
	Mailing Address 961 RIVER FOREST DRIVE	1-			07	/	31	/ Y	2018	Y	
		State OH	Zip Code 45039-7720						6755113	4	
	MAINEVILLE		\neg	Amount	tot	Each H	leceipt th	is Period			
	FEC ID number of contributing federal political committee.	C	576.00						00		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Plan CEO		M	emo	ltem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1831.86	P/R Deduction (\$288.00 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Ini BEAULE, JEAN-FRANCOIS, , ,	tial) or Full O	rganization Name		Date of	Re	eceipt				
	Mailing Address 7 STRATFORD RD				07 ^M	/	31) / Y	2018 Y	Y	
	City FARMINGTON	State CT	Zip Code 06032-1444						81365113 is Period	4	
	FEC ID number of contributing federal political committee.	С					, .		230.	76	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) PHIth Advancement		M	emo	tem				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1730.70]	P/R Ded	ucti	on (\$11	5.38 Bi-W	/eekly)		
s	UBTOTAL of Receipts This Page (optional)		•	•			, .	. ,	1191.3	36	
Т	OTAL This Period (last page this line number	only)		•			-				

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12							
			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions							
NAME OF COMMITTEE (In Full)	an using the name and a	doress of any political committee	e to solicit contributions from such committee.							
UnitedHealth Group Inc	corporated PAC (l	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, Firs CARRUTH, NANCY, , ,	t, Middle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 753 WOOD HILL	DRIVE		07 31 2018							
CHANHASSEN	State MN	Zip Code 55317-9561	Transaction ID : PR2225818451134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		30.00							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) cipal Software Engineer	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, Firs B. MCGUIRE, MICHAEL, , ,	t, Middle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 437 DRURY LAN	E		07 31 2018							
City WYCKOFF	State NJ	Zip Code 07481-2204	Transaction ID : PR2225818851134 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) Plan CEO	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, Firs C. RYAN, JOHN, , ,	t, Middle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 45 WESTMOREL	1		07 / D D / Y Y Y Y 07 31 2018							
City NAPERVILLE	State IL	Zip Code 60540-5817	Transaction ID : PR2225819651134 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) ? CInt Mgmt Svc	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)		606.90							
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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)	ne name and a	doress of any political committee		ninbulion		1 commute	e.			
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle SAILOR, ROY, , ,	nitial) or Full C	rganization Name	Date o	f Receipt						
Mailing Address 276 COYOTE WILLOW DR	IVE		M M 07		D / Y	ү ү 2018	Y			
City COLORADO SPRINGS	State CO	Zip Code 80921-7631			D: PR22258 Receipt th		1			
FEC ID number of contributing federal political committee.	С					153.8	34			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	М	emo Item	1					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Ded	luction (\$7	76.92 Bi-We	eekly)				
Full Name of Individual (Last, First, Middle GREENMAN, DEE, , ,	nitial) or Full C	rganization Name	Date o	f Receipt						
Mailing Address 536 HIGH DR	Otata	Zin Oode	07		B1 / Y	2018	Y			
City CARMEL	State IN	Zip Code 46033-2338			: PR22313 Receipt th					
FEC ID number of contributing federal political committee.	С					27.9	8			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs	м	emo Item	1					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.06	P/R Ded	uction (\$1	13.99 Bi-We	eekly)				
Full Name of Individual (Last, First, Middle CONNLY, MICHAEL, , ,	nitial) or Full C	rganization Name	Date o	f Receipt						
Mailing Address 570 MONTCALM PL			M 07	3	31	2018				
City SAINT PAUL	State MN	Zip Code 55116-1730			D: PR2247 Receipt th		4			
FEC ID number of contributing federal political committee.	C			,		384.6	60			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ff Tech Off	M	emo Item	1					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P/R Dec	luction (\$	192.30 Bi-V	Veekly)				
SUBTOTAL of Receipts This Page (optional).				.,	,	566.4	2			
TOTAL This Period (last page this line number	er only)				-					

SCHEDULE A (FEC Form 3X)

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ıт.	EMIZED RECEIPTS		Use separate schedule(s)	(ch	(check only one)						
			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 NAME OF COMMITTEE (In Full)	e name and a		9 10 5			utions i	rom suci	Commu	ee.	
$\left \right\rangle$	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)							
Α.	Full Name of Individual (Last, First, Middle Ini CARCIONE, JOSEPH, , ,	tial) or Full O	organization Name	Date of Receipt							
	Mailing Address 11 CARRIAGE WAY				07	1	D D 31	/ Y	үүү 2018	Y	
	City WHITE PLAINS	State NY	Zip Code 10605-5424	_					2685113 is Period	4	
	FEC ID number of contributing federal political committee.	С			<u> </u>				115.4	40	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) <i>I</i> ed Dir		M	emc	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 865.50	'	P/R Ded	uctio	on (\$57.	70 Bi-We	ekly)		
в.	Full Name of Individual (Last, First, Middle Ini KANTOLA, KEVIN, , ,	tial) or Full O	organization Name		Date of	f Re	eceipt				
	Mailing Address 7031 HALSTEAD DRIVE				07	1	D D D 31	/ Y	2018	Y	
	City	State	Zip Code						2705113	4	
	MINNETRISTA	MN	55364-3201		Amount	t of	Each R	eceipt th	is Period	_	
	FEC ID number of contributing federal political committee.	С		Ľ.				78.0	00		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Software Engineering		M	emc	ltem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 585.00	I F	P/R Ded	uctio	on (\$39.	00 Bi-We	ekly)		
с.	Full Name of Individual (Last, First, Middle Ini O'BRIEN, DENNIS, , ,	tial) or Full O	organization Name		Date of	Re	eceipt				
	Mailing Address 61 LOUGHLIN AVE				07	1	31	/ Y	y y 2018	Y	
	City COS COB	State CT	Zip Code 06807-2621						52735113 is Period	4	
	FEC ID number of contributing federal political committee.	С			<u> </u>		, :	9	384.6	50	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n CEO		M	emo	tem				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	1	P/R Ded	ucti	on (\$19:	2.30 Bi-W	/eekly)		
s	UBTOTAL of Receipts This Page (optional)		•	•			, .	9	578.0	00	
Т	OTAL This Period (last page this line number	only)		•							

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	-	Use separate schedule(s)	(check only one)							
EMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12							
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)	g the hame and a	duces of any political commute								
UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Midd A. VERNEY, JEFFERY, , ,	le Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 266 WESTLEDGE ROAI)		07 31 2018							
City WEST SIMSBURY	State CT	Zip Code 06092-2017	Transaction ID : PR2247627451134 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, Midd B. GARODIA, SANJAY, , ,	le Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 110 COVINGTON COUR	т		07 31 2018							
City	State	Zip Code	Transaction ID : PR2247627851134							
	12	60523-2574	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	Occ CO	upation (for Individual) D	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.52	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Midd C. OHMAN, DANIEL, , ,	le Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 205 RIVERMERE WAY			07 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
City ATLANTA	State GA	Zip Code 30350-6346	Transaction ID : PR2247628051134 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) n CEO	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1346.10	P/R Deduction (\$96.15 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optiona	al)		557.67							
TOTAL This Period (last page this line num	nber only)	······								

Use separate schedule(s)

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171			Use separate schedule(s)	(check only one)							
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	▶ 11a 11b 11c 12							
	y information copied from such Reports and Sta for commercial purposes, other than using the n										
	NAME OF COMMITTEE (In Full)			to solicit contributions norm such committee.							
\rangle	UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	C)							
A.	Full Name of Individual (Last, First, Middle Initia PRINCE, JOHN, , ,	l) or Full O	rganization Name	Date of Receipt							
	Mailing Address 546 HARRINGTON ROAD			07 31 2018							
	City WAYZATA	State MN	Zip Code 55391-1550	Transaction ID : PR2259738451134 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)							
в.	Full Name of Individual (Last, First, Middle Initia CRONN, CHRISTOPHER, , ,	l) or Full O	rganization Name	Date of Receipt							
	Mailing Address 1122 COLORADO STREET SUITE 2399		07 / D D / Y Y Y Y 07 31 2018								
	City AUSTIN	State TX	Zip Code 78701-2132	Transaction ID : PR2270522951134 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) rt Affs Dir	Memo Item							
	Receipt For:	Aggregate	Year-to-Date ▼	-							
	Primary General Other (specify) ▼		865.35	P/R Deduction (\$57.69 Bi-Weekly)							
C.	Full Name of Individual (Last, First, Middle Initia CURRY, CAROLE, , ,	l) or Full O	rganization Name	Date of Receipt							
	Mailing Address 411 FLEECE FLOWER DRIVE			07 / D D / Y Y Y Y 2018							
	City GAITHERSBURG	State MD	Zip Code 20878-2646	Transaction ID : PR2402315751134 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) roj Mgr II	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)			527.98							
т	OTAL This Period (last page this line number or	ly)	••••••								

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11	EIVILLED REVEILIS		for each category of the Detailed Summary Page	×			11b	11c	12	·			
	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 sol	licit cor	ntrib	outions t	rom such	n committe) e.			
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	JnitedHealth Group PA	AC)									
A.	Full Name of Individual (Last, First, Middle Ini FRASCINO, MJ, , ,	tial) or Full C	rganization Name	[Date of	Re	eceipt						
	Mailing Address 7 PIONEER DRIVE				^M 07	1	31) / Y	у 2018	Y			
	City ELLINGTON	State CT	Zip Code 06029-3221	A				PR24023 leceipt th	316551134 is Period	ł			
	FEC ID number of contributing federal political committee.	С						-	28.0	0			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Comm		Me	emc	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/	/R Ded	uctio	on (\$14	.00 Bi-We	eekly)				
в.	Full Name of Individual (Last, First, Middle Ini KEPLEY CARRIER, ANGELA, , ,	tial) or Full C	rganization Name		Date of	Re	eceipt						
	Mailing Address 3219 PENINSULA DRIVE				^м 07	1	31	/ Y	2018	Y			
	City JAMESTOWN	State NC	Zip Code 27282-8717	/				PR24023 Receipt th	1775113 4 is Period				
	FEC ID number of contributing federal political committee.	С			40.0								
	Name of Employer (for Individual) Optum Services, Inc	Occupation (for Individual) Dir Med Clin Ops				Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	P/	/R Dedu	uctio	on (\$20.	00 Bi-We	ekly)				
C.	Full Name of Individual (Last, First, Middle Ini LEVI-BAUMGARTEN, MARILYN,		rganization Name		Date of	Re	eceipt						
	Mailing Address 4800 W 27TH ST	Otata			07	/	31		2018				
	City SAINT LOUIS PARK	State MN	Zip Code 55416-1933						31795113 is Period	1			
	FEC ID number of contributing federal political committee.	С					,	, y	40.0	0			
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		M	emo) Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 300.00	P	/R Ded	ucti	on (\$20	.00 Bi-W€	eekly)				
s	UBTOTAL of Receipts This Page (optional)			•			, .	. ,	108.0	0			
Т	OTAL This Period (last page this line number	only)											

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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	EWIZED RECEIPTS		Detailed Summary Page	×	11a] 11b	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	UnitedHealth Group P/	AC)									
Α.	Full Name of Individual (Last, First, Middle Initial) LOGAN, JAKE, , ,) or Full O	Organization Name	[Date of Receipt								
	Mailing Address 4826 EAST CALLE REDONDA				07 31 2018								
	City PHOENIX	State AZ	Zip Code 85018-2931	-						31825113 nis Period	4		
	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) Govt Affs		Me	emo	o Ite	em					
	Receipt For: µ Primary General Other (specify) ▼]	/R Dedi	uctio	on (\$192.	30 Bi-V	Veekly)					
B.	Full Name of Individual (Last, First, Middle Initial) MCGRATH, STACY, , ,) or Full O	Organization Name		Date of	Re	eceip	pt					
	Mailing Address 5801 CHOWEN AVE S		07 31 / Y Y Y Y Y										
	City EDINA	State MN	Zip Code 55410-2759							31855113 nis Period	4		
	FEC ID number of contributing federal political committee.					-		-95-	34.	24			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Proj Mgmt	Memo Item									
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 256.80	P/R Deduction (\$17.12 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial) ROSSI, DAVID, , ,) or Full O	Organization Name		Date of	Re	eceip	pt					
	Mailing Address 510 BUFFALO TOM DRIVE	1 -	1		м м 07	/	L	31	/ Y	2018			
	City GREENSBORO	State NC	Zip Code 27455-8344							31965113 nis Period	4		
	FEC ID number of contributing federal political committee.	С				_	9		"	27.	74		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir		Me	emo	o Ite	em					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 212.43] P	/R Ded	uctio	on ((\$13.8	7 Bi-W	eekly)			
s	UBTOTAL of Receipts This Page (optional)						9		,	446.	58		
Т	OTAL This Period (last page this line number only	y)					-,						

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and S or for commercial purposes, other than using the			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle Init A. BARRINGER, PAUL, , ,	tial) or Full O	rganization Name	Date of Receipt							
Mailing Address 3709 WILLIAMS LANE			07 31 2018							
City	State	Zip Code	Transaction ID : PR2402444351134							
CHEVY CHASE	MD	20815-4951	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		92.30							
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item							
Optum Services, Inc	VP	CInt Svc Acct Mgt								
Receipt For:	Aggregate	Year-to-Date 🔻								
Primary General		692.25	P/R Deduction (\$46.15 Bi-Weekly)							
Other (specify) v	<u> </u>	092.23	1							
Full Name of Individual (Last, First, Middle Init	tial) or Full O	rganization Name	Data of Descipt							
B. CRANLEY, SHELLEY, , ,			Date of Receipt							
Mailing Address 3801 MAURICE COURT			07 31 2018							
City	State	Zip Code	Transaction ID : PR2402444451134							
LAS VEGAS	NV	89108-5245	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		50.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs	Memo Item							
Receipt For:		Year-to-Date ▼	-							
Primary General	, iggi oguto		P/R Deduction (\$25.00 Bi-Weekly)							
Other (specify) v		375.00								
Full Name of Individual (Last, First, Middle Init C. BECKER, JAMES, , ,	tial) or Full O	rganization Name	Date of Receipt							
Mailing Address 378 FERNDALE ROAD WEST	Г		M = M / D = D / Y = Y = Y							
	0	Zin Oast-	07 31 2018							
City WAYZATA	State MN	Zip Code 55391-1559	Transaction ID : PR2402445151134							
			Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		384.60							
Name of Employer (for Individual)		upation (for Individual)	Memo Item							
United HealthCare Services Inc Receipt For:		Ops								
Primary General	Aggregate	Year-to-Date V	P/R Deduction (\$192.30 Bi-Weekly)							
Other (specify)		2884.50	The Deduction (\$192.30 Driveekty)							
SUBTOTAL of Receipts This Page (optional)			526.90							
TOTAL This Period (last page this line 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			
Any information copied from such Reports and or for commercial purposes, other than using th									
NAME OF COMMITTEE (In Full)									
> UnitedHealth Group Incorporat	ed PAC (l	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle Ir A. COLEMAN, JAMES, , ,	nitial) or Full C	rganization Name	Date of	Receipt					
Mailing Address 4720 WEST 66TH STREET			07 31 2018						
City	State	Zip Code	Trans	action ID : Pl	R24024	45251134	ı		
EDINA	MN	55435-1506	Amount	of Each Red	ceipt th	s Period			
FEC ID number of contributing federal political committee.	С				-9	384.6	0		
Name of Employer (for Individual)		upation (for Individual)	Me	emo Item					
United HealthCare Services Inc	Mkt	Grp SVP, Human Capital							
Receipt For:	Aggregate	Year-to-Date ▼	D/D Dod	untion (\$100 c		ماراير			
Other (specify) ▼		2884.50	P/R Deal	uction (\$192.3	DI-10	еекіу)			
			·						
Full Name of Individual (Last, First, Middle Ir B. HIGA, JOY, , ,	nitial) or Full C	rganization Name	Date of	Receipt					
Mailing Address 2208 ELM AVENUE			07	/ D D 31	/ Y	ү ү 2018	Y		
City MANHATTAN BEACH	State CA	Zip Code 90266-2809		action ID : PF					
FEC ID number of contributing		30200-2003	Amount	of Each Rec	ceipt th	s Period	_		
federal political committee.	С		60.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs	Me	emo Item					
Receipt For:	Aggregate	Year-to-Date V							
Other (specify) ▼		450.00	P/R Dedu	iction (\$30.00) Bi-We	ekly)			
Full Name of Individual (Last, First, Middle Ir c. ALEXANDER, CORY, , ,	nitial) or Full C	rganization Name	Date of	Receipt					
Mailing Address 4203 BRADLEY LANE			07	/ D D 31	/ Y	y y 2018	Y		
City	State MD	Zip Code		action ID : P			۱.		
CHEVY CHASE		20815-5234	Amount	of Each Rec	ceipt th	s Period			
FEC ID number of contributing federal political committee.	С		1 L		y	384.6	0		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ? External Affairs	Me	emo Item					
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify)		2884.50	P/R Ded	uction (\$192.3	30 Bi-W	eekly)			
SUBTOTAL of Receipts This Page (optional)	I				_	829.2	.0		
TOTAL This Period (last page this line number					1		T		

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171			Use separate schedule(s)	(ch	(check only one)							
111			for each category of the Detailed Summary Page		1 1a		11b	11c	12			
An	y information copied from such Reports and St	atements ma	ay not be sold or used by any p	berson	13 for the	pur	14 Dose of	15 soliciting	16 contribut	17 ions		
<u> </u>	for commercial purposes, other than using the	name and a	ddress of any political committe	e to so	olicit cor	ntrib	utions f	rom suc	h committe	96.		
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group P	AC)								
Α.	Full Name of Individual (Last, First, Middle Initi SAELENS, KAREN, , ,	al) or Full O	rganization Name		Date of	Re	ceipt					
	Mailing Address 105 N FLORENCE AVE				м м 07	1	D D D 31	/ Y	y y 2018	Y		
	City LITCHFIELD PARK	State AZ	Zip Code 85340-4424						544851134 his Period	4		
	FEC ID number of contributing federal political committee.	С							40.0	00		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Health Plan Operations		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00] [P/R Dedu	uctio	on (\$20.	00 Bi-W	eekly)			
B.	Full Name of Individual (Last, First, Middle Initi WEE, KATHLYN, , ,	rganization Name		Date of	Re	ceipt						
	Mailing Address 2225 46TH ST NW					1	31	/ Y	2018	Y		
	City WASHINGTON	State DC	Zip Code 20007-1032	-			-		545051134	1		
	FEC ID number of contributing federal political committee.	C		Amount	OT	Each R	eceipt tr	nis Period 384.6	60			
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P State SIs OptumI		Me	emo	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 Initi CORZINE, JEFFREY, , ,	al) or Full O	rganization Name		Date of	Re	ceipt					
	Mailing Address 9350 TRACEYTON DRIVE				07 ^M	1	D D D 31	JL	2018			
	City DUBLIN	State OH	Zip Code 43017-9689				-	-	11975113 his Period	4		
	FEC ID number of contributing federal political committee.	С			Ľ.		y	, ,	77.6	8		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) /Iktg Bus Dev		Me	emc	ltem					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 572.61] '	P/R Ded	ucti	on (\$38.	.84 Bi-W	eekly)			
s	UBTOTAL of Receipts This Page (optional)			•			,	. ,	502.2	28		
т	OTAL This Period (last page this line number of	only)		•								

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports and S or for commercial purposes, other than using the			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	JnitedHealth Group PA	.C)								
Full Name of Individual (Last, First, Middle Ini A. FUENTEVILLA, ANA, , ,	tial) or Full C	organization Name	Date of Receipt								
Mailing Address 5110 N CALLE COLMADO			07 / D D / Y Y Y Y 2018								
City TUCSON	State AZ	Zip Code	Transaction ID : PR2437119851134								
	AL	85718-5002	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) Seg Chief Med Off	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 Ini B. HAGAN, WILLIAM, , ,	tial) or Full C	organization Name	Date of Receipt								
Mailing Address 6536 E GREYTHORN DRIVE	07 / D D / Y Y Y Y Y 2018										
City SCOTTSDALE	State AZ	Zip Code 85266-6761	Transaction ID : PR2437120051134 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) s Segment 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 Ini c. WEISS, JACK, , ,	tial) or Full C	organization Name	Date of Receipt								
Mailing Address 6245 NORTH 75 STREET			07 / D D / Y Y Y Y 07 31 2018								
City	State AZ	Zip Code	Transaction ID : PR2437120551134								
SCOTTSDALE	AZ	85250-4621	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		50.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) red Svs Regn CMO	Memo Item								
Receipt For: Primary General Other (specify)	1	Year-to-Date ▼ 375.00	P/R Deduction (\$25.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			819.20								
TOTAL This Period (last page this line number											

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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				Summary Page	×	11a	Ц	11		_	1c	12			
Δn	y information copied from such Reports and Stat	amonte ma	av not be a	old or used by any pr	arson f	13 or the		14			5 citina	16	17		
	for commercial purposes, other than using the n														
	NAME OF COMMITTEE (In Full)		,		<u> </u>										
$\Big)$	UnitedHealth Group Incorporated			-	AC)										
Α.	Full Name of Individual (Last, First, Middle Initia BALTHAZOR, PAUL, , ,) or Full O	rganization	Name		Date of	Re	ecei	pt						
	Mailing Address 9013 FARNSWORTH AVENUE	NORTH				07 31 2018									
	City	State	Zip Co			Transaction ID : PR2437120751134									
	BROOKLYN PARK	MN	5544	3-1754	/	_ 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 Segment C	,		Memo Item									
	Receipt For:	Aggregate	Year-to-Dat	te 🔻											
	Other (specify) ▼			2884.50	P	P/R Deduction (\$192.30 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initial PRESTON, ROBERT, , ,) or Full O	rganization	Name		Date of Receipt									
	Mailing Address 6594 HARBOR BEACH NE					м м 07	/	ľ	31	/	Y	y y 2018	Y		
	City	State	Zip Co	ode 2-8201				-				21451134	1		
	PRIOR LAKE	MN	_ /	Amount	of	Ea	ch Re	ecei	pt this	s Period					
	FEC ID number of contributing federal political committee.	C					19.23								
	Name of Employer (for Individual) Optum360 Services Inc	Occupation (for Individual) VP Ops					Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/	P/R Deduction (\$19.23 Bi-Weekly)											
	Full Name of Individual (Last, First, Middle Initial NESS, LAURA, , ,) or Full O	rganization	Name	[Date of	Re	ecei	pt						
	Mailing Address 10550 PINNACLE WAY					м м 07	/	Γ	31	/	Y	y y 2018	Y		
	City	State	Zip Co									2155113	4		
	WOODBURY	MN	55129	9-4282		Amount	of	Ea	ch Re	ecei	pt this	s Period			
	FEC ID number of contributing federal political committee.	С					_	9	_	_	,	384.6	60		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Gen Mgmt	Individual)		Me	emo	o Ite	em						
	Respiret For:		Year-to-Dat	te 🔻											
	Primary General Other (specify)			2884.50	P/R Deduction (\$192.30 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)							,			9	788.4	13		
T	OTAL This Period (last page this line number on	ly)		•••••				-			-,				

SCHEDULE A (FEC Form 3X) -----. . . . _

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17	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)									
11			for each category of the Detailed Summary Page	Image: 11 a 11 b 11 c 12 13 14 15 16 1									
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements mame and a	ay not be sold or used by any p address of any political committee	erson for the purpose of soliciting contributions									
$\overline{\}$	NAME OF COMMITTEE (In Full)												
$ \rangle$	UnitedHealth Group Incorporate	d PAC (UnitedHealth Group PA	AC)									
/	Full Name of Individual (Last, First, Middle Initi	ial) or Full C	Drganization Name										
Α.				Date of Receipt									
	Mailing Address 1837 SUMMIT LANE			07 31 2018									
	City	State MN	Zip Code	Transaction ID : PR2437121651134									
	MENDOTA HEIGHTS		55118-4137	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		384.60									
	Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item									
	United HealthCare Services Inc	SVI	P Bus Dev										
	Receipt For:	Aggregate	Year-to-Date 🔻										
	Primary General		2884.50	P/R Deduction (\$192.30 Bi-Weekly)									
	Other (specify) v		2004.30	1									
	Full Name of Individual (Last, First, Middle Initi	ial) or Full C	Drganization Name										
В.	EDELSON, BRETT, , ,			Date of Receipt									
	Mailing Address 4600 DREXEL AVENUE			07 / D D / Y Y Y Y 2018									
	City	State MN	Zip Code	Transaction ID : PR2437127151134									
	EDINA		55424-1132	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C ID number of contributing cal political committee.											
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Strategy	Memo Item									
	Receipt For:	Aggregate	Year-to-Date V										
	Primary General Other (specify) ▼		2800.00	P/R Deduction (\$200.00 Bi-Weekly)									
	Full Name of Individual (Last, First, Middle Init	ial) or Full (Proanization Name										
C.	RAINEY, PETER, , ,			Date of Receipt									
	Mailing Address 3115 WEST 47 STREET			07 / D D / Y Y Y Y 2018									
	City	State	Zip Code	Transaction ID : PR2437127551134									
	MINNEAPOLIS	MN	55410-1857	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		384.60									
	Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item									
	United HealthCare Services Inc	SVF	P Corp Controller										
	Receipt For:	Aggregate	Year-to-Date V										
	Other (specify)		2884.50	P/R Deduction (\$192.30 Bi-Weekly)									
⊢	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number of			1169.20									

Use separate schedule(s)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page		X 11a		11b	11c	12						
	y information copied from such Reports and Stat														
or	for commercial purposes, other than using the n	ame and a	address of any political commit	tee to s	olicit con	tribu	utions fi	rom such	n committ	ee.					
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	UnitedHealth Group F	PAC)											
A.	Full Name of Individual (Last, First, Middle Initial LIPPERT, ROBIN, , ,) or Full O	Drganization Name		Date of	Red	ceipt								
	Mailing Address 404 A ST SE				07 31 / Y Y Y Y 2018										
	City WASHINGTON	State DC	Zip Code 20003-3807		Transaction ID : PR2439928051134 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 External Affs		Me	emo	Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50		P/R Deduction (\$192.30 Bi-Weekly)										
B.	Full Name of Individual (Last, First, Middle Initial HEYMAN, STEPHEN, , ,) or Full O	Drganization Name		Date of	Red	ceipt								
	Mailing Address 5300 SHERRILL AVENUE				M M 07	/	D D D 31	/ Y	2018	Y					
	City CHEVY CHASE	State MD	Zip Code 20815-3720						26575113	4					
	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	Occupation (for Individual) SVP Govt Affs			Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate		P/R Dedu	ictio	n (\$192	2.30 Bi-W	(eekly)							
с.	Full Name of Individual (Last, First, Middle Initial LANGER, DONALD, , ,) or Full O	Drganization Name		Date of	Red	ceipt								
	Mailing Address 5110 OAK RAMBLING DRIVE				07 ^M	/	D D 31	/ Y	ү ү 2018	Y					
	City KATY	State TX	Zip Code 77494-1971						01545113 is Period	4					
	FEC ID number of contributing federal political committee.	С			<u> </u>		,	, y	392.	30					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Me	emo	ltem								
Receipt For: Aggrega Primary General Other (specify)			Year-to-Date ▼ 2842.26		P/R Deduction (\$196.15 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			•			, ,		1161.	50					
т	OTAL This Period (last page this line number on	ly)		•			,								

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17			Use separate schedule(s) (c				(check only one)								
11	EMIZED RECEIPTS			or each category of the Detailed Summary Page	[× 11a		11b	11c	12					
	y information copied from such Reports and Sta														
or	for commercial purposes, other than using the r	name and a	lddre	ess of any political committee	to s	olicit con	trib	utions fi	rom suc	n commit	tee.				
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	Jni	tedHealth Group PA	.C)										
A.	Full Name of Individual (Last, First, Middle Initia LIND, NANCY, , ,	l) or Full O	rgan	ization Name		Date of	Re	ceipt							
	Mailing Address 2703 NORTHVIEW LANE					м м 07	/	D D 31	/ Y	y y 2018	Y				
	City CEDAR FALLS	State IA		Zip Code 50613-1655		Transaction ID : PR2445016251134 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		•	ion (for Individual) Ith Plan Operations		Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$14.00 Bi-Weekly)												
B.	Full Name of Individual (Last, First, Middle Initia ADLINGTON SHKABERIN, AMY, , ,	l) or Full O		Date of	Re	ceipt									
Mailing Address 3890 SUNSET DRIVE						м м 07	/	31	/ Y	2018	Y				
	City SPRING PARK	State MN		Zip Code 55384-9634	-			-		01645113 his Period					
	FEC ID number of contributing federal political committee.	Occupation (for Individual) VP Human Capital				384.60									
	Name of Employer (for Individual) United HealthCare Services Inc					Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)										
C.	Full Name of Individual (Last, First, Middle Initia	l) or Full O	rgan	ization Name		Date of	Re	ceipt							
	Mailing Address 264 LAKEWOOD DRIVE					07	/	D D D 31	/ Y	ү ү 2018	Y				
	City BLOOMFIELD HILLS	State MI		Zip Code 48304-3531						01715113 iis Period					
	FEC ID number of contributing federal political committee.	С				<u> </u>		y		28.	08				
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Med	•	ion (for Individual)		Me	emo	Item							
Receipt For: Aggr Primary General Other (specify)			pregate Year-to-Date ▼ 210.60					P/R Deduction (\$14.04 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)			•				,	.,	440.	68				
т	OTAL This Period (last page this line number or	ıly)		•	•			,							

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11	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					purpo								
$\overline{)}$	NAME OF COMMITTEE (In Full)													
\rangle	UnitedHealth Group Incorporated	d PAC (L	JnitedHealth Group PA	AC)										
A.	Full Name of Individual (Last, First, Middle Initia KRAJNOVICH, DANIEL, , ,	al) or Full Oi	rganization Name		Date of Receipt									
	Mailing Address 9958 BUTTONDOWN LANE				м м 07	/	D D D 31	/ Y	y y 2018	Ŷ				
	City ZIONSVILLE	State IN	Zip Code 46077-8135		Transaction ID : PR2460167351134 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) Plan CEO	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	P/R Deduction (\$20.00 Bi-Weekly)										
в.	Full Name of Individual (Last, First, Middle Initia RENFRO, LARRY, , ,	al) or Full Oi	rganization Name		Date of	Rec	eipt							
	Mailing Address 5 DOVE LANE				м м 07	1	D D 31	/ Y	2018	Ŷ				
	City ANDOVER	State Zip Code MA 01810-2845						PR24601						
		IVIA	01810-2845	_	Amount	of E	ach Re	eceipt th	is Period	3				
	FEC ID number of contributing federal political committee.		Ľ.			-	384	.60						
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Chairman UHG		Me	emo	Item							
	Receipt For:	Aggregate	Year-to-Date 🔻		1									
	Other (specify) ▼		2884.50	P/R Deduction (\$192.30 Bi-Weekly)										
С.	Full Name of Individual (Last, First, Middle Initia ORBUCH, DAVID, , ,	al) or Full Oi	rganization Name		Date of	Rec	eipt							
	Mailing Address 2220 CEDAR LAKE PKWY				07 ^M	/	D D D 31	/ Y	2018	Y				
	City MINNEAPOLIS	State MN	Zip Code 55416-3644					PR24601		-				
	FEC ID number of contributing federal political committee.	С			<u> </u>	,			455					
	Name of Employer (for Individual) UHC International Services Inc		upation (for Individual) Im Exec		Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2494.65		P/R Deduction (\$227.70 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)			•					880	.00				
т	OTAL This Period (last page this line number or	nly)		•				- 41-						

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									
or for commercial purposes, other than using	the name and a	louress of any political committe	e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle WEXLER, ERIC, , ,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 7220 WILLOW OAK DR			07 31 Y Y Y Y Y 2018									
City WEST BLOOMFIELD	State MI	Zip Code 48324-3081	Transaction ID : PR2463723151134 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 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. WALKOWSKI, KAREN, , ,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 6359 COUNTRY ROAD			07 31 / Y Y Y Y 2018									
City	State	Zip Code	Transaction ID : PR2463723451134									
EDEN PRAIRIE	MN	55346-1342	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) HIthcare Econ	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 GILL, PETER, , ,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 8673 SHERWOOD BLUFF			07 / 0 0 / 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0									
City EDEN PRAIRIE	State MN	Zip Code 55347-3433	Transaction ID : PR2463724651134 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		0.00									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ? Treas & Chief Invstmnt Off	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4999.90	P/R Deduction (\$0.00 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional).			412.68									
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									
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions									
	and mante allu a		to some contributions norm such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)									
Full Name of Individual (Last, First, Middle SCHICK, SUSAN, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 1220 DENBIGH LANE			07 31 / Y Y Y Y Y 07 31 2018									
City WAYNE	State PA	Zip Code 19087-4644	Transaction ID : PR2480620551134 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) ef Growth 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 ABBOTT, CHRISTOPHER, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 12700 MUNDOMAR DR	1-		07 ^J ^D ^J ^Y									
City AUSTIN	State TX	Zip Code 78739-1542	Transaction ID : PR2484541551134 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) n Plan CEO	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify) ▼		1528.84	P/R Deduction (\$125.00 Bi-Weekly)									
Full Name of Individual (Last, First, Middle BURNS, MATTHEW, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 2724 BISON DRIVE			07 / D D / Y Y Y Y Y 2018									
City EDMOND	State OK	Zip Code 73034-3475	Transaction ID : PR2484541751134 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)			1019.20									
TOTAL This Period (last page this line numb	er only)											

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

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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 Staten for commercial purposes, other than using the nan	nents may ne and ad	v not be sold or used by any political committee	erson for the purpose of soliciting contributions									
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (U	nitedHealth Group PA	AC)									
Α.	Full Name of Individual (Last, First, Middle Initial) (KNARR, KEVIN, , ,	or Full Org	ganization Name	Date of Receipt									
	Mailing Address 4806 HUTCHINS PLACE NW			07 / D D / Y Y Y Y 31 2018									
	5	State DC	Zip Code 20007-1528	Transaction ID : PR2484542351134									
				Amount of Each Receipt this Period 384.60									
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Segment COO	Memo Item									
	Receipt For: Ag Primary General Other (specify) ▼	ggregate Y	/ear-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)									
B.	Full Name of Individual (Last, First, Middle Initial) o	or Full Orç	ganization Name	Date of Receipt									
	Mailing Address 606 BROOKSIDE AVE			07 31 2018									
		State PA	Zip Code 19087-4826	Transaction ID : PR2484542851134									
				Amount of Each Receipt this Period									
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Plan CEO	Memo Item									
	Receipt For: Ag Primary General Other (specify) ▼	ggregate Y	/ear-to-Date ▼ 1497.32	P/R Deduction (\$113.63 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial) of MANDERFELD, THOMAS, , ,	or Full Org	ganization Name	Date of Receipt									
	Mailing Address 3760 WEST CALHOUN PARKWA			07 / D D / Y Y Y Y 2018									
	5	State MN	Zip Code 55410-1118	Transaction ID : PR2486697951134									
				Amount of Each Receipt this Period									
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) apital Mkt Comm	Memo Item									
	Dessint For:		/ear-to-Date ▼ 600.00	P/R Deduction (\$40.00 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)			691.86									
т	OTAL This Period (last page this line number only)												

SCHEDULE A (FEC Form 3X) _____ _

Use separate schedule(s)

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I EIVILED KEGEIPIS		for each category of the Detailed Summary Page	X 11a 11b 11c 12									
			13 14 15 16 17 erson for the purpose of soliciting contributions a to collicit contributions from such committee									
or for commercial purposes, other than using	the name and a	duress of any political committee	e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle MCMAHON, DIRK, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 60 WILDHURST ROAD			07 / D D / Y Y Y Y 2018									
City EXCELSIOR	State MN	Zip Code 55331-8461	Transaction ID : PR2491457051134 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	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 NATHAN, DONALD, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 275 GREENWICH STREE			07 / D D / Y Y Y Y 2018									
City NEW YORK	State NY	Zip Code 10007-2150	Transaction ID : PR2491457351134 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	384.60											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Chief Comm Off	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 SULLIVAN, KATHRYN, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 21487 BLUE MARLIN DR			07 / D D / Y Y Y Y Y 2018									
City SPRINGFIELD	State LA	Zip Code 70462-8237	Transaction ID : PR2491457551134 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) DE&I Regions	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 numb	er only)											

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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 rerson 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. HARTLEY, MICHAEL, , ,	e Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 4313 MORNINGSIDE RO	AD		07 / D D / Y Y Y Y Y 07 31 2018										
City EDINA	State MN	Zip Code 55416-5031	Transaction ID : PR2538641351134 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		0.00										
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) Ops	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4999.90	P/R Deduction (\$0.00 Bi-Weekly)										
Full Name of Individual (Last, First, Middle B. SMITH, KARA, , ,	Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 610 CRESTWOOD DRIVE			07 / ^D D / Y Y Y Y 31 / 2018										
	State VA	Zip Code	Transaction ID : PR2540175351134										
ALEXANDRIA FEC ID number of contributing	C	22302-2533	Amount of Each Receipt this Period 384.60										
federal political committee.													
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 C. PURDY, PATRICIA, , ,	Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 7417 LYNNHURST STRE			07 / D D / Y Y Y Y 2018										
City CHEVY CHASE	State MD	Zip Code 20815-3101	Transaction ID : PR2541300651134 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 Affairs	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)		769.20										
TOTAL This Period (last page this line num	·												

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 Incorpora	ted PAC (I	JnitedHealth Group P	AC)										
Full Name of Individual (Last, First, Middle I TIERNEY, JOELLE, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 5710 TAYCHOPERA RD			07 / D D / Y Y Y Y Y 07 31 2018										
City MADISON	State WI	Zip Code 53705-1020	Transaction ID : PR2541300751134 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 I B. VERSAGGI, JOHN, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 800 ALBANY AVENUE			07 / D D / Y Y Y Y 07 31 2018										
City ALEXANDRIA	State VA	Zip Code 22302-3501	Transaction ID : PR2541300851134										
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item										
Receipt For:	Aggregate	Year-to-Date 🔻	P/R Deduction (\$96.16 Bi-Weekly)										
Other (specify) ▼		1442.40											
Full Name of Individual (Last, First, Middle I HOSTETLER, BRENDAN, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 2309 W WINNEMAC AVE			07 / D D / Y Y Y Y Y 07 31 2018										
City CHICAGO	State IL	Zip Code 60625-1817	Transaction ID : PR2542541951134										
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) t Affs Dir	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)			692.30										
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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ITEIVIZED RECEIPIS		Detailed Summary Page	X	11a		11b	11c		12						
		Detailed Summary Page		13		14	15		16	17					
Any information copied from such Reports a				for the		pose of	soliciting		ntribut	ions					
or for commercial purposes, other than usin	g the name and a	ddress of any political committe	e to so	olicit con	ntrib	outions 1	from suc	h co	ommitte	ee.					
NAME OF COMMITTEE (In Full)															
UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group P	AC)												
Full Name of Individual (Last, First, Midd A. RAMSAY, RICHARD, , ,	le Initial) or Full C	organization Name		Date of Receipt											
Mailing Address 543 E LURAY AVE				07 31 2018											
City	State	Zip Code		Trans	acti	ion ID :	PR2542	5422	25113	4					
ALEXANDRIA	VA	22301-1605		Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С			100.00											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs		Memo Item											
Receipt For:	I	-	_	_											
Primary General	Aggregate	Year-to-Date ▼		P/R Ded	uctio	on (\$50	.00 Bi-We	eekh	V)						
Other (specify) v		750.00		,	uoti			Jon	,,						
Full Name of Individual (Last, First, Midd B. SPENCER, IPYANA, , ,	le Initial) or Full C	organization Name		Date of	Re	eceipt									
Mailing Address 4226 40TH STREET NO	RTH														
01		7.0.1	_	07		31		20	018	_					
City	State VA	Zip Code					PR2542			4					
ARLINGTON	VA	22207-4610	-	Amount	t of	Each F	Receipt th	nis F	'eriod						
FEC ID number of contributing federal political committee.	ů l							_	60.0	00					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev		Memo Item											
Receipt For:	Aggregate	Year-to-Date V		P/R Deduction (\$30.00 Bi-Weekly)											
Primary General Other (specify) ▼		450.00] P												
Full Name of Individual (Last, First, Midd C. YAU, ANNE, , ,	le Initial) or Full C	Prganization Name		Date of	Re	ceipt									
Mailing Address 9905 WOODLAND DRIV	Έ			Date of Receipt											
City	State	Zip Code		Trans	act	ion ID :	PR2543	582	55113	4					
SILVER SPRING	MD	20902-4047		Amount	t of	Each F	Receipt th	nis F	'eriod						
FEC ID number of contributing federal political committee.	С					,	, ,	_	115.3	38					
Name of Employer (for Individual)	Occ	upation (for Individual)		М	emo	tem									
United HealthCare Services Inc	VP I	External Affs													
Receipt For:	Aggregate	Year-to-Date V													
Primary General Other (specify)		865.35	P/R Deduction (\$57.69 Bi-Weekly)												
SUBTOTAL of Receipts This Page (optional	al))				, .	,		275.3	38					
TOTAL This Period (last page this line nur	nber only)		•												

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
Any information copied from such Reports and or for commercial purposes, other than using the									
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle I DAVENPORT, ALLISON, , ,	nitial) or Full O	rganization Name	Date of Receipt						
Mailing Address 141 PELHAM ROAD			07 31 Y Y Y Y Y 2018						
City PHILADELPHIA	State PA	Zip Code 19119-2661	Transaction ID : PR2552313651134 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 B. BRUNELL, MARK, , ,	nitial) or Full O	rganization Name	Date of Receipt						
Mailing Address 20 VERMILION CLIFFS			07 31 2018						
City ALISO VIEJO	State CA	Zip Code 92656-8096	Transaction ID : PR2552961251134 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) R URS SAE	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 II C. BRYANT, JEREMY, , ,	nitial) or Full O	rganization Name	Date of Receipt						
Mailing Address 4534 MYSTIQUE WAY	1		07 / D D / Y Y Y Y Y 2018						
City ROSWELL	State GA	Zip Code 30075-2087	Transaction ID : PR2552961351134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		70.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) CInt Mgmt NA Accts	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 525.00	P/R Deduction (\$35.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			482.60						
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 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 Incorporation	ted PAC (l	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle In COLEMAN, MICHAEL, , ,	nitial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3325 LACEBARK PINE STR	REET		07 31 Y Y Y Y Y 2018						
City LAS VEGAS	State NV	Zip Code 89129-8134	Transaction ID : PR2552961451134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		133.84						
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 ▼ 263.84	P/R Deduction (\$66.92 Bi-Weekly)						
Full Name of Individual (Last, First, Middle In B. EHLMAN, MICHAEL, , ,	nitial) or Full O	rganization Name	Date of Receipt						
Mailing Address 10051 VALLEY RIDGE COU	IRT		07 31 2018						
City LAS VEGAS	State NV	Zip Code 89148-7602	Transaction ID : PR2552962251134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		28.00						
Name of Employer (for Individual) Health Plan of Nevada		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 In C. FLANNERY, SCOTT, , ,	nitial) or Full O	rganization Name	Date of Receipt						
Mailing Address 8508 TRELADY CT			07 31 Y Y Y Y Y 2018						
City PLANO	State TX	Zip Code 75024-6827	Transaction ID : PR2552962351134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		496.00						
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 ▼ 2257.00	P/R Deduction (\$248.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)	, 		657.84						
TOTAL This Period (last page this line numbe	r only)								

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	×	H	11		11c	12				
Any information copied from such Reports a or for commercial purposes, other than using			erson fo			se of s						
UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P/	AC)									
Full Name of Individual (Last, First, Middl JAMES, GREGORY, , ,	e Initial) or Full O	rganization Name	Da	ate of	Recei	ipt						
Mailing Address 2323 KINGS POINT DRI	VE			07	/	D D D 31	/ Y	2018	Y			
City LARGO	State FL	Zip Code 33774-1009						6325113 is Period				
FEC ID number of contributing federal political committee.	С			nount				74.				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 1ed Dir		Me	mo Ite	em						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 589.28	P/R	: Dedu	ction	(\$37.3	3 Bi-We	ekly)				
Full Name of Individual (Last, First, Middl B. KIDAMBI, NARASIMHAN, , ,	e Initial) or Full O	rganization Name	Da	ate of	Recei	ipt						
Mailing Address 18477 85TH AVE N				07	/	31	/ Y	ү ү 2018	Y			
City MAPLE GROVE	State MN	Zip Code 55311-1663						6385113				
FEC ID number of contributing federal political committee.	С	C				Amount of Each Receipt this Period						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Bus Anlys		Me	mo Ite	em						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	P/R Deduction (\$20.00 Bi-Weekly)									
Full Name of Individual (Last, First, Middl C. LOVELADY, JOHN, , ,	e Initial) or Full O	rganization Name	Da	ate of	Recei	ipt						
Mailing Address 5378 BUENA VISTA DR			Γ	07	/	D D D 31	/ Y	2018	Ŷ			
City FRISCO	State TX	Zip Code 75034-2253						96425113 is Period				
FEC ID number of contributing federal political committee.	С				y		9	384.				
Name of Employer (for Individual) Optum Services, Inc	Occi VP (upation (for Individual) Dps		Me	mo Ite	em						
Receipt For: Primary General Other (specify)	Year-to-Date ▼ 2884.50	P/F	≀ Dedu	ction	(\$192.	30 Bi-W	/eekly)					
SUBTOTAL of Receipts This Page (optiona	l)						9	499.:	26			
TOTAL This Period (last page this line num	ber only)						-					

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			Use separate schedule(s)	(check onl	y one)				
	MIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a	11b	11c	12		
Any i	nformation copied from such Reports and Stat commercial purposes, other than using the na	ements ma	ay not be sold or used by any pe	rson for the	purpose of	15 of soliciting	16 contribut	ions	
	AME OF COMMITTEE (In Full)		address of any political committee			ITOITI SUCI	1 Commu	.	
	nitedHealth Group Incorporated	PAC (l	UnitedHealth Group PA	C)					
	ll Name of Individual (Last, First, Middle Initial IARTO, MICHELLE, , ,) or Full O	Organization Name	Date o	f Receipt				
Ma	ailing Address 149 WILLIAMSBURG COURT			M M 07	/ D		ү 2018	Y	
Cit Al	iy LBANY	State NY	Zip Code 12203-5502			: PR25529 Receipt th		4	
	C ID number of contributing deral political committee.	С				-	28.0	00	
Ur	ame of Employer (for Individual) hited HealthCare Services Inc		upation (for Individual) Govt Affs	м	emo Item				
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R Ded	luction (\$1	4.00 Bi-We	ekly)		
	II Name of Individual (Last, First, Middle Initial) or Full O	Organization Name	Date o	f Receipt				
Mailing Address 539 ROUTE 9P				м м 07	/ D 3		2018	Y	
Cit S/	ty ARATOGA SPRINGS	State NY	Zip Code 12866-7279			: PR25529 Receipt th		1	
	C ID number of contributing deral political committee.	С		92.30					
	ame of Employer (for Individual) ited HealthCare Services Inc	Occupation (for Individual) Dir Clnt Svc Acct Mgt			emo Item				
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 692.25	P/R Deduction (\$46.15 Bi-Weekly)					
	II Name of Individual (Last, First, Middle Initial) or Full O	Organization Name	Date o	f Receipt				
	ailing Address 2624 N HARTLAND COURT	1		07	/ D 3		2018 Y	Y	
Cit	ty HICAGO	State IL	Zip Code 60614-4955			: PR25529 Receipt th		4	
	C ID number of contributing deral political committee.	С				y	30.7	76	
Name of Employer (for Individual) United HealthCare Services Inc			upation (for Individual) Dir Acct Mgmt		lemo Item				
Re	eceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.70	P/R Dec	duction (\$1	5.38 Bi-We	eekly)		
SUB	TOTAL of Receipts This Page (optional)						151.0	06	
тот	AL This Period (last page this line number on	ly)	•••••			-			

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			13 14 15 16 1 erson for the purpose of soliciting contributions to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)		, see et ally pointour committee							
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle I A. PAULUS, LESLIE, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 305 E TUCKEY LN			07 31 Y Y Y Y Y						
City PHOENIX	State AZ	Zip Code 85012-1048	Transaction ID : PR2552965251134 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) I Dir	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. PEKA, GARY, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 8650 SOUTH FAIRWAY PC			07 31 2018						
City VICTORIA	State MN	Zip Code 55386-9630	Transaction ID : PR2552965351134 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) Six Sigma	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 POTTER, DONALD, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 116 FULLER LANE			07 31 2018						
City WINNETKA	State IL	Zip Code 60093-4213	Transaction ID : PR2552965451134 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 Business Development	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)			84.00						
TOTAL This Period (last page this line numbe	er only)								

FOR LINE NUMBER:

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		Use separate schedule(s)	(check on	ly one))					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		1b	11c	12			
Any information copied from such Reports and					se of s					
or for commercial purposes, other than using t	ne name and a	duress of any political committee	e to solicit co	ntributi	ions fro	m such	committe	e.		
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle A. SAMSEL, KRISTINE, , ,	Initial) or Full C	rganization Name	Date c	of Rece	eipt					
Mailing Address 91 WAVERLY RD			M N 07	/	D D D 31	/ Y	у у 2018	Ŷ		
City HUNTINGTON	State CT	Zip Code 06484-5835					65751134 s Period	1		
FEC ID number of contributing federal political committee.	С			1 - 1		-ge	28.0	0		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		lemo It	tem					
Receipt For: Primary General Other (specify) \mathbf{v}	Aggregate	Year-to-Date ▼ 210.00	P/R Dec	duction	(\$14.00) Bi-We	ekly)			
Full Name of Individual (Last, First, Middle B. STREIT, BARRY, , ,	Initial) or Full C	rganization Name	Date c	of Rece	eipt					
Mailing Address 5421 KELLOGG AVENUE			M N 07	1	D D D 31	/ Y	y y 2018	Ŷ		
City EDINA	State MN	Zip Code 55424-1604					66751134			
FEC ID number of contributing	_	33424-1004	Amour	It of Ea	ach Red	ceipt thi	s Period			
federal political committee.	C	C Occupation (for Individual) M&R Reg VP of SIs			153.84 Memo Item					
Name of Employer (for Individual) United HealthCare Services Inc					tem					
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify) ▼		, 1153.80	P/R Dec	P/R Deduction (\$76.92 Bi-Weekly)						
Full Name of Individual (Last, First, Middle TINKER, ANN, , ,	Initial) or Full C	rganization Name	Date c	of Rece	eipt					
Mailing Address 530 HUNTER FLAT STREE		7. 0.4	07	J L	31		2018			
City LAS VEGAS	State NV	Zip Code 89138-1110					6685113 s Period	4		
FEC ID number of contributing federal political committee.	С			. ,		y	28.0	0		
Name of Employer (for Individual) United HealthCare Services Inc	upation (for Individual) Compli		lemo li	tem						
Receipt For: Primary General Other (specify)	Year-to-Date ▼ 210.00	P/R Dec	duction	(\$14.00	0 Bi-We	ekly)				
SUBTOTAL of Receipts This Page (optional).				. ,		y	209.8	4		
TOTAL This Period (last page this line number	er only)					-11-				

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 1						
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle I WACKER, AARON, , ,	nitial) or Full O	rganization Name	Date of Receipt						
Mailing Address 4704 CAVAN ROAD			07 31 Y Y Y Y Y						
City MOUND	State MN	Zip Code 55364-1877	Transaction ID : PR2552967051134 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) Principal Engineer, TLCP	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. NAASZ, SCOTT, , ,	nitial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3311 WILDS RIDGE NW			07 31 Y Y Y Y Y						
City PRIOR LAKE	State MN	Zip Code 55372-4540	Transaction ID : PR2553474751134 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) Cust Svs	Memo Item						
Receipt For: Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$38.46 Bi-Weekly)						
Other (specify) ▼		, 576.90							
Full Name of Individual (Last, First, Middle I PROSKAUER, DANIEL, , ,	nitial) or Full O	rganization Name	Date of Receipt						
Mailing Address 240 DERBY STREET			07 / D D / Y Y Y Y 2018						
City NEWTON	State MA	Zip Code 02465-1006	Transaction ID : PR2553475051134 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) Fechnology	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)			143.38						
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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			Detailed Summary Page	×	11a 13		11	1b	_	11c	12	17
	information copied from such Reports and State or commercial purposes, other than using the na				for the		pos	se of	sol			
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated											
F A.	Full Name of Individual (Last, First, Middle Initial) RAYBURN, MONICA, , ,) or Full O	rganization Name		Date of	Re	€	ipt				
N	Aailing Address 5127 JACKSON PONDS CT				07 31 2018							
	City SUGAR LAND	State TX	Zip Code 77479-4656		Transaction ID : PR2553475151134 Amount of Each Receipt this Period							
	EC ID number of contributing ederal political committee.	С					- -	_		-9	78.	
С	Name of Employer (for Individual) Dptum Services, Inc		upation (for Individual) Gen Mgmt		Me	emo	o Ite	em				
R	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 585.00] P,	/R Ded	uctio	on	(\$39.(00	Bi-We	ekly)	
B	Full Name of Individual (Last, First, Middle Initial) THOMAS, RICHARD, , , Aailing Address, 5121 DUPONT, AVENUE, SOUTH		rganization Name		Date of		_	•				Y
_	Aailing Address 5121 DUPONT AVENUE SOUTH	State	Zip Code		07 31 2018							
	MINNEAPOLIS										7545113 s Period	4
	EC ID number of contributing ederal political committee.	С			194.00							00
0	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		M	emo	o Ite	em				
R	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1455.00] P/	P/R Deduction (\$97.00 Bi-Weekly)							
C	Full Name of Individual (Last, First, Middle Initial)) or Full O	rganization Name		Date of	Re	ecei	ipt				
_	Mailing Address 5201 KELLOGG AVENUE				07	J.	L	31	1		2018	
	City EDINA	State MN	Zip Code 55424-1304								7555113 s Period	4
	EC ID number of contributing ederal political committee.	С		Í						еч ин Л	384.	60
ι	Jame of Employer (for Individual) Jnited HealthCare Services Inc		upation (for Individual) Bus Initiv Clin Aff		M	emo	o It	èm				
R	Receipt For: Primary General Other (specify)	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)									
SU	BTOTAL of Receipts This Page (optional)			•			,		Ì	9	656.	30
то	TAL This Period (last page this line number only	y)		•			-		Ì	-		

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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		Use separate schedule(s)	(che	ck only	one	e)						
I LIVILLED REVEILIS		for each category of the Detailed Summary Page	×	11a 13		11b	11c 15	12	17			
Any information copied from such Reports and or for commercial purposes, other than using the				or the p	ourpo	ose of a	soliciting	contribu	tions			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle I A. ZERAFA, DANIEL, , ,	nitial) or Full C	rganization Name	C	Date of	Rec	eipt						
Mailing Address 61234 ADMIRAL DRIVE				^M 07	1	D D D 31	/ Y	ү ү 2018	Y			
City WASHINGTON TOWNSHIP	State MI	Zip Code 48094-1242	A					7575113 is Period	4			
FEC ID number of contributing federal political committee.	С							28.	00			
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) IT		Me	emo	Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/	R Dedu	uctior	n (\$14.(00 Bi-We	ekly)				
Full Name of Individual (Last, First, Middle I B. FLAGSTAD, KARSTEN, , ,	nitial) or Full C	rganization Name		Date of	Rec	eipt						
Mailing Address 1002 141ST LANE NE				^M 07	/	D D 31	/ Y	y y 2018	Y			
City HAM LAKE	State MN	Zip Code 55304-6770						1305113	4			
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) Info Tech		Me	emo	Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/I	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I MOORE, THOMAS, , ,	nitial) or Full C	rganization Name		Date of	Rec	eipt						
Mailing Address 226 5TH AVENUE NORTH #805 City	State	Zip Code	_ [07 T rong	/	31		2018				
ST PETERSBURG	FL	33701-2959	A					01325113 is Period	4			
FEC ID number of contributing federal political committee.	С				,		, <u>,</u>	28.	00			
Name of Employer (for Individual) Optum Services, Inc	um Services, Inc Dir, SIs Care Mgmt & Del			Me	emo	ltem						
Receipt For: Primary General Other (specify)	Year-to-Date ▼ 210.00	P/	R Dedu	uctior	n (\$14.(00 Bi-We	ekly)					
SUBTOTAL of Receipts This Page (optional)								440.	60			
TOTAL This Period (last page this line numbe	r only)											

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 12		11b	11c	12	
	y information copied from such Reports and Sta for commercial purposes, other than using the r									
$\overline{)}$	NAME OF COMMITTEE (In Full)			\sim						
/	UnitedHealth Group Incorporated	a PAC (l	JnitedHealth Group PA	(C)						
Α.	Full Name of Individual (Last, First, Middle Initia REIDY, GREGORY, , ,	al) or Full O	rganization Name	D	ate of	Re	ceipt			
	Mailing Address 4836 W SUNSET BLVD				м м 07	/	D D D 31	/ Y	2018	Y
	City TAMPA	State FL	Zip Code						01335113	
		1.1	33629-6448	_ A	mount	of	Each Re	eceipt th	nis Perioc	1
	FEC ID number of contributing federal political committee.	С		Ľ					76	.92
	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 ▼ 576.90	P/I	R Ded	uctic	on (\$38.4	46 Bi-We	eekly)	
в.	Full Name of Individual (Last, First, Middle Initia ALEXANDER, JOY, , ,	al) or Full O	rganization Name	D	ate of	Re	ceipt			
	Mailing Address 5116 NORTH TIOGA WAY			м м 07	/	D D D 31	/ Y	2018	Y	
	City LAS VEGAS	State NV	Zip Code 89149-5830				-		06415113	
			A	mount	OT	Each Re	eceipt tr	nis Perioc	1	
	FEC ID number of contributing federal political committee.	C			28.00					
	Name of Employer (for Individual) Health Plan of Nevada	Occi Dir I		Me	emo	Item				
	Receipt For:	Aggregate	Year-to-Date 🔻	7						
	Other (specify) ▼		210.00	P/R Deduction (\$14.00 Bi-Weekly)						
<u>с.</u>	Full Name of Individual (Last, First, Middle Initia BENNETT, JIM, , ,	al) or Full O	rganization Name	D	ate of	Re	ceipt			
	Mailing Address 3724 PINE TIP ROAD				^M 07	/	31	/ Y	2018	Ŷ
	City TALLAHASSEE	State FL	Zip Code 32312-1016	A					0642511: nis Perioc	
	FEC ID number of contributing federal political committee.	С					,	,		.00
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ssc Gen Counsel		Me	emo	Item			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.00	P/	R Ded	uctio	on (\$14.)	00 Bi-W	eekly)	
s	UBTOTAL of Receipts This Page (optional)						9	. ,	132.	92
т	OTAL This Period (last page this line number or	nly)		Ī						

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					
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)		Inited Lealth Crown D						
UnitedHealth Group Incorpora	ated PAC (I	United Health Group P	AC)					
Full Name of Individual (Last, First, Middle CLUTE, DANIEL, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 7756 N 85TH STREET			07 31 2018					
City OMAHA	State NE	Zip Code 68122-1281	Transaction ID : PR2560064451134 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) d 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 C	organization Name	Date of Receipt					
Mailing Address 36 MAYFAIR ROAD			07 31 2018					
City WYNANTSKILL	State NY	Zip Code 12198-8018	Transaction ID : PR2560064851134 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) 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 C	organization Name	Date of Receipt					
Mailing Address 72 MIDNIGHT RIDGE DR			07 31 2018					
City LAS VEGAS	State NV	Zip Code 89135-1680	Transaction ID : PR2560064951134 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: Aggregate Year-to-Date ▼ Primary General Other (specify) 28			P/R Deduction (\$192.30 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			489.52					
TOTAL This Period (last page this line numb	er only)							

SCHEDULE A (FEC Form 3X) _____ _

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 72 OF

		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1					
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorporat	ted PAC (l	JnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, Middle Ir A. JONES, JERI, , ,	nitial) or Full O	rganization Name	Date of Receipt					
Mailing Address 2932 E MADISON VISTAS E	DR		07 31 2018					
City	State	Zip Code	Transaction ID : PR2560065151134					
PHOENIX	AZ	85016-4981	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		192.30					
Name of Employer (for Individual)		upation (for Individual)	Memo Item					
United HealthCare Services Inc	Reg	n CEO	_					
Receipt For:	Aggregate	Year-to-Date ▼						
Other (specify) V		1057.65	P/R Deduction (\$96.15 Bi-Weekly)					
Full Name of Individual (Last, First, Middle Ir KUNEMUND, GREGG , , ,	nitial) or Full O	rganization Name	Date of Receipt					
Mailing Address 9040 RIVERBEND MANOR			07 / D D / Y Y Y Y 2018					
City ALPHARETTA	State GA	Zip Code 30022-1813	Transaction ID : PR2560065351134					
		50022-1015	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		455.40					
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) ▼		2494.65	P/R Deduction (\$227.70 Bi-Weekly)					
Full Name of Individual (Last, First, Middle Ir C. LIPPMAN, SHELDON, , ,	hitial) or Full O	rganization Name	Date of Receipt					
Mailing Address 55 CLIFFIELD ROAD			07 31 Y Y Y Y Y 2018					
City	State NY	Zip Code	Transaction ID : PR2560065451134					
BEDFORD		10506-1210	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	Occu Med	upation (for Individual) Dir	Memo Item					
Receipt For: Primary General	Aggregate	Year-to-Date ▼ 1455.00	P/R Deduction (\$97.00 Bi-Weekly)					
Other (specify)		1455.00						
SUBTOTAL of Receipts This Page (optional)			841.70					
TOTAL This Period (last page this line number	r only)							

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			Use separate schedule(s)			(check only one)							
11			for each category of the Detailed Summary Page		4 11a		11b	11c	12		747		
	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 LUCHT, JEFFREY, , ,	al) or Full O	rganization Name		Date of	Re	eceipt						
	Mailing Address 33 FOUR SEASONS DRIVE				м м 07	1	31) / Y	y y 2018	Y			
	City ALTON	State NH	Zip Code 03809-4872					PR25600 leceipt th			_		
FEC ID number of contributing federal political committee.									194	4.00			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Act Underwriting		Me	emc	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1455.00	P/R Deduction (\$97.00 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initia MARONEY, KEVIN, , ,	al) or Full Oi	rganization Name		Date of	Re	eceipt						
	Mailing Address 5052 NORMAN DRIVE				м м 07	/	31	/ Y	2018	Y			
	City MINNETONKA	State MN	Zip Code 55345-4636					PR25600 leceipt th		-			
	FEC ID number of contributing federal political committee.	Occupation (for Individual) Assc Gen Counsel			28.00								
	Name of Employer (for Individual) United HealthCare Services Inc				Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$14.00 Bi-Weekly)										
С.	Full Name of Individual (Last, First, Middle Initia MILICH, DAVID, , ,	al) or Full O	rganization Name		Date of	Re	eceipt						
	Mailing Address 2702 BIRCHMERE COURT				07 ^M	1	31		2018				
	City KATY	State TX	Zip Code 77450-1303				-	PR2560		-			
	FEC ID number of contributing federal political committee.	С			<u> </u>		,	,	455	5.40			
	Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) HIth Plan CEO				Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2494.72] '	P/R Ded	ucti	on (\$22	7.70 Bi-W	/eekly)				
s	UBTOTAL of Receipts This Page (optional)			•			, ,	. ,	677	7.40			
т	OTAL This Period (last page this line number or	וy)		•									

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PAGE 74 OF

		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using th			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 O'BRYANT, WILLIAM, , ,	nitial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3425 CHICKASAW			07 31 Y Y Y Y Y						
City SAN ANTONIO	State TX	Zip Code 78261-2139	Transaction ID : PR2560066151134 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) <i>I</i> led Dir	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 Ir B. VAIL, DENISE, , ,	nitial) or Full O	rganization Name	Date of Receipt						
Mailing Address 35 CLEVELAND AVENUE			07 / D D / Y Y Y Y 2018						
City	State NY	Zip Code	Transaction ID : PR2560066851134						
SAYVILLE		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:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		210.00	P/R Deduction (\$14.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle Ir C. DICKMAN, KRISTA, , ,	nitial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2533 ONYX DRIVE			07 31 / Y Y Y Y Y 07 31 2018						
City SHAKOPEE	State MN	Zip Code 55379-2770	Transaction ID : PR2560398151134 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) roj Mgr III	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)			. 84.00						
TOTAL This Period (last page this line number	r 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 t	Statements mathematic here and a	L ay not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle A. KOREAN, GEORGE, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 23426 VILLENA			07 31 2018							
City MISSION VIEJO	State CA	Zip Code 92692-1861	Transaction ID : PR2560398551134 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) Act Cnslt	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 NOEL, TIMOTHY, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 4316 FREMONT AVENUE			07 / D D / Y Y Y Y 2018							
	State MN	Zip Code	Transaction ID : PR2560398851134							
MINNEAPOLIS		55409-1721	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Prd	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. WULF, ROBERT, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 622 N 11TH ST			07 / D D / Y Y Y Y 07 31 2018							
City WAUSAU	State WI	Zip Code 54403-5004	Transaction ID : PR2560398951134 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) Gen Mgmt	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).			440.68							
TOTAL This Period (last page this line number	er only)									

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page							
			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 Incorp	orated PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Mic CRONIN, JAMES, , ,	Idle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 241 WALLACE RD			07 31 / Y Y Y Y Y						
City BEDFORD	State NH	Zip Code 03110-5144	Transaction ID : PR2560821151134 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) ? 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, Mic B. O'BRIEN, PATRICK, , ,	Idle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 33 BARRINGTON DRI	1		07 / D D / Y Y Y Y 2018						
City BEDFORD	State NH	Zip Code 03110-5601	Transaction ID : PR2560821451134 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) 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, Mic C. PERO, MARIE, , ,	Idle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 516 APPLE LANE			07 / D D / Y Y Y Y Y Y Y 2018 2018						
City HARLEYSVILLE	State PA	Zip Code 19438-2549	Transaction ID : PR2560821551134 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	Occi Dir F	upation (for Individual) Prod	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 (optio	nal)		440.60						
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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 Sta for commercial purposes, other than using the r			rson for the purpose of soliciting contributions							
$\overline{)}$	NAME OF COMMITTEE (In Full)										
/	UnitedHealth Group Incorporated	a PAC (l	UnitedHealth Group PA	C)							
A.	Full Name of Individual (Last, First, Middle Initia THOMPSON, CHARLES, , ,	al) or Full O	Organization Name	Date of Receipt							
	Mailing Address 5217 EDGEWOOD ROAD			07 31 2018							
	City LITTLE ROCK	State AR	Zip Code 72207-5413	Transaction ID : PR2561358951134 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) 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 LUND, BRIAN, , ,	al) or Full O	Organization Name	Date of Receipt							
	Mailing Address 464 EAST NORTH AVE			07 31 2018							
	City GRANTSBURG	State WI	Zip Code 54840-7423	Transaction ID : PR2561457651134 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) Tax	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 585.00	P/R Deduction (\$39.00 Bi-Weekly)							
С.	Full Name of Individual (Last, First, Middle Initia CAVANAUGH, LARRY, , ,	al) or Full O	Organization Name	Date of Receipt							
	Mailing Address 520 NE 20TH ST # 1010			07 / D D / Y Y Y Y 2018							
	City WILTON MANORS	State FL	Zip Code 33305-2162	Transaction ID : PR2563211051134 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) Ben Govt Dntl Sls Mgr	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 585.00	P/R Deduction (\$39.00 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)		····· •	540.60							
т	OTAL This Period (last page this line number or	וy)	•								

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	_		
	y information copied from such Reports and Stat for commercial purposes, other than using the na												
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated								3001				
A.	Full Name of Individual (Last, First, Middle Initial MACKENZIE, ANDREW, , ,) or Full C	Organization Name	D	Date of Receipt								
	Mailing Address 1912 IRVING AVE S				м м 07	/	31		/ Y	у у 2018	Y		
	City MINNEAPOLIS	State MN	Zip Code 55403-2823							29715113			
			55405-2625	_ A	mount	of	Each	Rec	eipt th	is Perioc			
	FEC ID number of contributing federal political committee.	С		Į Ļ	_	-	-	_		384	60		
	Name of Employer (for Individual)	Occ	upation (for Individual)	1 [Me	emo	Item						
	United HealthCare Services Inc	Bus	Segment CMO		-								
	Receipt For:	Aggregate	Year-to-Date V	_				• -		, ,, ,			
	Other (specify) ▼		2884.50	P/I	R Dedi	uctio	on (\$19	92.3	30 Bi-W	/eekly)			
В.	Full Name of Individual (Last, First, Middle Initial, DAMATO, ELLEN, , ,	ne of Individual (Last, First, Middle Initial) or Full Organization Name ATO, ELLEN, , ,											
	Mailing Address 1300 DALHART DRIVE				м м 07	1	3		/ Y	2018	Y		
	City	State	Zip Code		Trans	acti	on ID	: PF	25648	80225113	4		
	ALLEN	TX	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) Ntwk Contrctng		Me	emo	ltem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/f	R Dedu	uctic	on (\$14	4.00) Bi-We	ekly)			
с.	Full Name of Individual (Last, First, Middle Initial, WILLSON, JOSH, , ,) or Full C	Organization Name		ate of	Re	ceipt						
	Mailing Address 201 ADAMS CT				^M 07	/	D 3 [,]		/ Y	2018	Y		
	City	State TX	Zip Code							8025511			
	COLLEYVILLE		76034-6811	A	mount	of	Each	Rec	eipt th	is Perioc			
	FEC ID number of contributing federal political committee.	С					y		y	76	92		
	Name of Employer (for Individual)	Occ	upation (for Individual)	1 [Me	emo	tem						
	United HealthCare Services Inc	RVF	SLS SB and Spec Ben										
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/	R Ded	uctio	on (\$3	8.46	6 Bi-We	eekly)			
s	UBTOTAL of Receipts This Page (optional)		•••••			_	,		9	489.	52		
Т	OTAL This Period (last page this line number onl	y)	••••••								<u> </u>		

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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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 Si	tatements m	av not be sold or used by any pe	13 14 15 16 17							
or for commercial purposes, other than using the										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	JnitedHealth Group PA	.C)							
Full Name of Individual (Last, First, Middle Init A. CARLSON, CHRISTOPHER, , ,	Name of Individual (Last, First, Middle Initial) or Full Organization Name ARLSON, CHRISTOPHER, , ,									
Mailing Address 10618 WEST RIVER ROAD			07 31 2018							
City	State	Zip Code	Transaction ID : PR2564802651134							
BROOKLYN PARK	MN	55443-1233	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) Cnsmr & Cust Experience	Memo Item							
Receipt For:		Year-to-Date V	-							
Primary General Other (specify) ▼		2884.50	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle Init B. HANSEN, PAUL, , ,	tial) or Full C	rganization Name	Date of Receipt							
Mailing Address 18430 62ND PLACE NORTH			07 31 2018							
City	State	Zip Code	Transaction ID : PR2564802751134							
MAPLE GROVE	MN	55311-4585	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		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, Middle Init C. GOODWIN, MARYELLEN, , ,	tial) or Full C	rganization Name	Date of Receipt							
Mailing Address 3216 PLAYERS VIEW CIRCLI	E		07 31 2018							
City	State	Zip Code	Transaction ID : PR2564802951134							
LONGWOOD	FL	32779-3154	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.00							
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item							
United HealthCare Services Inc	KAV	/P Acct Mgmt								
Receipt For:	Aggregate	Year-to-Date 🔻								
Other (specify)		210.00	P/R Deduction (\$14.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			606.60							
TOTAL This Period (last page this line number of										

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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	INIZED RECEIPTS		Detailed Summary Page	×	11a		11b	o 🗌	11c	12								
			Setallog outlining rugo		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, KENNY, KATHERINE, , ,	Individual (Last, First, Middle Initial) or Full Organization Name																
	Mailing Address 22408 FITZGERALD DRIVE				07 31 Y Y Y Y													
	City LAYTONSVILLE	State MD	Zip Code 20882-2301	A			-			80325113 nis Period	4							
	FEC ID number of contributing federal political committee.	С			_		-		-	78.	00							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP of Acct Mgmt		Me	emo	b Ite	m										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 585.00	P/	'R Dedu	uctio	on (S	\$39.00	0 Bi-We	eekly)								
в.	MARDEN, PAUL, , ,										Date of Receipt							
	Mailing Address 718 HICKORY HILL RD								07 31 2018									
	City FRANKLIN LAKES	State NJ	Zip Code 07417-1707		Transaction ID : PR2564803351134 Amount of Each Receipt this Period 384.60													
	FEC ID number of contributing federal political committee.	С																
	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 Dedu	uctic	on (\$	\$192.3	30 Bi-W	/eekly)								
c.	Full Name of Individual (Last, First, Middle Initial)) or Full O	rganization Name		Date of	Re	eceip	ot										
	Mailing Address 5004 ARDEN AVE				м м 07	/		31	/ Y	2018								
	City EDINA	State MN	Zip Code 55424-1314	A						80345113 nis Period	4							
	FEC ID number of contributing federal political committee.	С					9		y	384.	60							
	Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Reg	upation (for Individual) n CEO		Me	emo	o Ite	em										
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P/	/R Dedi	uctio	on (:	\$192.:	30 Bi-V	Veekly)								
s	UBTOTAL of Receipts This Page (optional)		·····				,		y	847.:	20							
т	OTAL This Period (last page this line number onl	y)	•				-		-9-									

SCHEDULE A (FEC Form 3X) DEAEIDTA

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)						
ILEIVIIZED KEGEIPIS		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 (l	JnitedHealth Group P/	4C)						
Full Name of Individual (Last, First, Middle BELLMAN, MARK, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 5601 VAN WINKLE LN			M M / D D / Y Y Y Y Y 07 31 2018						
City AUSTIN	State TX	Zip Code 78739-1694	Transaction ID : PR2564803551134 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) VP SIs Acct Mgmt	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. WRIGHT, LISA, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 6 VOLERRAN PATH LAN	E		07 31 2018						
City MISSOURI CITY	State TX	Zip Code 77459-1167	Transaction ID : PR2564803751134 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) cc Dir	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. O'HARE, TAMMY, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2420 SAINT GEORGE W	1		07 / D D / Y Y Y Y Y 2018						
City BROOKEVILLE	State MD	Zip Code 20833-3265	Transaction ID : PR2564803951134 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) /P SIs	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 585.00	P/R Deduction (\$39.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optiona			134.00						
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 only one)
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
			erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group PA	AC)
Full Name of Individual (Last, First, Middle WICKS, TIMOTHY, , ,	e Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 2600 WEST LAFAYETTE PO BOX 352	ROAD		07 31 / Y Y Y Y Y 2018
City WAYZATA	State MN	Zip Code 55391-0352	Transaction ID : PR2565448651134 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) Group CFO	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 CARTER, WILLIAM, , ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address PO BOX 920679			07 / D D / Y Y Y Y Y 2018
City	State	Zip Code	Transaction ID : PR2565448751134
HOUSTON	ТХ	77292-0679	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) VP SIs Acct Mgmt	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 CRAIG, DONNA, , ,	e Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 10761 INDEPENDENCE			07 / D D / Y Y Y Y 2018
City CARMEL	State IN	Zip Code 46032-9333	Transaction ID : PR2565448851134 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	Dir (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))		489.52
TOTAL This Period (last page this line numl	per 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						
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 KUNST, THOMAS, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 4872 103RD STREET			07 31 Y Y Y Y Y 07 31 2018						
City PLEASANT PRAIRIE	State WI	Zip Code 53158-6516	Transaction ID : PR2566302151134 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 SIs RVP 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 B. MANSUKHANI, NEIL, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 4215 LAUREL RIDGE CIRC			07 / D D / Y Y Y Y Y 2018						
City WESTON	State FL	Zip Code 33331-4012	Transaction ID : PR2567129451134						
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) PEO SIs	Memo Item						
Receipt For:		Year-to-Date ▼	-						
Other (specify) ▼		, 210.00	P/R Deduction (\$14.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle ZAMORE, DENISE, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 180 FELT ROAD			07 31 Y Y Y Y Y 2018						
City SOUTH WINDSOR	State CT	Zip Code 06074-3864	Transaction ID : PR2567129551134 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)						
SUBTOTAL of Receipts This Page (optional).			133.00						
TOTAL This Period (last page this line number	er only)								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 84 OF

		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	11b	11c	12	_		
Any information copied from such Reports and or for commercial purposes, other than using the									
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorporat	ed PAC (l	JnitedHealth Group PA	C)						
Full Name of Individual (Last, First, Middle Ir ARNONE, WENDY, , ,	nitial) or Full C	rganization Name	Date of	Receipt					
Mailing Address 5243 E DESERT PARK LAN	E		M M 07	/ D D 31	/ Y	Y Y 2018	Y		
City PARADISE VALLEY	State AZ	Zip Code 85253-3015		action ID : P of Each Re			4		
FEC ID number of contributing federal political committee.	С			-95-	-	384.6	50		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In CEO	Me	emo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2692.20	P/R Dedu	uction (\$192.	30 Bi-W	eekly)			
Full Name of Individual (Last, First, Middle Ir B. PARRILLO, CHRISTOPHER, , ,	nitial) or Full C	rganization Name	Date of	Receipt					
Mailing Address 9501 WEXCROFT DRIVE			M M 07	/ D D 31	/ Y	y y 2018	Y		
City BRENTWOOD	State TN	Zip Code 37027-3824		of Each Re			l .		
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Me	mo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Dedu	iction (\$38.4	6 Bi-We	ekly)			
Full Name of Individual (Last, First, Middle Ir MOYER, BRUCE, , ,	nitial) or Full C	rganization Name	Date of	Receipt					
Mailing Address 4242 BROADWAY STREET #802 City	State	Zip Code	07	/ 31		2018			
SAN ANTONIO	TX	78209-6463		of Each Re			4		
FEC ID number of contributing federal political committee.	С			y	9	78.0	00		
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Me	emo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 585.00	P/R Dedu	uction (\$39.0	0 Bi-We	ekly)			
SUBTOTAL of Receipts This Page (optional)				,	y	539.5	2		
TOTAL This Period (last page this line number	only)								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 85 OF

	-	Use separate schedule(s)	(check only one)	heck only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page		1c 12	 					
Any information copied from such Reports an or for commercial purposes, other than using			son for the purpose of soli							
NAME OF COMMITTEE (In Full)	the name and a			such committee.						
UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group PA	C)							
Full Name of Individual (Last, First, Middle A. HINTON, DUSTIN, , ,	,	rganization Name	Date of Receipt							
Mailing Address W132N6475 MARACH RE)		07 / 31 /	Y Y Y Y 2018]					
City MENOMONEE FALLS	State WI	Zip Code 53051-6085	Transaction ID : PR2 Amount of Each Rece							
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 ROBINSON, MARCUS, , ,	e Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 590 SPENDER TRACE			07 / D D /	2018 Y						
City DUNWOODY	State GA	Zip Code 30350-5018	Transaction ID : PR2							
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) VP SIs	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. JACQUET, SHAUN, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 4332 FOREST RIDGE DF	RIVE		07 / D D /	2018 Y						
City SUAMICO	State WI	Zip Code 54313-8557	Transaction ID : PR2 Amount of Each Rece							
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 I	Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)		,	440.60						
TOTAL This Period (last page this line numl	per only)									

Use separate schedule(s)

FOR LINE NUMBER:

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	Use separate schedule(s)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17				
			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	ated PAC (I	JnitedHealth Group P	AC)				
Full Name of Individual (Last, First, Middle SMITH, THOMAS, , ,	Initial) or Full C	Organization Name	Date of Receipt				
Mailing Address 1631 SAND LAKE ROAD SUITE 224			07 31 Y Y Y Y Y 07 31 2018				
City ONALASKA	State WI	Zip Code 54650-2481	Transaction ID : PR2572589551134 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)				
Full Name of Individual (Last, First, Middle CARLSON, KEVIN, , ,	Initial) or Full C	organization Name	Date of Receipt				
Mailing Address 4511 BROWNDALE AVEN			07 31 Y Y Y Y Y 2018				
City EDINA	State MN	Zip Code 55424-1142	Transaction ID : PR2572590051134 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) Ntwk Contrctng	Memo Item				
Receipt For: Primary General	Aggregate	Year-to-Date V	P/R Deduction (\$96.15 Bi-Weekly)				
Other (specify) v		, 1442,25					
Full Name of Individual (Last, First, Middle C. WACKER, CHARLES, , ,	Initial) or Full C	Organization Name	Date of Receipt				
Mailing Address 2747 WEST VIEW DRIVE		1	07 / D D / Y Y Y Y Y 2018				
City NEW PRAGUE	State MN	Zip Code 56071-8989	Transaction ID : PR2572590151134 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) solution Sales Executive	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)			248.30				
TOTAL This Period (last page this line numb	per only)						

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		Use separate schedule(s)	(check	only	one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 1	H	11k		11c	12	·
Any information copied from such Reports and or for commercial purposes, other than using			erson for						
				t com	Indutio		III SUCI	commu	
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle BECK, JOANNE, , ,	Initial) or Full C	organization Name	Da	te of	Receip	ot			
Mailing Address 3200 N LAKE SHORE DR UNIT 2306			M	07 ^M	/ D	^р 31	/ Y	ү ү 2018	Y
City CHICAGO	State IL	Zip Code 60657-3929						9035113 s Period	4
FEC ID number of contributing federal political committee.	С				- F		- j -	28.0	08
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng		Mei	no Ite	m			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R	Dedu	ction (\$14.0	4 Bi-We	ekly)	
Full Name of Individual (Last, First, Middle OBRIEN, CHRISTINE, , ,	Initial) or Full C	organization Name	Da	te of	Receip	ot			
Mailing Address 931 FRENCH ST			M	07	/ D	^р 31	/ Y	y y 2018	Y
City NEW ORLEANS	State LA	Zip Code 70124-3806						9065113	4
FEC ID number of contributing	C			Amount of Each Receipt this Period					
federal political committee.		Occupation (for Individual) KA VP SIs Acct Mgmt			Memo Item				
Name of Employer (for Individual) United HealthCare Services Inc					no ite	m			
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) ▼		210.00	P/R	Dedu	ction (S	\$14.00	0 Bi-We	ekly)	
Full Name of Individual (Last, First, Middle MILLER, KIMBERLEY, , ,	Initial) or Full C	organization Name	Da	te of	Receip	ot			
Mailing Address 16 CELONOVA PLACE		1	- L	07 ^M	- L	31		2018	
City FOOTHILL RANCH	State CA	Zip Code 92610-1942						9125113 s Period	4
FEC ID number of contributing federal political committee.	С				y		g	28.0	00
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Jnderwriting		Me	mo Ite	m			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.00	P/R	Dedu	ction (\$14.0	0 Bi-We	ekly)	
SUBTOTAL of Receipts This Page (optional).					y		,	84.0	08
TOTAL This Period (last page this line number	er 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	× 11		11b	11c	12	<u> </u>		
Any information copied from such Reports and or for commercial purposes, other than using th				he pu						
NAME OF COMMITTEE (In Full)										
VinitedHealth Group Incorporat	ted PAC (l	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle II WIFFLER, THOMAS, , ,	nitial) or Full O	rganization Name	Date	e of R	eceipt					
Mailing Address 1421 SOMERFIELD DRIVE			0	7 7	/ D 31		Y Y 2018	Y		
City BOLINGBROOK	State IL	Zip Code 60490-3207					99275113 iis Period	4		
FEC ID number of contributing federal political committee.	С				-g=- 1		384.6	60		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Unit CEO		Mem	io 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 II GOETZ, MERRITT, David, ,	nitial) or Full O	rganization Name	Date	e of R	eceipt					
Mailing Address 505 CHURCH STREET APT 1704		Zip Code	C	7	31) / Y	2018	Y		
City NASHVILLE	State TN		Transaction ID : PR2573477351134 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	Occupation (for Individual) VP CInt Svc Acct Mgt			Mem	io Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R D	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle In C. QUINN, PATRICK, , ,	nitial) or Full O	rganization Name	Date	e of R	eceipt					
Mailing Address 16933 TODD EVAN TRAIL			C	07	31		2018			
City CHESTERFIELD	State MO	Zip Code 63005-4641					51875113 iis Period	4		
FEC ID number of contributing federal political committee.	С				y	,	222.0	00		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Merr	o Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1277.22	P/R [Deduc	tion (\$11	1.00 Bi-V	Veekly)			
SUBTOTAL of Receipts This Page (optional)					, .		991.2	20		
TOTAL This Period (last page this line numbe	r only)									

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	-	Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using			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 GROZDANICH, PATTI, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 12540 ROBINSON ST APT 6201			07 31 2018						
City OVERLAND PARK	State KS	Zip Code 66213-1418	Transaction ID : PR2573518851134 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	United HealthCare Services Inc Dir Ntwk Contrctng								
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. BENSON, MICHAEL, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 2206 EAGLE VALLEY LN			07 / D D / Y Y Y Y 07 31 2018						
City WAUSAU	State WI	Zip Code 54403-8154	Transaction ID : PR2573518951134						
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) sc Dir SIs Ops	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 216.30	P/R Deduction (\$14.42 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. SHAW, AMY, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 11844 DUNHILL ROAD			07 31 2018						
City EDEN PRAIRIE	State MN	Zip Code 55344-3238	Transaction ID : PR2574971351134 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	Occ VP I	upation (for Individual) Fin	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)			133.84						
TOTAL This Period (last page this line numb	er only)								

FOR LINE NUMBER:

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	Use separate schedule(s)			
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17	
Any information copied from such Reports ar or for commercial purposes, other than using	d Statements ma the name and a	I ay not be sold or used by any p address of any political committe	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 (I	JnitedHealth Group P/	AC)	
Full Name of Individual (Last, First, Middle BUCCHIANERI, STEVEN, , ,	Initial) or Full C	Organization Name	Date of Receipt	
Mailing Address 118 GOVERNORS			07 31 2018	
City MEDFORD	State MA	Zip Code 02155-3018	Transaction ID : PR2574977151134 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) Med Clin Ops	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. RICHARD, DARYL, , ,	Initial) or Full C	organization Name	Date of Receipt	
Mailing Address 24 WEST RIDGE DRIVE			07 / D D / Y Y Y Y Y 2018	
City WEST HARTFORD	State CT	Zip Code 06117-2065	Transaction ID : PR2574979051134	
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) Comm	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. HARE, LESLIE, , ,	Initial) or Full C	organization Name	Date of Receipt	
Mailing Address 9029 SHEEP RANCH CT			07 31 Y Y Y Y Y Y 2018	
City LAS VEGAS	State NV	Zip Code 89143-5432	Transaction ID : PR2574979451134 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		28.00	
Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) Clms	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)		143.38	
TOTAL This Period (last page this line num	per only)			

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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		
An	y information copied from such Reports and S	statements ma	Ay not be sold or used by any p	erson f	13 or the	pur	14 pose of	15 soliciting	g contribu	ions	
or	for commercial purposes, other than using the	e name and a	ddress of any political committe	e to sol	licit cor	מוזזר	outions	from suc	n committ	ee.	
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	JnitedHealth Group P	AC)							
Α.	Full Name of Individual (Last, First, Middle Ini MASTERS, SCOTT, , ,	tial) or Full C	rganization Name		Date of	Re	eceipt				
	Mailing Address 1894 VILLAGE GLEN DRIVE				^м 07	1	D 1	D / Y	2018	Y	
	City SAINT JOHNS	State FL	Zip Code 32259-9215						97965113 nis Period	4	
	FEC ID number of contributing federal political committee.	С							77.	00	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clms		Me	emc	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 308.00	P/	/R Ded	uctio	on (\$38	.50 Bi-W	eekly)		
в.	Full Name of Individual (Last, First, Middle Ini SIMPSON, TRENT, , ,	tial) or Full C	rganization Name		Date of	Re	eceipt				
	Mailing Address 3111 NORCREST AVE N				07 / D D / Y Y Y Y 07 31 2018						
	City STILLWATER	State MN	Zip Code 55082-1779		Transaction ID : PR2574985051134 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С			Amount	. 01			76.9	92	
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		P/R Deduction (\$38.46 Bi-Weekly)						
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 576.90] P/							
с.	Full Name of Individual (Last, First, Middle Ini CIANFROCCO, HEATHER, , ,	tial) or Full C	rganization Name		Date of	Re	eceipt				
	Mailing Address 4478 MIDDLE ROAD				07	1	31	_ L	ү ү 2018		
	City ALLISON PARK	State PA	Zip Code 15101-1110	A			-	-	98625113	4	
	FEC ID number of contributing federal political committee.	С					, .	.,	384.	60	
	Name of Employer (for Individual) United HealthCare Services Inc					emo	ttem				
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 2884.50					on (\$19	2.30 Bi-V	Veekly)		
s	UBTOTAL of Receipts This Page (optional)						, ,		538.	52	
т	OTAL This Period (last page this line number	only)									

Use separate schedule(s)

FOR LINE NUMBER:

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			for each category of the Detailed Summary Page	×	11a 13		11	-	11c 15		2 6	17
	y information copied from such Reports and State for commercial purposes, other than using the na				or the p		pos	e of s	soliciting	g conti	ributio	ons
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	UnitedHealth Group PA	C)								
Α.	Full Name of Individual (Last, First, Middle Initial) KAPLAN-LEWIS, DEBRA, , ,	or Full C	Organization Name	D	ate of	Re	ecei	pt				
	Mailing Address 41 WILDWOOD DR	Otata	Zin Onda	4 6	м м 07	/	L	31	/ Y	201	-	ſ
	City SOUTHBOROUGH	State MA	Zip Code 01772-1989	Transaction ID : PR2574986951134 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			mount		La				884.6)
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	1	Memo Item							
	Dessist Fem		Year-to-Date ▼ 2884.50	P/F	R Dedu	uctic	on ((\$192.	.30 Bi-V	Veekly	')	
B.	Full Name of Individual (Last, First, Middle Initial) BURNETT, JAMIE, , ,	organization Name	D	ate of	Re	ecei	pt					
	Mailing Address 4625 EWING AVENUE SOUTH		Zip Code	07 / D D / Y Y Y Y 2018								
	City MINNEAPOLIS	State MN				-		PR2574				
	FEC ID number of contributing federal political committee.	s a la l							- 7		78.0)
	Name of Employer (for Individual) Optum Services, Inc	upation (for Individual) IT		Me	emo) Ite	em					
	Receipt For: A Primary General Other (specify) ▼	P/F	R Dedu	ıctio	on (\$39.0	0 Bi-We	ekly)				
с.	Full Name of Individual (Last, First, Middle Initial) LANG JACOBSEN, HEATHER, , ,	or Full C	Organization Name	D	ate of	Re	ecei	pt				
	Mailing Address 11382 MOUNT CURVE RD				07	/	Ľ	31	/ Y	ү 201		ſ
	City EDEN PRAIRIE	State MN	Zip Code 55347-2918						PR2574			
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period 76.92					2		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) uty Gen Counsel Mgr		Me	emo	o Ite	em				
	Receipt For: A Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/f	R Dedu	uctio	on ((\$38.4	16 Bi-W	eekly)		
s	UBTOTAL of Receipts This Page (optional)									5	39.52	2
Т	OTAL This Period (last page this line number only	/)	·····	Ē			-		-		-	

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 11b 11c 12 13 14 15 16 16						
Ar or	y information copied from such Reports and Si for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any p ddress of any political committer	13 14 15 16 erson for the purpose of soliciting contributions to solicit contributions from such committee.						
	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , ,							
\rangle	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)						
A.	Full Name of Individual (Last, First, Middle Init ALLAZETTA, DAVID, , ,		rganization Name	Date of Receipt						
	Mailing Address 339 DARTMOUTH HILLS STR			07 / D D / Y Y Y Y 2018						
	City LAS VEGAS	State NV	Zip Code 89138-1544	Transaction ID : PR2574995451134 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)						
B.	Full Name of Individual (Last, First, Middle Init NEWKIRK, MEGHAN, , ,	ial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 10162 BEAVER CIR			07 31 / Y Y Y Y Y 07 31 2018						
	City	State CA	Zip Code	Transaction ID : PR2575008751134						
	CYPRESS		90630-4113	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) KA VP SIs Acct Mgt	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)						
C.	Full Name of Individual (Last, First, Middle Init WILLIAMS, JOSEPH, , ,	ial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 3221 FORSYTH DRIVE			07 / D D / Y Y Y Y 2018						
	City GREENSBORO	State NC	Zip Code 27407-7221	Transaction ID : PR2575008851134 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		307.70						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) R Reg VP of Sls	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1846.20	P/R Deduction (\$153.85 Bi-Weekly)						
	UBTOTAL of Receipts This Page (optional)			528.08						

Use separate schedule(s)

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	Use separate schedule(s)							
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 to solicit contributions from such committee					
NAME OF COMMITTEE (In Full)	and name and a	adress of any political continuter						
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, Middle SJOBLAD, BETHANY, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 10730 PERRY DRIVE NO	RTH		07 31 / Y Y Y Y					
City BROOKLYN PARK	State MN	Zip Code 55443-4700	Transaction ID : PR2575009151134 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		555.54					
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 ▼ 1944.39	P/R Deduction (\$277.77 Bi-Weekly)					
Full Name of Individual (Last, First, Middle KEMMER, HEIDI , , ,	Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 2211 WEST ROCKROSE		Zin Onde	07 / D D / Y Y Y Y Y 2018					
City CHANDLER	State AZ	Zip Code 85248-4208	Transaction ID : PR2575021351134					
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 28.28					
Name of Employer (for Individual) United HealthCare Services Inc	Occ Dir	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 212.10	P/R Deduction (\$14.14 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. FRIDELL, CATHERINE, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 11 E STONEWALL DRIVE			07 / D D / Y Y Y Y 07 31 2018					
City MIDDLETOWN	State DE	Zip Code 19709-3810	Transaction ID : PR2575027551134 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		76.66					
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 578.28	P/R Deduction (\$38.33 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			660.48					
TOTAL This Period (last page this line numb	er only)							

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	X 11a 11b 11c 12						
			13 14 15 16 17 berson for the purpose of soliciting contributions te to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)	5 • • • • • • • •								
VinitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Midd DUNCAN, MICHELE, , ,	le Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3038 FAIRWAY CIRCLE			07 31 Y Y Y Y 2018						
City CHASKA	State MN	Zip Code 55318-3408	Transaction ID : PR2575029651134 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, Midd B. O'BRIEN, JENNIFER, , ,	le Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 395 WOODLAWN AVE			07 31 2018						
City SAINT PAUL	State MN	Zip Code 55105-1339	Transaction ID : PR2575034551134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef Compli 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, Midd C. JONCZYK, MICHAEL, , ,	le Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 6336 URBANDALE LAN			07 / 0 0 / Y Y Y Y 07 31 2018						
City MAPLE GROVE	State MN	Zip Code 55311-1384	Transaction ID : PR2575038751134 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) Treasury	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	al)		846.12						
TOTAL This Period (last page this line nur	nber only)								

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		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)					
Full Name of Individual (Last, First, Middle MADDOX, JEFFREY, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 5610 PURDUE AVE			07 31 2018					
City DALLAS	State TX	Zip Code 75209-4431	Transaction ID : PR2575039551134 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) Plan CEO	Memo Item					
Receipt For: Primary General Other (specify) $ earrow$	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. ALLENBURG, THOMAS, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 6224 LOCH MOOR DR			07 / D D / Y Y Y Y Y 2018					
City EDINA	State MN	Zip Code	Transaction ID : PR2575039851134					
	IVIIN	55439-1618	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	Memo Item					
Receipt For:	Aggregate	Year-to-Date V	1					
Other (specify) ▼		576.90	P/R Deduction (\$38.46 Bi-Weekly)					
Full Name of Individual (Last, First, Middle DONNAY, JULENE, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 17763 OAKLAND DRIVE N			07 31 / Y Y Y Y Y					
City HAM LAKE	State MN	Zip Code 55304-4527	Transaction ID : PR2575046251134 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) Sourcing Prcrmt	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 number	er only)							

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 t			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ited PAC (l	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle HEATH, SEAN, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1292 CASTLE CT			07 31 / Y Y Y Y 07 31 2018						
City GOLDEN VALLEY	State MN	Zip Code 55427-4453	Transaction ID : PR2575048751134 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) Compli	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 JORDAN, GARELL, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 6104 S 64TH DRIVE			07 / D D / Y Y Y Y 2018						
City LAVEEN	State AZ	Zip Code 85339-2917	Transaction ID : PR2575050251134						
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For:	I	Year-to-Date ▼	-						
Primary General Other (specify) ▼		1442.25	P/R Deduction (\$96.15 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. LINDSAY, VIVIAN, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 14930 SW 39 ST			07 31 2018						
City DAVIE	State FL	Zip Code 33331-2767	Transaction ID : PR2575054951134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		455.40						
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 ▼ 2494.65	P/R Deduction (\$227.70 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			675.78						
TOTAL This Period (last page this line number	er only)								

SCHEDULE A (FEC Form 3X) _____ _

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12							
			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)	<u> </u>									
> UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middl A. CLACKO, MARY ANN, , ,	e Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 6358 COTEAU TRAIL			07 31 2018							
City EDEN PRAIRIE	State MN	Zip Code 55344-5205	Transaction ID : PR2575057951134 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) Compli	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 MCCARTY, CARY, , ,	e Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 8800 RUMFIELD RD	1		07 31 / Y Y Y Y 2018							
City NORTH RICHLAND HILLS	State TX	Zip Code 76182-6131	Transaction ID : PR2575059451134 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) Gen Mgmt	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼	1							
Primary General Other (specify) ▼		585.00	P/R Deduction (\$39.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middl C. ALLEN, MARK, , ,	e Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 11359 ENTREVAUX DR			07 / D D / Y Y Y Y Y 2018							
City EDEN PRAIRIE	State MN	Zip Code 55347-2862	Transaction ID : PR2575060251134 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 (optiona	l)		231.84							
TOTAL This Period (last page this line nun	nber only)									

SCHEDULE A (FEC Form 3X) DEOEIDTO

Use separate schedule(s)

FOR LINE NUMBER:

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ידו	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)
			for each category of the Detailed Summary Page	X 11a 11b 11c 12
An	y information copied from such Reports and S	Statements ma	y not be sold or used by any political committee	13 14 15 16 berson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\rangle	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group P	AC)
Α.	Full Name of Individual (Last, First, Middle Ini MCEVOY, AMY, , ,		rganization Name	Date of Receipt
	Mailing Address 10551 GREENBRIER RD AP	T 132		07 31 2018
	City MINNETONKA	State MN	Zip Code 55305-3460	Transaction ID : PR2575062251134 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)
	Full Name of Individual (Last, First, Middle Ini SWAN, RICK, , ,	tial) or Full O	rganization Name	Date of Receipt
	Mailing Address 2554 CHRISTIAN PKWAY			07 / D D / Y Y Y Y Y 07 31 2018
	City	State MN	Zip Code	Transaction ID : PR2575062651134
	CHASKA	IVIIN	55318-1986	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) 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 Ini CURRIE, ULYSSES, , ,	tial) or Full O	rganization Name	Date of Receipt
	Mailing Address 3111 STILES WAY			07 31 2018
	City WEST FRIENDSHIP	State MD	Zip Code 21794-9218	Transaction ID : PR2575064151134 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		60.00
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 470.00	P/R Deduction (\$30.00 Bi-Weekly)

FOR LINE NUMBER:

PAGE 100 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 ar or for commercial purposes, other than using	nd Statements ma	Ay not be sold or used by any p ddress of any political committe	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 (I	JnitedHealth Group P	AC)
Full Name of Individual (Last, First, Middle A. ZAETTA, CHRISTOPHER, , ,	e Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 5840 RIDGE ROAD			07 31 Y Y Y Y Y 07 31 2018
City EXCELSIOR	State MN	Zip Code 55331-8153	Transaction ID : PR2575068351134 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. VERCHICK, TAMI, , ,	e Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 9916 DUSTY WINDS AVE			07 31 / Y Y Y Y Y
City LAS VEGAS	State NV	Zip Code 89117-5986	Transaction ID : PR2575068951134
FEC ID number of contributing federal political committee.	С	09117-0900	Amount of Each Receipt this Period 76.92
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ector Technology	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. ISMERT, JENNY, , ,	e Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 8494 E HAWAII LN			07 / D D / Y Y Y Y 2018
City DENVER	State CO	Zip Code 80231-2732	Transaction ID : PR2575070051134 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		100.00
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 ▼ 450.00	P/R Deduction (\$50.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)		561.52
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 one)						
		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			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle ENLOW, MARGARET, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 103 LOCUST GROVE LAN	E		07 31 Y Y Y Y Y 07 31 2018						
City VERSAILLES	State KY	Zip Code 40383-8807	Transaction ID : PR2575071051134 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) \checkmark	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)						
Full Name of Individual (Last, First, Middle CHRISTIAN, DENISE, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 5 WINGATE COURT			07 31 2018						
City FLOURTOWN	State PA	Zip Code 19031-1117	Transaction ID : PR2575071451134 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 Clin Ops	Memo Item						
Receipt For: Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$192.30 Bi-Weekly)						
Other (specify) v		, 2884.50							
Full Name of Individual (Last, First, Middle NICHOLS, SANDRA, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 12706 YOUNG LANE			07 / D D / Y Y Y Y Y 07 31 2018						
City NORTH POTOMAC	State MD	Zip Code 20878-6112	Transaction ID : PR2575074551134 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) Natl Inptnt Care 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).			797.28						
TOTAL This Period (last page this line numb	er only)								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 102 OF

		Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
UnitedHealth Group Incorporat	ted PAC (I	JnitedHealth Group PA	NC)
Full Name of Individual (Last, First, Middle In BECK, RALPH, , ,	nitial) or Full C	rganization Name	Date of Receipt
Mailing Address W155 N5314 SHARPTAIL C	OURT		07 31 / Y Y Y Y 07 31 2018
City MENOMONEE FALLS	State WI	Zip Code 53051-6771	Transaction ID : PR2575074951134 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) Health Plan Operations	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. SHELLEY, MATTHEW, , ,	nitial) or Full C	rganization Name	Date of Receipt
Mailing Address 13197 NW HELEN LANE			07 ^D
	State OR	Zip Code	Transaction ID : PR2575075251134
PORTLAND	UR	97229-7045	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 Natl Clin Cvrge Review	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		288.45	P/R Deduction (\$19.23 Bi-Weekly)
Full Name of Individual (Last, First, Middle II C. BURNAM, DEBRA, , ,	nitial) or Full C	rganization Name	Date of Receipt
Mailing Address 377 CALABRIA BEACH ST			07 / D D / Y Y Y Y 2018
City HENDERSON	State NV	Zip Code 89015-2430	Transaction ID : PR2575076251134 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) 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 (optional)			94.62
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						
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle CALAMIA, EDITH, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 22 ROYAL OAK DRIVE			07 31 2018						
City FAR HILLS	State NJ	Zip Code 07931-2569	Transaction ID : PR2575076651134 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) /led Dir	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1636.68	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. UPCHURCH, KAREN, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 5023 OAKMONT PLACE			07 / D D / Y Y Y Y 2018						
City	State OH	Zip Code	Transaction ID : PR2575084451134						
WESTERVILLE		43082-8781	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) Comm	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	1						
Other (specify) ▼		576.90	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. O'NEILL, AUDREY, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 71 CHESTNUT RIDGE RD			07 / D D / Y Y Y Y 2018						
City QUEENSBURY	State NY	Zip Code 12804-7317	Transaction ID : PR2575089451134 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)						
SUBTOTAL of Receipts This Page (optional).			499.98						
TOTAL This Period (last page this line number	er only)								

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

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TEMIZED RECEIPTS			for each category of the Detailed Summary Page		11a		11b		11c	12			
			Detailed Summary Page		13		14		15	16	17		
	information copied from such Reports and St or commercial purposes, other than using the												
	AME OF COMMITTEE (In Full)												
\rangle (JnitedHealth Group Incorporate	d PAC (l	UnitedHealth Group PA	AC)									
	ull Name of Individual (Last, First, Middle Initi HEROLD, STACI, , ,	al) or Full C	Organization Name		Date o	f Re	ceipt						
_	lailing Address 15008 GREEN OAKS TR SE				м м 07	1		31	/ Y	y y 2018	Y		
		State MN	Zip Code		Trans	acti	ion II):P	'R25750	09305113	4		
-	PRIOR LAKE		55372-2159	/	Amoun	t of	Each	ı Re	ceipt th	is Period			
	EC ID number of contributing ederal political committee.	С					7			76.	92		
	ame of Employer (for Individual) Inited HealthCare Services Inc		upation (for Individual) Technology		М	emo	Iten	ı					
	eceipt For:		Year-to-Date ▼	_									
	Primary General	Ayyreyale		P/	/R Ded	uctio	on (\$	38.4	6 Bi-We	eklv)			
	Other (specify)		576.90				o (¢		0 2 0				
	ull Name of Individual (Last, First, Middle Initi NABRIT-STEPHENS, BARBARA, , ,		Organization Name		Date o	f Re	ceipt						
_	lailing Address 4704 DUNNIE DRIVE				07 31 2018								
C	ity	State	Zip Code		Trans	acti	on IE) : P	D : PR2575093451134				
1	АМРА	FL	33614-1496	A	Amount of Each Receipt this Period								
	EC ID number of contributing deral political committee.	С			26.76 Memo Item								
	lame of Employer (for Individual) nited HealthCare Services Inc		upation (for Individual) d Dir										
F	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 217.73	P/	/R Ded	uctic	on (\$ ⁻	13.3	8 Bi-We	ekly)			
	ull Name of Individual (Last, First, Middle Initi PERRY, BEVERLY-JANE, , ,	al) or Full C	Organization Name		Date o	f Re	ceipt						
_	lailing Address 24 LORUSSO DRIVE				м м 07	/		31	/ Y	ү ү 2018	Y		
	ity	State	Zip Code		Trans	sacti	ion II) : F	R25750	09605113	4		
_	ATTLEBORO	MA	02703-5212	/	Amoun	t of	Each	ı Re	ceipt th	is Period			
	EC ID number of contributing deral political committee.	С					9		,	28.	08		
N	ame of Employer (for Individual)	Occ	upation (for Individual)		M	emo	lten	n					
	Inited HealthCare Services Inc		Ntwk Prgms										
F	eceipt For:	1	Year-to-Date ▼		-								
	Primary General Other (specify)		210.60] P.	/R Dec	luctio	on (\$	14.0)4 Bi-We	ekly)			
	BTOTAL of Receipts This Page (optional)					-	y		3	131.	76		

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	× 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)	ng the name and a	doress of any political committee							
UnitedHealth Group Incorpo	prated PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Mid A. JACOBY, CHARLES, , ,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3315 IRVING AVE			07 31 / Y Y Y Y Y						
City MINNEAPOLIS	State MN	Zip Code 55408-3321	Transaction ID : PR2575099251134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		32.00						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Dir Qlty Engineering	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P/R Deduction (\$16.00 Bi-Weekly)						
Full Name of Individual (Last, First, Mid CHAMPION, PHEBE, , ,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 34 REYBURN DRIVE			07 / D D / Y Y Y Y Y 2018						
City HENDERSON	State NV	Zip Code 89074-2760	Transaction ID : PR2575108351134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С								
Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) Cust Service	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	P/R Deduction (\$25.00 Bi-Weekly)						
Full Name of Individual (Last, First, Mid MADDIGAN, DANIEL, , ,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 25131 TERRACE LAN			07 31 2018						
City DANA POINT	State CA	Zip Code 92629-2864	Transaction ID : PR2575114851134 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) ir Software Engineering	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)		110.08						
TOTAL This Period (last page this line nu	mber only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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	EIVITZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12				_					
					13		14		15	16	17		
	y information copied from such Reports and Stat for commercial purposes, other than using the na												
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	UnitedHealth Group PA	AC)									
Α.	Full Name of Individual (Last, First, Middle Initial MORSCH, MARK, , ,) or Full O	Organization Name	[Date of	Re	ceipt	t					
	Mailing Address 6344 GOLDEN LILY WAY				07 31 2018								
	City SAN DIEGO	State CA	Zip Code 92130-6836	A						11515113 his Period	4		
	FEC ID number of contributing federal political committee.	С					- J -		-9-	30.	76		
	Name of Employer (for Individual) Optum360 Services Inc		upation (for Individual) Gen Mgmt		Me	emo	lten	n					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.70] P/	'R Dedu	uctic	on (\$	615.3	8 Bi-We	eekly)			
B.	Full Name of Individual (Last, First, Middle Initial LYDON, SCOTT, , ,	Organization Name	Date of Receipt										
	Mailing Address 2 PLOWBOY PATH	Charts	Zin Oode		м м 07	/		31	/ Y	2018	Y		
	City COMMACK	State NY	Zip Code 11725-1410		Transaction ID : PR2575122251134 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		cupation (for Individual) VP Acct Mgmt		Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/	R Dedu	uctio	on (\$	14.00) Bi-We	eekly)			
C.	Full Name of Individual (Last, First, Middle Initial HUNT, ZOE, , ,) or Full O	Organization Name		Date of	Re	ceipt	t					
	Mailing Address 4030 SERANGO COURT				м м 07	/		31 ^D		2018			
	City WEST LINN	State OR	Zip Code 97068-2840	A						13625113 his Period			
	FEC ID number of contributing federal political committee.	С			_		y		y	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 Dedi	uctio	on (\$	\$14.0	0 Bi-We	eekly)			
s	UBTOTAL of Receipts This Page (optional)		•••••	. [9		9	86.	76		
Т	OTAL This Period (last page this line number on	ly)							-				

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED R			Use separate schedule(s)	(ch	eck only	y on	e)					
			for each category of the Detailed Summary Page		′ 11a 13	\square	11b	11c	12		17	
	opied from such Reports and Sta purposes, other than using the r				for the		oose of	soliciting	contril	butior	ns	
	MMITTEE (In Full) alth Group Incorporated	d PAC (U	InitedHealth Group PA	AC)								
Full Name of In MCDONNEL	ndividual (Last, First, Middle Initia _, LISA, , ,	al) or Full Org	ganization Name		Date of	Re	ceipt					
Mailing Addres	s 9664 LAFORET DRIVE				м м 07	/	D D D 31	/ Y	2018		1	
City EDEN PRAIRI	E	State MN	Zip Code 55347-3538					PR25751 eceipt th				
FEC ID numbe federal political	er of contributing I committee.	С			[.		7	-	2	27.98		
United HealthC	oyer (for Individual) are Services Inc	Occup SVP	pation (for Individual) Ntwk		M	emo	ltem					
Receipt For: Primary Other (sp	General Decify) ▼	Aggregate Y	/ear-to-Date ▼ 211.06		P/R Ded	uctic	on (\$13.9	99 Bi-We	ekly)			
Full Name of In B. CARTER, C	ndividual (Last, First, Middle Initia JOCELYN, , ,	al) or Full Org	ganization Name		Date of	Re	ceipt					
	^S 1471 COOPER ROAD				07 / D D / Y Y Y Y Y 07 31 2018							
City SCOTCH PLAI	INS	State NJ	Zip Code 07076-2833					PR25751				
FEC ID numbe federal political	er of contributing I committee.	С			Amount of Each Receipt this Period 384.60							
	oyer (for Individual) are Services Inc		pation (for Individual) Plan CEO		M	emo	ltem					
Receipt For: Primary Other (sp	General Decify) ▼	Aggregate Y	/ear-to-Date ▼ 2211.45	F	P/R Ded	uctic	on (\$192	30 Bi-W	'eekly)			
Full Name of In C. DEWALL,	ndividual (Last, First, Middle Initia PATRICK, , ,	al) or Full Org	ganization Name		Date of	Re	ceipt					
	^S 7662 RIDGEVIEW WAY				07	/	D D D 31	JL	2018]	
City CHANHASSEI	N	State MN	Zip Code 55317-4507				-	PR2575		-		
FEC ID numbe federal political	er of contributing I committee.	С			<u> </u>		y		19	92.30		
Optum Service	oyer (for Individual) s, Inc		pation (for Individual) ty Gen Counsel Mgr		Memo Item							
Receipt For: Primary Other (sp	General Decify)	/ear-to-Date ▼ 1442.25		P/R Ded	uctio	on (\$96.	15 Bi-We	ekly)				
SUBTOTAL of R	eceipts This Page (optional)		••••••	•			7	9	60	4.88		
TOTAL This Peri	iod (last page this line number or	וy)		-								

SCHEDULE A (FEC Form 3X) _____ _

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 108 OF

	-	Use separate schedule(s)	(check on	ly one)	L							
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 and a	ddress of any political committee	e to solicit co	ntributions	from such	n committe	e.					
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 o	f Receipt								
Mailing Address 4 VILLAGE ROAD			м м 07	/ D 31		ү ү 2018	Y					
City FLORHAM PARK	State NJ	Zip Code 07932-2415	Transaction ID : PR2575146951134 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C					28.0	8					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP of Acct Mgmt		lemo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R Dec	luction (\$1	4.04 Bi-We	ekly)						
Full Name of Individual (Last, First, Middle B. PETERSOHN, PATRICK, , ,	Initial) or Full C	rganization Name	Date o	f Receipt								
Mailing Address 16413 BIRCH STREET			07	/ D		2018	Y					
City OVERLAND PARK	State KS	Zip Code 66085-7842		action ID								
FEC ID number of contributing	_	00003-7042	Amoun	t of Each	Receipt th	is Period						
federal political committee.	C			416.66 Memo Item								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) R Reg VP of SIs	M									
Receipt For:	Aggregate	Year-to-Date V]								
Other (specify) ▼		, 416.66	P/R Dec	P/R Deduction (\$416.66 Bi-Weekly)								
Full Name of Individual (Last, First, Middle JONES, RON, , ,	Initial) or Full C	rganization Name	Date o	f Receipt								
Mailing Address 10066 ESCAMBIA BAY CT			07	3	1	2018 [°]						
City NAPLES	State FL	Zip Code 34120-4621		saction ID t of Each			1					
FEC ID number of contributing federal political committee.	С			. , .	5	250.0	0					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) PCInt Relationship		lemo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1875.00	P/R Dec	duction (\$1	25.00 Bi-W	/eekly)						
SUBTOTAL of Receipts This Page (optional)					,	694.7	4					
TOTAL This Period (last page this line numb	er only)											

SCHEDULE A (FEC Form 3X) _____ _

Use separate schedule(s)

FOR LINE NUMBER:

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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	47				
Any information copied from such Reports and or for commercial purposes, other than using t				he pu								
NAME OF COMMITTEE (In Full)				501101								
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)									
Full Name of Individual (Last, First, Middle I A. RAZVI, NIGHET, , ,	nitial) or Full C	rganization Name	Date	Date of Receipt								
Mailing Address 1015 S CLINTON AVENUE												
City OAK PARK	State IL	Zip Code 60304-1823				PR25751 Receipt th	168651134 is Period	4				
FEC ID number of contributing federal political committee.	С						27.6	62				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 1 Dir		Mem	io Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 218.00	P/R D)educ	tion (\$13	8.81 Bi-We	ekly)					
Full Name of Individual (Last, First, Middle I HAMANN, CHAD, , ,	nitial) or Full C	rganization Name	Date	e of R	eceipt							
Mailing Address 7638 RIDGEVIEW WAY			07 / 31 / 2018 Transaction ID : PR2575170151134									
City CHANHASSEN	State MN	Zip Code 55317-4507				PR25751 Receipt th		ļ				
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			Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼										
Primary General Other (specify) ▼		2884.50	P/R D	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I COSTIN, ROBERT, , ,	nitial) or Full C	rganization Name	Date	e of R	eceipt							
Mailing Address 580 MEADOW SWEET CIR	CLE	Zip Code	C	7	31		2018					
OSPREY	FL	34229-8976				Receipt th	18075113 is Period	4				
FEC ID number of contributing federal political committee.	С				y	. ,	19.2	23				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clnt Svc Acct Mgt		Mem	io Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 269.22	P/R Deduction (\$0.00 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)					, .	. ,	431.4	5				
TOTAL This Period (last page this line number	r only)				40.1							

Use separate schedule(s)

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PAGE 110 OF

		Use separate schedule(s) for each category of the				(check only one)										
				immary Page		11a 13		11b	11c	12		17				
	nformation copied from such Reports and Stat commercial purposes, other than using the na					for the		ose of	soliciting	contrib						
	ME OF COMMITTEE (In Full)		InitedHea	Ith Group PA												
/ 0	medileann Group meorpolated		mileuriea		(0)											
	II Name of Individual (Last, First, Middle Initial VIELAND, MICHAEL, , ,) or Full Or	ganization Na	me		Date of Receipt										
Ma	ailing Address 6741 EAST SHADOW LAKE DR	IVE	E					07 31 2018								
Cit	-	State						on ID :	PR2575 [,]	1816511	34					
<u> </u>	IRCLE PINES	MN	55014-1	348	_	Amount	of I	Each R	eceipt th	is Perio	d					
	EC ID number of contributing deral political committee.	С						,		28	.08					
Na	ame of Employer (for Individual)	Occu	pation (for Inc	dividual)		Me	emo	Item								
Op	otum Services, Inc	Sr D	ir I O Engineer	ing												
Re	eceipt For:	Aaareaate `	Year-to-Date	7												
	Primary General				I F	P/R Ded	uctio	on (\$14.	04 Bi-We	eekly)						
	Other (specify) v		y	210.60												
	II Name of Individual (Last, First, Middle Initial) or Full Or	ganization Na	me		Date of	Red	ceipt								
	ailing Address 41 CUMBERLAND ROAD			07 31 2018												
Ci	ty	State	Zip Code			Trans	actio	_	PR 25751	854511	34					
W	EST HARTFORD	СТ	06119-1						is Perio	-						
	EC ID number of contributing deral political committee.	С	384.60													
	ame of Employer (for Individual) ited HealthCare Services Inc	Occupation (for Individual) Sr Deputy Gen Counsel				Memo Item										
Re	eceipt For:		Year-to-Date													
	Primary General Other (specify) v	Aggregate	, ,	2884.50	P/R Deduction (\$192.30 Bi-Weekly)											
	II Name of Individual (Last, First, Middle Initial) or Full Or	ganization Na	me		Date of	Ree	ceipt								
	ailing Address 65 CLARK LANE					07	1	31	/ Y	2018	Y					
Ci	ty	State	Zip Code			Trans	acti	on ID :	PR2575	1913511	34					
S	WANSEA	MA	02777-45	550		Amount	of I	Each R	eceipt th	is Perio	d	_				
	C ID number of contributing deral political committee.	С					_	, .	,	28	.08					
	ame of Employer (for Individual) otum Services, Inc	Occu Exec	pation (for Inc	lividual)		Me	emo	Item								
	agint For:	I		7	\neg											
Γ	Primary General	Aggregale	Year-to-Date		I F	P/R Ded	uctic	on (\$14.	04 Bi-We	eeklv)						
	Other (specify)	210.60								,,						
SUB	TOTAL of Receipts This Page (optional)									440	.76					
тот	AL This Period (last page this line number on	y)		····· •	-			, ,			-	j				

Use separate schedule(s)

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)							
II EIVIIZED REGEIPIS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
			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 A. DEMARIS, PETER, , ,	le Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 2301 OLIVER AVE S			07 31 2018							
City MINNEAPOLIS	State MN	Zip Code 55405-2448	Transaction ID : PR2575191851134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		692.30							
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 ▼ 1192.28	P/R Deduction (\$346.15 Bi-Weekly)							
Full Name of Individual (Last, First, Midd B. MOORE, KRISTIN, , ,	le Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 3021 ROSEDALE AVEN			07 31 2018							
City DALLAS	State TX	Zip Code 75205-1451	Transaction ID : PR2575194451134 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) VP Acct Mgmt	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, Midd C. GRANBERG, MITCHELL, , ,	le Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 6721 GALWAY DRIVE	State	Zin Oodo	07 / 0 0 / Y Y Y Y Y 2018							
City EDINA	MN	Zip Code 55439-1313	Transaction ID : PR2575196151134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		455.40							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) uty Gen Counsel	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2494.65	P/R Deduction (\$227.70 Bi-Weekly)							
SUBTOTAL of Receipts This Page (option	al)		1175.70							
TOTAL This Period (last page this line nur	nber 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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	EMIZED RECEIPTS		Detailed Summary Page	×	11a		11	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 (I	JnitedHealth Group PA	C)									
Α.	Full Name of Individual (Last, First, Middle Initial) CONDON, CRAIG, , ,	or Full C	organization Name	1	Date of Receipt								
	Mailing Address 482 FAIROAK DRIVE				07 31 2018								
	City	State	Zip Code		Trans	acti	ion	ID : F	PR2575	2031511	34		
	SEVERNA PARK	MD	21146-3130	_ /	Amount	t of	Ea	ch Re	eceipt th	nis Perio	d		
	FEC ID number of contributing federal political committee.	С					,			384	4.60		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) I VP SIs & Bus Dev		Me	emo	o Ite	em					
	Receipt For:		Year-to-Date ▼										
	Primary General Other (specify) ▼		2884.50	P	/R Ded	uctio	on ((\$192	.30 Bi-V	Veekly)			
	Full Name of Individual (Last, First, Middle Initial) FRANCIS, KEVIN, , ,	or Full C	rganization Name		Date of	Re	ecei	ipt					
	Mailing Address 15815 MINNETONKA BLVD			07 31 Y Y Y Y 07 31 2018									
	City	State	Zip Code		Trans	acti	ion	ID : F	PR2575	2033511	34		
	MINNETONKA	MN	55345-1410		Amount	t of	Ea	ch Re	eceipt th	nis Perio	d		
	FEC ID number of contributing federal political committee.	С		384.60									
	Name of Employer (for Individual) United HealthCare Services Inc	Occ VP		Memo Item									
	Receipt For: A Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$192.30 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initial) CARRIS, DONNA, , ,	or Full C	organization Name		Date of	Re	ecei	ipt					
	Mailing Address 5 PARK PLACE				м м 07	/		D D D 31	/ Y	Y Y 2018	Y		
	UNIT # 130 City	State	Zip Code	-		acti	ion		PR2575	2018 212551 1	34		
	ANNAPOLIS	MD	21401-3392							nis Perio			
	FEC ID number of contributing federal political committee.	С					,		,		4.28		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		M	emo	o Ite	em					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 591.38	P	/R Ded	uctio	on	(\$37.2	14 Bi-W	eekly)			
s	UBTOTAL of Receipts This Page (optional)									843	3.48		
	OTAL This Period (last page this line number only			Í			7		,				

Use separate schedule(s)

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PAGE 113 OF

		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using t			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 STORDAHL, PAUL, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 7001 W 175TH AVENUE			07 31 Y Y Y Y Y 2018						
City EDEN PRAIRIE	State MN	Zip Code 55346-2161	Transaction ID : PR2575213051134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		516.00						
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 ▼ 2162.28	P/R Deduction (\$258.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I MARTIN, PETER, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 7091 HIGHOVER DRIVE	1-		07 / D D / Y Y Y Y 2018						
City	State MN	Zip Code	Transaction ID : PR2575213651134						
CHANHASSEN	IVIIN	55317-7572	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		30.00						
Name of Employer (for Individual) Optum360 Services Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		225.00	P/R Deduction (\$15.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I C. MEYERHOFER, JEFFREY, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 6624 IROQUOIS TRAIL			07 / D D / Y Y Y Y 2018						
City EDINA	State MN	Zip Code 55439-1065	Transaction ID : PR2575214651134 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) Bundled Payment Svs	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)			622.92						
TOTAL This Period (last page this line number	er only)								

SCHEDULE A (FEC Form 3X) _____ _

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		Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports and or for commercial purposes, other than using th	Statements mane 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	ted PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle I DOUGLAS, CHRIS, , ,	nitial) or Full C	organization Name	Date of Receipt								
Mailing Address 14810 MCGINTY RD W											
City WAYZATA	State MN	Zip Code 55391-2553	Transaction ID : PR2575220251134 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		40.38								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Proj Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 302.85	P/R Deduction (\$20.19 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I B. SHORS, MATTHEW, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 4649 EWING AVENUE SOU			07 D D / Y Y Y Y 2018								
City MINNEAPOLIS	State MN	Zip Code 55410-1745	Transaction ID : PR2575222351134 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)								
Full Name of Individual (Last, First, Middle In C. KRUTA, DARLENE, , ,	nitial) or Full C	organization Name	Date of Receipt								
Mailing Address 9243 GREEN BRIAR RD	1		07 / D D / Y Y Y Y 2018								
City BLOOMINGTON	State MN	Zip Code 55437-1939	Transaction ID : PR2575232551134 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)			501.90								
TOTAL This Period (last page this line numbe	r only)										

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
	y information copied from such Reports and Stater for commercial purposes, other than using the nar											
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F											
A.	Full Name of Individual (Last, First, Middle Initial) KIRKPATRICK, SUSAN, , ,	or Full O	rganization Name	Date of Receipt								
	Mailing Address 417 STERLING STREET			07 / D D / Y Y Y Y 2018								
		State MA	Zip Code	Transaction ID : PR2575233651134								
	LANCASTER	MA	01523-1847	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: A	ggregate	Year-to-Date 🔻	P/R Deduction (\$38.46 Bi-Weekly)								
	Other (specify)		576.90									
в.	Full Name of Individual (Last, First, Middle Initial) RUSSELL, THOMAS, , ,	or Full O	rganization Name	Date of Receipt								
	Mailing Address 10205 GROOMSBRIDGE ROAD			07 31 2018								
	City	State	Zip Code	Transaction ID : PR2575238651134								
	JOHNS CREEK	GA	30022-5645	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	0		28.00								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Empl Rel	P/R Deduction (\$14.00 Bi-Weekly)								
	Primary General	ggregate	Year-to-Date ▼									
	Other (specify) V		, 210.00									
C.	Full Name of Individual (Last, First, Middle Initial) CHOATE, THOMAS, , ,	or Full O	rganization Name	Date of Receipt								
	Mailing Address 8222 STONE MASON CT			07 / D D / Y Y Y Y 2018								
	City VINDERMERE	State FL	Zip Code 34786-5624	Transaction ID : PR2575247851134								
			34780-3024	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.			76.92								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n CEO	Memo Item								
	Receipt For: Ad	aareaate	Year-to-Date 🔻									
	Primary General Other (specify)		576.90	P/R Deduction (\$38.46 Bi-Weekly)								
			gr									
s	UBTOTAL of Receipts This Page (optional)		▶	181.84								
T	OTAL This Period (last page this line number only))	>									

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12							
or for commercial purposes, other than us			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 Incorp	orated PAC (I	JnitedHealth Group PA	4C)							
Full Name of Individual (Last, First, Mic A. DARRAH, JACQUELINE, , ,		rganization Name	Date of Receipt							
Mailing Address 16942 HUBBARD TRA	1	7. 0.4	07 / 07 / 2018							
City LAKEVILLE	State MN	Zip Code 55044-5846	Transaction ID : PR2575248551134							
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) Assc 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, Mic BRANT, PAUL, , ,	Idle Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 17 ROCKY BROOK RC			07 31 Y Y Y Y Y 2018							
City WILTON	State CT	Zip Code 06897-1919	Transaction ID : PR2575250251134 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, Mic c. MATTILA, LUCAS, , ,	Idle Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 22829 N 52ND ST			07 31 / Y Y Y Y Y 2018							
City PHOENIX	State AZ	Zip Code 85054-7202	Transaction ID : PR2575250651134 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 SIs Acct Mgmt	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 (optio	nal)		181.92							
TOTAL This Period (last page this line nu	umber only)	•••••								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b 14	11c 15		12 16	17		
	y information copied from such Reports and Stat for commercial purposes, other than using the n				for the		pose of	soliciting	g cont	tributio	ons		
$\left.\right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	AC)									
A.	Full Name of Individual (Last, First, Middle Initia KORF, GRETCHEN, , ,	l) or Full Or	rganization Name		Date of Receipt								
	Mailing Address 2120 WESTON LANE N				M m M / D D / Y Y Y Y Y Y 07 31 2018 Transaction ID : PR2575252251134 Amount of Each Receipt this Period								
	City PLYMOUTH	State MN	Zip Code 55447-2372										
	FEC ID number of contributing federal political committee.	С					-		;	384.60	0		
	Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	VP E	upation (for Individual) External Affs		Me	emc	tem						
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P	/R Ded	uctio	on (\$192	2.30 Bi-W	Veekly	()			
в.	Full Name of Individual (Last, First, Middle Initial BACHMANN, ANITA, , ,	l) or Full Or	rganization Name	[Date of	Re	eceipt						
	Mailing Address 815 NORTHERN SHORES POIN				M M 07	/	D D D 31	/ Y	201	8	Ý		
	City GREENSBORO	State NC	Zip Code 27455-3459					PR25752 eceipt th					
	FEC ID number of contributing federal political committee.	С			. 01				133.3	4			
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Hlth	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	P/R Deduction (\$66.67 Bi-Weekly)										
С.	Full Name of Individual (Last, First, Middle Initia REICHEL, RANDI, , ,	l) or Full Or	rganization Name		Date of	Re	eceipt						
	Mailing Address 331 TUSCANY ROAD				^M 07	1	31		201				
	City BALTIMORE	State MD	Zip Code 21210-2934					PR2575					
	FEC ID number of contributing federal political committee.	С					,	,		105.20	6		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs		M	emo	tem						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 421.04	P/R Deduction (\$52.63 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)		••••••	.			, .		f	623.20	0		
т	OTAL This Period (last page this line number on	ly)	•••••	-			-						

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PAGE 118 OF

177			Use separate schedule(s)	(check only one)								
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions								
\setminus	NAME OF COMMITTEE (In Full)											
	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group P	AC)								
Α.	Full Name of Individual (Last, First, Middle Init BROOMFIELD, ROBERT, , ,	ial) or Full O	rganization Name	Date of Receipt								
	Mailing Address 12501 WEST 156TH STREET			07 31 2018								
	OVERLAND PARK	State KS	Zip Code 66221-2662	Transaction ID : PR2575260451134 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		146.14								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 396.13	P/R Deduction (\$73.07 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Init ZARN, MARY, , ,	ial) or Full O	rganization Name	Date of Receipt								
	Mailing Address 11192 BLUESTEM LANE			07 / D D / Y Y Y Y 07 31 2018								
	City	State	Zip Code	Transaction ID : PR2575269151134								
	EDEN PRAIRIE	MN	55347-4731	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		75.00								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef of Staff	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 587.50	P/R Deduction (\$37.50 Bi-Weekly)								
С.	Full Name of Individual (Last, First, Middle Init ZAFFIRIS, NICHOLAS, , ,	ial) or Full O	rganization Name	Date of Receipt								
	Mailing Address 1581 ISLAND WAY			07 / D D / Y Y Y Y Y 2018								
	City WESTON	State FL	Zip Code 33326-3623	Transaction ID : PR2575270651134 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) Plan CEO	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)								
⊢	UBTOTAL of Receipts This Page (optional)			249.22								

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116	MIZED RECEIPTS		for each category of the Detailed Summary Page		× 11a 13		11b	11c	12	–	717		
	r information copied from such Reports and Sta or commercial purposes, other than using the n				for the		pose of		contrib				
<u> </u>	NAME OF COMMITTEE (In Full)												
	UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	AC)									
	Full Name of Individual (Last, First, Middle Initia JONES, TERRY, , ,	l) or Full Oi	rganization Name		Date of Receipt								
1	Mailing Address 11856 NW 12TH MANOR												
	City CORAL SPRINGS	State FL	Zip Code 33071-5035					PR25752 eceipt th					
	EC ID number of contributing ederal political committee.	С			<u> </u>				2	8.00			
I	Name of Employer (for Individual) Jnited HealthCare Services Inc		ipation (for Individual) Dir Acct Mgmt		M	emo	tem						
ł	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 Initia KRASKA, LISA, , ,	l) or Full Oi	rganization Name		Date of	f Re	eceipt						
-	Mailing Address 14183 SHADY BEACH TRAIL N				07 / 31 / 2018 Transaction ID : PR2575283051134								
		State MN	Zip Code 55372-1345							-			
-			\neg	Amount	t of	Each R	eceipt th	is Peric	bd	_			
	EC ID number of contributing ederal political committee.	С	27.80										
	Name of Employer (for Individual) Dptum Services, Inc	Occupation (for Individual) VP Recruit				Memo Item							
Ī		Aggregate	Year-to-Date 🔻										
	Other (specify) ▼		, 211.98] f	P/R Deduction (\$13.90 Bi-Weekly)								
	Full Name of Individual (Last, First, Middle Initia	l) or Full Oi	rganization Name		Date of	f Re	eceipt						
I	Mailing Address 3103 BEACON GROVE ST				07	/	D D D 31	/ Y	2018	Y	1		
(City SPRING	State TX	Zip Code 77389-4348					PR25752					
	FEC ID number of contributing	C	11303-4340		Amount	t of	Each R	eceipt th		od 6.92			
f	ederal political committee.	U			<u></u>	-	9	J J					
I	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Health Plan Operations		M	emo	o Item						
I	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)									
รเ	BTOTAL of Receipts This Page (optional)			•			,		132	2.72			
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SCHEDULE A (FEC Form 3X)

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11	EIVILLED RECEIPIS		for each category of the Detailed Summary Page		× 11a		11b	11c	12				
	y information copied from such Reports and S for commercial purposes, other than using the												
	NAME OF COMMITTEE (In Full)	e name and a		9 10 5			utions i	TOTTI SUCI	Commu	ee.			
	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)									
Α.	Full Name of Individual (Last, First, Middle Ini BEAUREGARD, THOMAS, , ,	itial) or Full O	rganization Name		Date of Receipt								
	Mailing Address 555 MILTON ROAD				м м 07	1	D D 31	/ Y	үүү 2018	Y			
	City GOSHEN	State CT	Zip Code 06756-1613		Transaction ID : PR2575295151134 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			<u> </u>				384.6	50			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 Innovation		M	emo	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50]	P/R Ded	ucti	on (\$192	2.30 Bi-W	/eekly)				
в.	Full Name of Individual (Last, First, Middle Ini HEWITT, SCOTT, , ,	itial) or Full O	rganization Name	Date of Receipt									
	Mailing Address 1443 RAYMOND AVE		07 / D D / Y Y Y Y 2018										
	City	State MN	Zip Code						96751134	1			
	SAINT PAUL		55108-1430	_	Amount	tof	Each R	eceipt th	is Period				
	FEC ID number of contributing federal political committee.	С	Memo Item										
	Name of Employer (for Individual) United HealthCare Services Inc	Occ VP											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.93	P/R Deduction (\$56.73 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Ini MONAGHAN, JOHN, , ,	itial) or Full O	rganization Name		Date of	Re	eceipt						
	Mailing Address 1432 E AMBERWOOD DRIV	E			07	/	D D D 31	/ Y	2018	Y			
	City PHOENIX	State AZ	Zip Code 85048-4056						29685113 is Period	4			
	FEC ID number of contributing federal political committee.	С			<u> </u>		, :	y	28.0)8			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Prgms		M	emo	ttem						
	Receipt For: Primary General Other (specify)	Aggregate	P/R Deduction (\$14.04 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			•			, .	,	526.1	4			
Т	OTAL This Period (last page 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	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	JnitedHealth Group P/	4C)						
Full Name of Individual (Last, First, Middle MCELRATH-JONES, MARY, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 100 AMHERST DRIVE			07 31 2018						
City NEW ROCHELLE	State NY	Zip Code 10804-1800	Transaction ID : PR2575302151134 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) Comm	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. HUGHES, ROBERT, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 68 OCEAN DRIVE			07 31 2018						
City SEABROOK	State NH	Zip Code 03874-4712	Transaction ID : PR2575304251134 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) r 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. CUEVAS, BRANDON, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 8 CLOISTER COURT			07 31 2018						
City LADERA RANCH	State CA	Zip Code 92694-1556	Transaction ID : PR2575305651134 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)						
SUBTOTAL of Receipts This Page (optional))		440.76						
TOTAL This Period (last page this line numb	per only)	······							

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ı ب	EMIZED RECEIPTS		Use separate schedule(s)		(check only one)							
11			for each category of the Detailed Summary Page	X 11	_	11b 14	11c	12				
	y information copied from such Reports and S for commercial purposes, other than using the			erson for t	he pu	irpose of	soliciting	g contrib	outions			
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	JnitedHealth Group PA	AC)								
Α.	Full Name of Individual (Last, First, Middle Ini HUNT, BRADLEY, , ,	tial) or Full C	rganization Name	Date	Date of Receipt							
	Mailing Address 6636 W SHORE DR				M)7	/ D I 31) / Y	2018	Y			
	City EDINA	State MN	Zip Code 55435-1529			tion ID : If Each F						
FEC ID number of contributing federal political committee.					_			384	4.60			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CMO		Merr	no Item						
Receipt For: Aggrega Primary General Other (specify) ▼			Year-to-Date ▼ 2884.50	P/R [)educ	tion (\$19	2.30 Bi-V	Veekly)				
в.	Full Name of Individual (Last, First, Middle Ini GRIMM, JAN, , ,	tial) or Full C	rganization Name	Date	e of F	Receipt						
	Mailing Address 3608 WEST 85TH STREET	1-)7	/ D 1) / Y	2018	Y			
	City LEAWOOD	State KS	Zip Code 66206-1353			tion ID :			-			
	FEC ID number of contributing federal political committee.	C			iunt o	f Each F			u 3.08			
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) SIs SVP OptumI		Merr	no Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R D)educt	tion (\$14.	04 Bi-We	ekly)				
с.	Full Name of Individual (Last, First, Middle Ini DRAWZ, MATTHEW, , ,	tial) or Full C	rganization Name	Date	e of F	Receipt						
	Mailing Address 4848 SPARROW ROAD			C)7	/ D 1	J L	2018				
	City MINNETONKA	State MN	Zip Code 55345-3219			ction ID : of Each F			-			
	FEC ID number of contributing federal political committee.	С				,	· ,	2	3.08			
	Name of Employer (for Individual) Optum Services, Inc Receipt For:		upation (for Individual) Bus Dvlp		Men	no Item						
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.60	P/R [Deduc	tion (\$14	.04 Bi-W	eekly)				
s	UBTOTAL of Receipts This Page (optional)				Ξ	, ,	. ,	44().76			
Т	OTAL This Period (last page this line number	only)										

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PAGE 123 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
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	y information copied from such Reports and Stat for commercial purposes, other than using the n											
\setminus	NAME OF COMMITTEE (In Full)											
\rangle	UnitedHealth Group Incorporated	I PAC (L	InitedHealth Group PA	(C)								
١.	Full Name of Individual (Last, First, Middle Initia GOLDBERG, JEFFREY, , ,	l) or Full Oi	ganization Name	Date of Receipt								
	Mailing Address 3410 BRADLEY LANE			07 31 2018								
	City	State	Zip Code	Transaction ID : PR2575326951134								
	CHEVY CHASE	MD	20815-3262	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		pation (for Individual) Business Development Exe	Memo Item								
	Descipt For:		Year-to-Date ▼									
	Primary General Other (specify) ▼		585.00	P/R Deduction (\$39.00 Bi-Weekly)								
	Full Name of Individual (Last, First, Middle Initia PEEL, CHAD, , ,	l) or Full Oi	rganization Name	Date of Receipt								
	Mailing Address 7185 GUNFLINT TRAIL			07 31 2018								
	City	State	Zip Code	Transaction ID : PR2575329851134								
	CHANHASSEN	MN	55317-4743	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		80.00								
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP I	ipation (for Individual) Prd	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	P/R Deduction (\$40.00 Bi-Weekly)								
	Full Name of Individual (Last, First, Middle Initia VAN HAM, COLLEEN, , ,	l) or Full Oi	rganization Name	Date of Receipt								
	Mailing Address 727 N EVERGREEN AVE			07 / D D / Y Y Y Y 2018								
	City	State	Zip Code	Transaction ID : PR2575341951134								
	ARLINGTON HEIGHTS	IL	60004-5566	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		384.60								
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item								
	United HealthCare Services Inc	Hlth	Plan CEO									
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)		•	542.60								

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 berson for the purpose of soliciting contributions be to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)	g the hame and a									
UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Midd SIMONE, MICHAEL, , ,	le Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 12 SCALIA COURT			07 31 Y Y Y Y Y 2018							
City HAMILTON	State NJ	Zip Code 08690-1363	Transaction ID : PR2575346751134 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	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. IMDIEKE, PATRICK, , ,	le Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 15900 WHITE PINE DRI			07 / D D / Y Y Y Y 2018							
City	State MN	Zip Code	Transaction ID : PR2575347951134							
		55391-2125	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) 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, Midd C. TELESKY, MICHAEL, , ,	le Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 2602 PENNINGTON PL	ACE		07 31 / Y Y Y Y 2018							
City VALPARAISO	State IN	Zip Code 46383-9163	Transaction ID : PR2575350951134 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) /P SIs Acct Mgmt	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 585.00	P/R Deduction (\$39.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optiona	al)		134.16							
TOTAL This Period (last page this line nur	nber only)									

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			(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					
or for commercial purposes, other than using	the name and a	ddress 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 PHILLIPS, CHRISTINE, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 63 HERITAGE TRAIL			M M / D D / Y Y Y Y 07 31 2018					
City SUFFIELD	State CT	Zip Code 06078-2376	Transaction ID : PR2575354051134 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		27.94					
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 211.44	P/R Deduction (\$13.97 Bi-Weekly)					
Full Name of Individual (Last, First, Middle BROWN, SALLY, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 192 HOMEWOOD DRIVE			M M / D D / Y Y Y Y Y 07 31 2018					
City CLINTON	State NY	Zip Code 13323-1512	Transaction ID : PR2575363651134 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 Bus Process	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 C. ADAM, MATTHEW, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 15607 SUMMIT DRIVE			07 / D D / Y Y Y Y 2018					
City EDEN PRAIRIE	State MN	Zip Code 55347-2328	Transaction ID : PR2575364051134 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) of of Staff	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)			84.10					
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 13 14 15 16 17						
			person for the purpose of soliciting contributions te to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
	aleu FAC (l								
Full Name of Individual (Last, First, Middle A. CIAVARELLA, TRACY, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 20 LORRAINE DRIVE			07 31 2018						
City BEACON FALLS	State CT	Zip Code 06403-1256	Transaction ID : PR2575377951134						
BEACON FALLS		00403-1230	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		28.08						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
Optum Services, Inc	VP	Compli							
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) ▼		210.60	P/R Deduction (\$14.04 Bi-Weekly)						
			-						
Full Name of Individual (Last, First, Middle B. DOLL, KATHLEEN, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3184 MULLIGAN LANE			Date of Receipt						
			07 31 2018						
City	State	Zip Code	Transaction ID : PR2575385151134						
CHASKA	MN	55318-3226	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) CInt Mgmt NMT	Memo Item						
Receipt For:		Year-to-Date ▼	-						
Primary General			P/R Deduction (\$38.46 Bi-Weekly)						
Other (specify) V		, 576.90							
Full Name of Individual (Last, First, Middle C. WINKLER, YASMINE, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1429 WEST WIGWAM TR	RAIL		07 31 2018						
City	State	Zip Code	Transaction ID : PR2575390951134						
MOUNT PROSPECT	IL	60056-2940	Amount of Each Receipt this Period						
FEC ID number of contributing	С		384.60						
federal political committee.	U								
Name of Employer (for Individual)		upation (for Individual)	Memo Item						
United HealthCare Services Inc	Reg	n CEO							
Receipt For:	Aggregate	Year-to-Date ▼	D/P Doduction (\$22.18 Pi Wookhy)						
Other (specify)		2884.50	P/R Deduction (\$33.18 Bi-Weekly)						
			489.60						
SUBTOTAL of Receipts This Page (optional	,	,							
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							
			person for the purpose of soliciting contributions te 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. CROWE, ANGELA, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 14 GLENBROOK DR			07 31 2018							
City MENDHAM	State NJ	Zip Code 07945-2306	Transaction ID : PR2575391751134 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) 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, Middl B. FENLON, STEVEN, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 4925 DREW AVE S	1		07 31 2018							
City MINNEAPOLIS	State MN	Zip Code 55410-1743	Transaction ID : PR2575392051134 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) buty Gen Counsel	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 C. POST, LINDA, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 6520 JAYCOX ROAD			07 / D D / Y Y Y Y 2018							
City GALENA	State OH	Zip Code 43021-9530	Transaction ID : PR2575395251134 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) 1ed Dir	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 (optiona	l)		250.38							
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 one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1'							
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions							
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	NC)							
Full Name of Individual (Last, First, Middle I BRATTEBO, CRAIG, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 10202 HARMONY CIRCLE			07 31 Y Y Y Y 2018							
City EDEN PRAIRIE	State MN	Zip Code 55347-5019	Transaction ID : PR2575397251134 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) uty Gen Counsel Mgr	Memo Item							
Receipt For: Primary General Other (specify) ▼										
Full Name of Individual (Last, First, Middle I GOTHARD, CAROL, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 16492 BROOKLANE BOUL	EVARD		07 31 Y Y Y Y 2018							
City NORTHVILLE	State MI	Zip Code 48168-8417	Transaction ID : PR2575419151134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		76.36							
Name of Employer (for Individual) United HealthCare Services Inc	Occ Dir	upation (for Individual) Fin	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼	1							
Primary General Other (specify) ▼		579.97	P/R Deduction (\$38.18 Bi-Weekly)							
Full Name of Individual (Last, First, Middle II C. MCGAVICK, KEVIN, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 705 NOTTINGHAM COURT	-		07 / D D / Y Y Y Y 2018							
City CRANBERRY TOWNSHIP	State PA	Zip Code 16066-6527	Transaction ID : PR2575421951134 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) Bus Dvlp	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)			345.58							
TOTAL This Period (last page this line numbe	r only)									

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle A. O'HARA, KARIN, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 1431 HENRY COURT			07 31 Y Y Y Y Y 07 31 2018						
City CHANHASSEN	State MN	Zip Code 55317-2200	Transaction ID : PR2575428751134 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) Acctng	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 CASTILLO, EFREM, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 307 JOLIET AVE			07 31 / Y Y Y Y Y 2018						
City	State	Zip Code	Transaction ID : PR2575441351134						
SAN ANTONIO	TX	78209-5243	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 Med Off	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 MURLEY, MARY, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 2775 COUNTRYSIDE DRIV	VE WEST		07 31 Y Y Y Y Y 2018						
City ORONO	State MN	Zip Code 55356-9675	Transaction ID : PR2575443651134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		0.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Chief Actuary	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4999.90	P/R Deduction (\$0.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			461.52						
TOTAL This Period (last page this line number	er only)								

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			Use separate schedule(s)	(check only one)							
			for each category of the Detailed Summary Page		ŀ	_	11b	11c		12 16	17
	mation copied from such Reports and Stat mmercial purposes, other than using the n			erson for	the p	ourp	ose of	solicitir		ontributi	ions
、	E OF COMMITTEE (In Full)										
) Unit	edHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	C)							
	ame of Individual (Last, First, Middle Initia ERG, PAMELA, , ,	l) or Full O	rganization Name	Dat	e of	Rec	ceipt				
	g Address 1427 BROOKSHIRE COURT				07 [™]	/	D D D 31	/		2018	Y
City NFW	BRIGHTON	State MN	Zip Code 55112-6390							3851134	ļ
				Am	ount	of E	Each Re	eceipt	INIS	Period	
FEC ID number of contributing federal political committee.							7	1 46	_	8.6	8
	of Employer (for Individual) HealthCare Services Inc		ipation (for Individual) Gen Mgmt		Me	mo	Item				
	pt For:	Aggregate	Year-to-Date 🔻								
	Primary General Other (specify) V		436.68	P/R I	Dedu	ictio	n (\$4.34	4 Bi-We	ekly	y)	
	lame of Individual (Last, First, Middle Initia LKER, TIMOTHY, , ,	l) or Full O	rganization Name	Dat	e of	Rec	ceipt				
Mailin	g Address 32 FITCH LANE				07 [™]	1	D D D 31	/		2018	Y
City		State	Zip Code							6351134	
	CANAAN	СТ	06840-5051	Am	ount	of E	Each Re	eceipt 1	this	Period	
	D number of contributing al political committee.	С					,		_	384.6	0
Name United	e of Employer (for Individual) I HealthCare Services Inc		upation (for Individual) n CEO		Me	mo	Item				
	pt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		P/R [Dedu	ctio	n (\$192	30 Bi-'	Wee	kly)		
	lame of Individual (Last, First, Middle Initia UTMAN, MILLA, , ,	l) or Full O	rganization Name	Dat	e of	Rec	ceipt				
	g Address 410 SYCAMORE CIRCLE			М	07	/	31	1		2018	Ŷ
City		State	Zip Code	Т	ransa	actio	on ID : I	PR257	544	7151134	4
PLYN	ЛОИТН	MN	55441-5667	Am	ount	of E	Each Re	eceipt	this	Period	
	D number of contributing al political committee.	С					,	, y	_	384.6	0
	of Employer (for Individual)		pation (for Individual)		Me	emo	Item				
•	n Services, Inc pt For:		f Tech Off	_							
	Primary General	Aggregate	Year-to-Date ▼	P/R	Dedu	uctio	n (\$192	2.30 Bi-	Wee	əkly)	
	Other (specify)		2884.50				、· · · -			.,	
SUBTO	TAL of Receipts This Page (optional)		•							777.8	8
TOTO	This Devied (lest 111 11 11	L->		- F					-		
IOTAL	This Period (last page this line number on	ııy)	•••••••••••••••••••••••••••••••••••••••				-		_	1.00	

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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			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)	orporated PAC (I	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First BOOKER, ROBERT, , ,		rganization Name	Date of Receipt									
Mailing Address 16632 HANSON E	1	Zia Oada	07 / D D / Y Y Y Y 2018									
City ANDOVER	State MN	Zip Code 55304-2089	Transaction ID : PR2575447251134									
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 384.60									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2307.60	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First FLOCCO, LOUIS, , ,	, Middle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 3281 S VINE STR			07 / D D / Y Y Y Y Y 2018									
City CHANDLER	State AZ	Zip Code 85248-3845	Transaction ID : PR2575448651134 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) 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 C. GEHLBACH, THOMAS, ,		rganization Name	Date of Receipt									
Mailing Address 5380 YELLOWST			07 / D D / Y Y Y Y Y 2018									
City MINNETRISTA	State MN	Zip Code 55331-9163	Transaction ID : PR2575448851134 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		497.00									
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 ▼ 2257.22	P/R Deduction (\$248.50 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)		909.60									
TOTAL This Period (last page this li	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 t	Statements mand 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	ted PAC (JnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, Middle RUNICE, PAUL, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 4622 BRUCE AVENUE			07 31 Y Y Y Y Y 2018					
City EDINA	State MN	Zip Code 55424-1123	Transaction ID : PR2575451551134 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) Treasury	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 B. MCGLINCH, THOMAS, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 910 MIDWEST TRAIL NOR	ТН		07 31 2018					
City _LAKE ELMO	State MN	Zip Code 55042-9658	Transaction ID : PR2575451651134 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) Treasury	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 MURPHY, ERIC, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 5201 BLAKE ROAD	State	Zin Code	07 31 2018					
City EDINA	MN	Zip Code 55436-1127	Transaction ID : PR2575453751134 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)					
SUBTOTAL of Receipts This Page (optional).			492.28					
TOTAL This Period (last page this line number	er only)							

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

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17			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 Statements may not be sold or used by or for commercial purposes, other than using the name and address of any political con											
	NAME OF COMMITTEE (In Full)	ame and a	address of any political committee				utions ii	rom suc	n commi	liee.	
\rangle	UnitedHealth Group Incorporated	I PAC (l	UnitedHealth Group PA	C)							
A.	Full Name of Individual (Last, First, Middle Initia PEGG, JACK, , ,	l) or Full O	Organization Name	D	ate of	Re	ceipt				
	Mailing Address 4917 KAMA LANE NE				м м 07	1	D D D 31	/ Y	ү ү 2018	Ŷ	
	City ALBERTVILLE	State MN	Zip Code 55301-3536	A					4560511 nis Perio		
	FEC ID number of contributing federal political committee.	С			_				28	8.08	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Underwriting		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 SMITH, DAYNITA, , ,	l) or Full O	Organization Name	D	ate of	Re	ceipt				
	Mailing Address 4828 ISLAND VIEW DR			м м 07	/	D D 31	/ Y	2018	Y		
	City MOUND	State MN	Zip Code 55364-9391				-		4606511: nis Perio	-	
	FEC ID number of contributing federal political committee.	С						28	8.08		
	Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) Dir Acctng				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 Initia FRANZ, PHILLIP, , ,	l) or Full O	Organization Name	D	ate of	Re	ceipt				
	Mailing Address 60 WALLACE ROAD	-			07	1	D D D 31	/ Y	ү ү 2018	Ŷ	
	City MIDDLETOWN	State NJ	Zip Code 07748-2932	A			-		4631511 nis Perio	-	
	FEC ID number of contributing federal political committee.	С		ļ	_		y .	, ,	C	0.00	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Me	emo	ltem				
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 4999.90				P/	R Ded	uctio	on (\$0.0	0 Bi-We	ekly)		
s	UBTOTAL of Receipts This Page (optional)			[, .		56	.16	
т	OTAL This Period (last page this line number or	ly)		ĺ							

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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 an 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. PHINNEY, ASHLEY, , ,	Initial) or Full C	Prganization Name	Date of Receipt					
Mailing Address 5 GATEHOUSE ROAD			07 31 2018					
City	State	Zip Code	Transaction ID : PR2575468451134					
GRANBY	CT	06035-1922	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		27.26					
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 ▼ 215.15	P/R Deduction (\$13.63 Bi-Weekly)					
Full Name of Individual (Last, First, Middle SADUSKE, NANETTE, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 4276 NICOLET DRIVE			07 / D D / Y Y Y Y Y 2018					
City GREEN BAY	State WI	Zip Code 54311-9798	Transaction ID : PR2575470251134					
	_	54311-9796	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		76.52					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Compli	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼						
Other (specify)		579.11	P/R Deduction (\$38.26 Bi-Weekly)					
Full Name of Individual (Last, First, Middle BARTHEL, THOMAS, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 9713 HEMLOCK LANE NO	DRTH		07 / D D / Y Y Y Y 2018					
City MAPLE GROVE	State MN	Zip Code 55369-3665	Transaction ID : PR2575484351134 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)	P/R Deduction (\$14.04 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			131.86					
TOTAL This Period (last page this line numb	per only)							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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				or each category of the Detailed Summary Page	×	_	11a 13		11	ŀ		11c 15		2 6	17
	y information copied from such Reports and Stateme for commercial purposes, other than using the name					for	r the j		005	se of		oliciting	conti	ributi	ons
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PA	AC (l	Jni	itedHealth Group PA	C)										
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name MACLAUCHLAN, DANIEL, , ,								Re	ce	ipt					
	Mailing Address 780 CENTRAL AVENUE	tate		Zip Code		L	и м 07	/	L	31			201	100	
	3	A		19038-1701								R25754 ceipt thi			
	FEC ID number of contributing federal political committee.	;					nount		1			, cipt till		28.0	8
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Dir (•	ion (for Individual) Ipli		C	Me	emo) Ite	em					
	Receipt For: Agg Primary General Other (specify) ▼	gregate	Yea	r-to-Date ▼ 210.60	P	P/R	2 Dedu	uctic	on	(\$14	.04	l Bi-We	ekly)		
В.	Full Name of Individual (Last, First, Middle Initial) or STARMANN, LYNN, , ,	r Full O	rgar	nization Name		Da	ate of	Re	cei	ipt					
	Mailing Address 11701 WEMBLEY RD								07 ^{D D} [/] <u>Y Y Y Y</u> 2018						
	,	tate CA		Zip Code 90720-4235					-			R25754 ceipt thi			
	FEC ID number of contributing federal political committee.	C					_		,			Ţ		76.9	2
	Name of Employer (for Individual) Optum Services, Inc	Occupation (for Individual) Dir Med Clin Ops					Me	emo) Ite	em					
	Receipt For: Agg Primary General Other (specify) ▼	gregate	Yea	r-to-Date ▼ 576.90	P	9/R	Dedu	uctic	on	(\$38.	.46	6 Bi-We	ekly)		
с.	Full Name of Individual (Last, First, Middle Initial) or RAMIREZ, MICHELE, , ,	r Full O	rgar	nization Name		Da	ate of	Re	cei	ipt					
	Mailing Address 37 CALAIS ROAD			1		L	07	/	L	31			2018	8	
	3	tate NJ		Zip Code 07869-3531								R25755			
	FEC ID number of contributing federal political committee.	;					nount	U	J.		iec	jeipt till		64.3	0
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Capital Partner	Memo Item										
	Receipt For: Agg Primary General Other (specify)	gregate	Yea	r-to-Date ▼ 246.30	P	P/R	R Ded	uctio	on	(\$32	2.15	5 Bi-We	ekly)		
s	UBTOTAL of Receipts This Page (optional)								,		l	,	1	69.30	0
т	OTAL This Period (last page this line 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			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 SUNDAL, DEBORAH, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 5109 WEST 66TH ST			07 31 Y Y Y Y Y 2018					
City EDINA	State MN	Zip Code 55439-1429	Transaction ID : PR2575502951134 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)					
Full Name of Individual (Last, First, Middle B. WEBSTER, AMBER, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 2115 VALLEY ROAD			07 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City	State CA	Zip Code	Transaction ID : PR2575504851134					
COSTA MESA	CA	92627-3976	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) Gen Mgmt	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 DEL REAL, MAGDALENA, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 31 E OGDEN AVE UNIT 412			07 31 2018					
City LA GRANGE	State IL	Zip Code 60525-2136	Transaction ID : PR2575507751134 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) R Reg SIs Dir	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 numb	er only)							

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	✗ 11a 11b 11c 12 13 14 15 16 17						
			e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P	4C)						
Full Name of Individual (Last, First, Middle A. JONES, RICHARD, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 8586 W CARBON CT			07 31 Y Y Y Y Y 2018						
City BOISE	State ID	Zip Code 83709-5195	Transaction ID : PR2575509651134 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) R Reg Sls Dir	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. HOWELL, NICHOLAS, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 300 ORANGE GROVE AV	'ENUE		07 / D D / Y Y Y Y 2018						
City SOUTH PASADENA	State CA	Zip Code 91030-1616	Transaction ID : PR2575510051134						
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)	Memo Item						
Receipt For: Primary General Other (specify) ▼		P Advisory Svc Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. JOSEPH, MOLLY, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 9209 GRAND SUMMIT B	·		07 / D D / Y Y Y Y Y 2018						
City DRIPPING SPRINGS	State TX	Zip Code 78620-2882	Transaction ID : PR2575521751134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	s a l								
Name of Employer (for Individual)Occupation (for IndividUnited HealthCare Services IncBus Segment CEO			Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2880.00	P/R Deduction (\$192.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)		796.68						
TOTAL This Period (last page this line num	ber only)								

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)		,,							
UnitedHealth Group Incorpora	ted PAC (I	UnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle DI RE, BERNADETTE, , ,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 1 NORFOLK LANE			07 31 2018						
City HOLLISTON	State MA	Zip Code 01746-2362	Transaction ID : PR2575522551134 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) I Plan 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. KAPLAN, ERIC, , ,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 193 PARTRIDGE LANDING			07 / D D / Y Y Y Y Y 2018						
City	State CT	Zip Code	Transaction ID : PR2575524051134						
GLASTONBURY		06033-2849	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		28.00						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) t SIs SVP OptumI	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	1						
Other (specify) ▼		210.00	P/R Deduction (\$14.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle CROCKETT, DOUGLAS, , ,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 5938 DEER HOLLOW COL			07 31 Y Y Y Y Y						
City PITTSBORO	State IN	Zip Code 46167-9583	Transaction ID : PR2575526051134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		114.28						
Name of Employer (for Individual)Occupation (for Individual)United HealthCare Services IncVP Gen Mgmt			Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 871.38	P/R Deduction (\$57.14 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			219.20						
TOTAL This Period (last page this line number	er only)								

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		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 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 COHEN, SANFORD, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 28 CRESCENT LANE			07 31 Y Y Y Y Y					
City LEVITTOWN	State NY	Zip Code 11756-2506	Transaction ID : PR2575526151134 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 Med 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 I B. JETER, WILLIAM, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 21 PLAINFIELD STREET	0	Zie Octo	07 / D D / Y Y Y Y Y 2018					
City JAMAICA PLAIN	State MA	Zip Code 02130-3632	Transaction ID : PR2575528151134 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	Occ VP	upation (for Individual) IT	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 C. HUNTER, ROBERT, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 9236 PRESTON PLACE			07 31 2018					
City EDEN PRAIRIE	State MN	Zip Code 55347-3396	Transaction ID : PR2575528351134 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								
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)			440.68					
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					
			13 14 15 16 erson for the purpose of soliciting contributions e to solicit contributions from such committee.					
UnitedHealth Group Incorpor	rated PAC (I	JnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, Middle A. BASS, JOHN, , ,	e Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 265 CAVE LN			07 31 2018					
City	State	Zip Code	Transaction ID : PR2575528551134					
SAN ANTONIO	ТХ	78209-2242	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) RVP SIs	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 HERNANDEZ, MAYRENE, , ,	e Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 850 SW 189TH AVENUE			07 / D D / Y Y Y Y 2018					
City PEMBROKE PINES	State FL	Zip Code 33029-6047	Transaction ID : PR2575529251134 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	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 C. HOLOVNIA, KRISTEN, , ,	e Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 4610 LAKEVIEW DRIVE			07 / D D / Y Y Y Y 2018					
City EDINA	State MN	Zip Code 55424-1518	Transaction ID : PR2575533051134 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		455.40					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) uty Gen Counsel	Memo Item					
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 2494			P/R Deduction (\$227.70 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optiona	l)		560.40					
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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(check only one)

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			for each category of the Detailed Summary Page	X 11a 11b 11c 12				
			Detailed Summary Paye					
Any infoi or for co	rmation copied from such Reports and S mmercial purposes, other than using the	statements ma name and a	y 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.				
	E OF COMMITTEE (In Full)							
\rangle Unit	tedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)				
	lame of Individual (Last, First, Middle Ini _, JANE, , ,	tial) or Full O	rganization Name	Date of Receipt				
	g Address 34301 299TH PLACE			07 / D D / Y Y Y Y Y 2018				
City		State	Zip Code	Transaction ID : PR2575533151134				
AITK	IN	MN	56431-5914	Amount of Each Receipt this Period				
	ID number of contributing al political committee.	С		76.92				
	e of Employer (for Individual) d HealthCare Services Inc		upation (for Individual) Compli	Memo Item				
	pt For:		Year-to-Date ▼	—				
	Primary General Other (specify) ▼	Aggregate	576.90	P/R Deduction (\$38.46 Bi-Weekly)				
	lame of Individual (Last, First, Middle Ini HL, ALISA, , ,	tial) or Full O	rganization Name	Date of Receipt				
	g Address 41 BIRCHWOOD DRIVE			07 31 2018				
City		State	Zip Code	Transaction ID : PR2575534451134				
GRE	ENWICH	СТ	06831-3311	Amount of Each Receipt this Period				
	ID number of contributing al political committee.	С		38.46				
	e of Employer (for Individual) n Services, Inc		upation (for Individual) ? Sales	Memo Item				
	pt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.45	P/R Deduction (\$19.23 Bi-Weekly)				
	lame of Individual (Last, First, Middle Ini	tial) or Full O	rganization Name	Date of Receipt				
Mailin	g Address 169 HUNNEWELL STREET			07 31 2018				
City		State	Zip Code	Transaction ID : PR2575535151134				
NEEI	DHAM	MA	02494-1421	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.				117.64				
Name of Employer (for Individual) United HealthCare Services Inc			upation (for Individual) /Ied Clin Ops	Memo Item				
	pt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 352.92	P/R Deduction (\$58.82 Bi-Weekly)				
SUBTO	TAL of Receipts This Page (optional)		•••••	233.02				

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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					
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)								
UnitedHealth Group Incorpora	ated PAC (I	UnitedHealth Group PA	AC)					
Full Name of Individual (Last, First, Middle HAMLIN, THOMAS, , ,	Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 2800 NEWMAN			07 31 2018					
City	State	Zip Code	Transaction ID : PR2575536251134					
HOUSTON	ТХ	77098-1408	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) 3ehvrl Med 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. SULLIVAN, EILEEN, , ,	Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 9675 WATERWAY PASSA			07 / D D / Y Y Y Y 07 31 2018					
City WINTER GARDEN	State FL	Zip Code 34787-4957	Transaction ID : PR2575537251134					
FEC ID number of contributing	_	54767-4957	Amount of Each Receipt this Period					
federal political committee.	C							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Assc Gen Counsel	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 C. LUQUE, JOY, , ,	Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 11700 PRESTON ROAD 6	60-602		M M / D D / Y Y Y Y 07 31 2018					
City DALLAS	State TX	Zip Code 75230-6112	Transaction ID : PR2575539251134 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: Aggregate Year-to-Date ▼ Primary General Other (specify) 225.00			P/R Deduction (\$15.00 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional).			135.00					
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						
Any information copied from such Reports and Sta or for commercial purposes, other than using the								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	NC)					
Full Name of Individual (Last, First, Middle Initia SUN, TONY, , ,	Date of Receipt							
Mailing Address 8408 ENSLEY PLACE			07 / D D / Y Y Y Y Y 2018					
City LEAWOOD	State KS	Zip Code 66206-1402	Transaction ID : PR2575540251134					
			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) 1ed Dir	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 Initia B. WENTZIEN, MICHAEL, , ,	al) or Full O	rganization Name	Date of Receipt					
Mailing Address 6350 SUMMIT CIRCLE			07 31 2018					
City	State	Zip Code	Transaction ID : PR2575540851134					
CHANHASSEN	MN	55317-9138	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) Advisory Svcs	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 Initia C. STEINBRECHER, HOLLY, , ,	al) or Full O	rganization Name	Date of Receipt					
Mailing Address 2101 LILAC LANE			07 31 Y Y Y Y 2018					
City	State	Zip Code	Transaction ID : PR2575544551134					
FRISCO	TX	75034-3652	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		455.40					
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 ▼ 2494.65	P/R Deduction (\$227.70 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			560.40					
TOTAL This Period (last page this line number o								

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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 Incorpo	orated PAC (I	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Midd BALCK, AMY, , ,	le Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address N3681 VINE RD			M M / D D / Y Y Y Y Y 07 31 2018					
City FREEDOM	State WI	Zip Code 54913-6928	Transaction ID : PR2575548451134 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) Dir Acct Mgmt	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, Midd B. DAIKEN, LAURIE, , ,	le Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 5002 ONEIDA ST	Ctoto	Zin Code	07 / D D / Y Y Y Y 2018					
City DULUTH	State MN	Zip Code 55804-1642	Transaction ID : PR2575549651134 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) Bus Anlys	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 MORGAN, MARY, , ,	le Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 9900 WILBUR MAY PAR APT 705	RKWAY	Zip Code	07 31 2018					
City RENO	NV	89521-4007	Transaction ID : PR2575550851134 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.			28.08					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Proj Mgmt	Memo Item					
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Other (specify)			P/R Deduction (\$14.04 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional	al)		94.54					
TOTAL This Period (last page this line nur	nber 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 P	AC)						
Full Name of Individual (Last, First, Middle A. STAFFORD, JEFF, , ,	Initial) or Full C	Prganization Name	Date of Receipt						
Mailing Address 9413 W 131ST STREET			07 31 2018						
City OVERLAND PARK	State KS	Zip Code 66213-3079	Transaction ID : PR2575561251134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		115.40						
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 ▼ 692.40	P/R Deduction (\$57.70 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. CHERRYHOMES, DAVID, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 5921 CREEK POINT			07 / D D / Y Y Y Y Y 2018						
City MINNETONKA	State MN	Zip Code 55345-6224	Transaction ID : PR2575573551134 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) Software Engineering	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 216.79	P/R Deduction (\$13.48 Bi-Weekly)						
Full Name of Individual (Last, First, Middle MOCK, CURTIS, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 23 KELTON STREET			07 / D D / Y Y Y Y 2018						
City REHOBOTH	State MA	Zip Code 02769-2530	Transaction ID : PR2575579251134 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) Gen Mgmt	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)			334.66						
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 11a 11b 11c 12 13 14 15 16 17											
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions											
NAME OF COMMITTEE (In Full)														
UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group P	AC)											
Full Name of Individual (Last, First, Middle I WINSOR, ELIZABETH, , ,	nitial) or Full O	rganization Name	Date of Receipt											
Mailing Address 57 WILDERS PASS			07 / D D / Y Y Y Y 31 2018											
City CANTON	State CT	Zip Code 06019-2259	Transaction ID : PR2575582851134 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) D NA Acct	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 B. EULL, MARY ANN, , ,	nitial) or Full O	rganization Name	Date of Receipt											
Mailing Address 11204 BEDFORDSHIRE AV			07 31 / Y Y Y Y 2018											
City POTOMAC	State MD	Zip Code 20854-2003	Transaction ID : PR2575583751134											
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) c Dir	Memo Item											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.98	P/R Deduction (\$13.90 Bi-Weekly)											
Full Name of Individual (Last, First, Middle I C. HARRIS, EUGENE, , ,	nitial) or Full O	rganization Name	Date of Receipt											
Mailing Address 2832 HARBORSIDE WAY			07 / D D / Y Y Y Y 2018											
City SOUTHPORT	State NC	Zip Code 28461-8373	Transaction ID : PR2575585451134 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) R Reg VP of Brkr SIs	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)			489.32											
TOTAL This Period (last page this line numbe	r only)	······												

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				for each category of the Detailed Summary Page		× 11a		11	H	11c		12	<u> </u>
	information copied from such Reports and Station commercial purposes, other than using the r								se of				
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated												
	Full Name of Individual (Last, First, Middle Initia LYON, JAMIE, , ,	al) or Full O		Date of Receipt									
	Mailing Address 2069 CIRCLE DRIVE					07 31 2018							
	City KRONENWETTER	State WI		Zip Code 54455-9062		Trans Amoun				PR257 eceipt			-
	FEC ID number of contributing federal political committee.	С	l					-				28.	08
	Name of Employer (for Individual) United HealthCare Services Inc			tion (for Individual) n Mgmt		М	emc	o Ite	эm				
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 210.60]	P/R Ded	uctio	on	(\$14.)	04 Bi-\	Veek	ly)	
	Full Name of Individual (Last, First, Middle Initia SOLLER, BRIAN, , ,	al) or Full O	rga	nization Name		Date o	f Re	ecei	pt				
	Mailing Address 17210 62ND AVE NORTH		07 / D D / Y Y Y Y Y 2018										
	City MAPLE GROVE	State MN		Zip Code 55311-6406	Transaction ID : F								
	FEC ID number of contributing federal political committee.	С						-	_	,		76	92
	Name of Employer (for Individual) Optum Services, Inc	Occ VP	•	tion (for Individual)		М	emc	o Ite	эm				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 576.90]	P/R Ded	uctio	on ((\$38.4	46 Bi-\	Veek	ly)	
	Full Name of Individual (Last, First, Middle Initia GISCH, SHAWNA, , ,	al) or Full O	rga	nization Name	Date of Receipt								
	Mailing Address 1735 HEMLOCK WAY					M M		L	31	JL	2	018	
-	City CHANHASSEN	State MN		Zip Code 55317-4515		Amoun				PR257 eceipt			
	FEC ID number of contributing federal political committee.	C						9	_	,		400.	00
	Name of Employer (for Individual) Inited HealthCare Services Inc		•	tion (for Individual) I Clin Ops		M	emo	o Ite	эm				
	Receipt For: Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 2800.00]	P/R Dec	lucti	on	(\$200).00 Bi	-Wee	ekly)	
รเ	JBTOTAL of Receipts This Page (optional)			•••••	•			,		. ,		505.	00

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 1'		11b	11c	12				
Any information copied from such Reports and				the pu							
or for commercial purposes, other than using t	me name and a	louress of any political committee	e to solicit	contr	idutions	Irom such	n committe	90.			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle A. JORGE, DEBORAH, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 45 DELPHI ROAD)7	/ D 31		Y Y 2018	Y			
City STAFFORD SPRINGS	State CT	Zip Code 06076-3405				: PR2575 Receipt th	59365113 his Period	4			
FEC ID number of contributing federal political committee.	С				лур. (28.0	00			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Prod		Men	no 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. MILLER, MICHAEL, , ,	Initial) or Full C	Prganization Name	Dat	e of F	Receipt						
Mailing Address 213 MAGILL DRIVE				07	/ D 31		2018	Y			
City GRAFTON	State MA	Zip Code 01519-1328					595651134	1			
FEC ID number of contributing federal political committee.	C					Receipt th	76.6	6			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Business Development Exe		Men	no Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 578.28	P/R I	Deduc	tion (\$38	3.33 Bi-We	eekly)				
Full Name of Individual (Last, First, Middle C. CHIMENTO, LISA, , ,	Initial) or Full C	organization Name	Dat	e of F	Receipt						
Mailing Address 524 FORT WILLIAMS PKW				07 ^M	/ 31		2018	Y			
City ALEXANDRIA	State VA	Zip Code 22304-1849				: PR2575 Receipt th	59615113 his Period	4			
FEC ID number of contributing federal political committee.	С				y .		384.6	60			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ng Dir OptumI Cons		Men	no Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P/R	Deduc	tion (\$19	92.30 Bi-V	Veekly)				
SUBTOTAL of Receipts This Page (optional).					,	. ,	489.2	26			
TOTAL This Period (last page this line number	er only)										

SCHEDULE A (FEC Form 3X) DEOFIDTO

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IT.			Use separate schedule(s)	(che	eck only	/ or	ne)					
			for each category of the Detailed Summary Page	×	11a 13		11b	11c 15		12 16	17	
	y information copied from such Reports and Stat for commercial purposes, other than using the n				for the		pose of	soliciting	g cont	tributio	ons	
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)								
A.	Full Name of Individual (Last, First, Middle Initial IVERSON, LISA, , ,) or Full Or	rganization Name		Date of	Re	ceipt					
	Mailing Address 13341 CARRACH AVENUE				м м 07	1	D D 31	/ Y	۲ 20	18	Y	
	City ROSEMOUNT	State MN	Zip Code 55068-4774					PR2575 eceipt th				
	FEC ID number of contributing federal political committee.	С						-	÷	384.60	0	
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Segment CFO		Me	emo	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P	/R Ded	uctio	on (\$192	2.30 Bi-W	/eekly	()		
в.	Full Name of Individual (Last, First, Middle Initial MCNUTT, DIANE, , ,) or Full Or	rganization Name		Date of	Re	ceipt					
	Mailing Address 11524 ZION ROAD		I	07 / 31 / 2018 Transaction ID : PR2575604551134								
	City BLOOMINGTON	State MN	Zip Code 55437-3636					PR25756 eceipt th				
	FEC ID number of contributing federal political committee.	С	384.60									
	Name of Employer (for Individual) Optum Services, Inc	Occupation (for Individual) Chief Talent Officer				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	<i>י</i>)		
C.	Full Name of Individual (Last, First, Middle Initial COSTA, JOEL, , ,) or Full Or	rganization Name		Date of	Re	ceipt					
	Mailing Address 775 WESTCHESTER AVENUE	State	Zip Code		07	/	31		201			
	SHAKOPEE	MN	55379-4557					PR2575 eceipt th			•	
	FEC ID number of contributing federal political committee.	С					y	y	2	230.7	6	
	Name of Employer (for Individual) Optum Services, Inc	Occu VP F	ipation (for Individual) ïn		Me	emc	tem					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1730.70	P	P/R Ded	ucti	on (\$11	5.38 Bi-V	Veekly	y)		
s	UBTOTAL of Receipts This Page (optional)		•				,	,	ę	999.96	6	
Т	OTAL 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 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									
NAME OF COMMITTEE (In Full)	g the hame and a		e to solicit contributions from such committee.									
UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P/	AC)									
Full Name of Individual (Last, First, Midd KING, SARAH, , ,	le Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 116 CUTLER ROAD			07 31 Y Y Y Y Y 2018									
City GREENWICH	State CT	Zip Code 06831-2511	Transaction ID : PR2575612851134 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) SIs SVP OptumI	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 B. STOCKHOWE, MARK, , ,	le Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 2108 MANOR DRIVE			07 31 Y Y Y Y 2018									
City BURNSVILLE	State MN	Zip Code 55337-2036	Transaction ID : PR2575619951134 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) Director, Advisory Svcs	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, Midd c. WAULTERS, SCOTT, , ,	le Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 4 HEMLOCK COURT			07 / D D / Y Y Y Y 2018									
City MANALAPAN	State NJ	Zip Code 07726-4254	Transaction ID : PR2575622151134 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) United HealthCare Services Inc	Occi COC	upation (for Individual))	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	al)		846.12									
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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 th	he name and a	duress of any political committee	e to solicit co	ontrib	utions fi	rom such	committe	e.		
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle I A. KELLEY BURNS, SUSAN, , ,	nitial) or Full C	rganization Name	Date o	of Re	ceipt					
Mailing Address 2279 STEARNLEE AVE			M 07	VI /	D D 31	/ Y	y y 2018	Y		
City LONG BEACH	State CA	Zip Code 90815-1934					23051134 is Period	1		
FEC ID number of contributing federal political committee.	С				27.8	80				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) /anager Data Analytics		/lemo	Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.98	P/R Dec	ductio	on (\$13.)	90 Bi-We	ekly)			
Full Name of Individual (Last, First, Middle I THOMPSON, BRIAN, , ,	nitial) or Full C	rganization Name	Date o	of Re	ceipt					
Mailing Address 17829 63RD AVE N			M N 07	/	D D 31	/ Y	y y 2018	Ŷ		
City MAPLE GROVE	State MN	Zip Code 55311-4650			-		3465113 4 is Period	l		
FEC ID number of contributing federal political committee.	С						384.6	60		
Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) Bus Segment CEO			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 I WILSON, STEPHEN, , ,	nitial) or Full C	rganization Name	Date o	of Re	ceipt					
Mailing Address 2420 DURHAM MANOR DR			07		31		2018			
City FRANKLIN	State TN	Zip Code 37064-5266					3615113 is Period	1		
FEC ID number of contributing federal political committee.	C				9	, , ,	205.8	6		
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 ▼ 857.84	P/R De	ductio	on (\$102	2.93 Bi-W	/eekly)			
SUBTOTAL of Receipts This Page (optional)					y	,	618.2	6		
TOTAL This Period (last page this line numbe	r only)									

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle A. CLARK, TERRENCE, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 8 COOPER AVENUE			07 31 2018							
City EDINA	State MN	Zip Code 55436-1315	Transaction ID : PR2575636951134 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 CMO	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. CABANILLAS, MARIA, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 2105 SHERIDAN			07 / D D / Y Y Y Y Y 2018							
City HOUSTON	State TX	Zip Code 77030-2107	Transaction ID : PR2575637351134 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) 1 Plan CEO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1038.42	P/R Deduction (\$96.15 Bi-Weekly)							
Full Name of Individual (Last, First, Middle COLLINS, NEIL, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 8465 MISSION HILLS LAN			07 / D D / Y Y Y Y 2018							
City CHANHASSEN	State MN	Zip Code 55317-7712	Transaction ID : PR2575637651134 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) 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).			604.90							
TOTAL This Period (last page this line number	er only)									

Use separate schedule(s)

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IT.	EMIZED RECEIPTS		Use separate schedule(s)	(cł	neck onl	у ог	ne)					
11			for each category of the Detailed Summary Page		X 11a 11b			11c	12			
Ar	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma	Ay not be sold or used by any political committee	erson	for the	pur	14 pose of	15 soliciting	16 contribu	tions		
	NAME OF COMMITTEE (In Full)	name and a		9 10 S			DULIONS		1 commu	ee.		
$\left \right\rangle$	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)								
Α.	Full Name of Individual (Last, First, Middle Ini DAVIS, BENTON, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt					
	Mailing Address 9825 NORTH 53RD PLACE				м м 07	/	D 31	D / Y	ү ү 2018	Y		
	City PARADISE VALLEY	State AZ	Zip Code 85253-1634						63925113 iis Period	4		
	FEC ID number of contributing federal political committee.	С							384.	60		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) GM Clin Comnty Ntwk		M	emo	ttem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2368.09		P/R Ded	ucti	on (\$19	2.30 Bi-W	/eekly)			
в.	Full Name of Individual (Last, First, Middle Ini NICOLL, DEREK, , ,	tial) or Full O	organization Name		Date of	f Re	eceipt					
	Mailing Address 155 MEADOWVIEW LANE			07 D D / Y Y Y Y 31 2018								
	City MEDINA	State MN	Zip Code 55340-4510	-		64865113	4					
	FEC ID number of contributing federal political committee.	С			Amoun				iis Period 115.	40		
	Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 865.50]	P/R Ded	uctio	on (\$57.	.70 Bi-We	ekly)			
<u> </u>	Full Name of Individual (Last, First, Middle Ini HERMAN, CRAIG, , ,	tial) or Full O	Prganization Name		Date of	f Re	eceipt					
	Mailing Address 9609 WYOMING CIRCLE				07	/	31		2018	Y		
	City BLOOMINGTON	State MN	Zip Code 55438-1628						65025113 iis Period	4		
	FEC ID number of contributing federal political committee.	С			Ľ.		y	, ,	384.	60		
	Name of Employer (for Individual) UHC International Services Inc		upation (for Individual) Gen Mgmt									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2692.20						Veekly)			
s	UBTOTAL of Receipts This Page (optional)			•			, ,		884.	60		
Т	OTAL This Period (last page this line number	only)		- •	Γ.							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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	EMIZED RECEIPTS		Detailed Summary Page	×	11a		111	b	11c	12	2								
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	y information copied from such Reports and State for commercial purposes, other than using the na																		
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	C)															
A.	Full Name of Individual (Last, First, Middle Initial, VAN ERT, MARK, , ,) or Full O	rganization Name	Date of Receipt															
	Mailing Address 221 OAKWOOD RD																		
	City	State	Zip Code		Trans	acti	ion	ID : F	R2575	650551	134								
	HOPKINS	MN	55343-8532	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) Gen Mgmt		Me	emo	lte	em											
	Pennint For:		Year-to-Date ▼	-															
	Primary General Other (specify) ▼		210.60	P	/R Ded	uctio	on ((\$14.0	4 Bi-We	eekly)									
В.	Full Name of Individual (Last, First, Middle Initial) HAYHURST, JENNY, , ,) or Full O	rganization Name		Date of	Re	cei	pt											
	Mailing Address 23A MOUNT HYGEIA ROAD			м м 07	/	D	31	/ Y	2018		1								
	City	State	Zip Code	Transaction ID : PR2575651851134															
	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) United HealthCare Services Inc		upation (for Individual) Ntwk Prgms	Memo Item															
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 210.00	P/	ſR Dedi	uctic	on (\$14.0	0 Bi-We	ekly)									
с.	Full Name of Individual (Last, First, Middle Initial) MCFANN, ELENA, , ,) or Full O	rganization Name		Date of	Re	ceip	pt											
	Mailing Address 18925 24TH AVENUE NORTH				^M 07	/		31	/ Y	2018		1							
	City PLYMOUTH	State MN	Zip Code 55447-2072						PR2575										
		11114	JJ447-2072	-	Amount	of	Ead	ch Re	ceipt th	is Peri	od	_							
	FEC ID number of contributing federal political committee.	С				_	y	_	y	38	34.60								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n CEO		M	emo) Ite	əm											
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P	/R Ded	uctio	on ((\$192	.30 Bi-V	/eekly)									
s	UBTOTAL of Receipts This Page (optional)				_					44	0.68								
	OTAL This Period (last page this line number onl			j			7				-	T							

SCHEDULE A (FEC Form 3X) DEOFIDTO

Use separate schedule(s)

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		Use separate schedule(s)	(check on	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a		11b	11c	12				
Any information copied from such Reports and											
or for commercial purposes, other than using t	ne name and a	ddress of any political committee	to solicit co	ontrib	utions ti	rom sucr	i committ	ee.			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (l	JnitedHealth Group PA	(C)								
Full Name of Individual (Last, First, Middle KANE, HEATHER, , ,	Initial) or Full O	rganization Name	Date o	of Re	ceipt						
Mailing Address 3621 N LAKEWOOD AVEN UNIT 3S			07	VI /	D D 31	/ Y	2018	Y			
City CHICAGO	State IL	Zip Code 60613-4842					5745113 is Period	4			
FEC ID number of contributing federal political committee.	С					-	38.4	46			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		/lemo	Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.45	P/R De	ductio	on (\$19.:	23 Bi-We	ekly)				
Full Name of Individual (Last, First, Middle B. PIZZANO, KATHRYN, , ,	Initial) or Full O	rganization Name	Date o	of Re	ceipt						
Mailing Address 387 DEPOT HILL ROAD			07	/	D D D 31	/ Y	2018	Y			
City POUGHQUAG	State NY	Zip Code 12570-5763		Transaction ID : PR2575662151 Amount of Each Receipt this Perio							
FEC ID number of contributing federal political committee.	С				7		246.0	00			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Health Plan Operations		/lemo	Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 646.44	P/R Dec	ductic	on (\$123	.00 Bi-W	'eekly)				
Full Name of Individual (Last, First, Middle HUXLEY, JEFFREY, , ,	Initial) or Full O	rganization Name	Date o	of Re	ceipt						
Mailing Address 2465 EDGERTON ST			07		31	JL	2018				
City LITTLE CANADA	State MN	Zip Code 55117-1674			-		56425113 is Period	4			
FEC ID number of contributing federal political committee.	С				9		28.0)8			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Bus Process		/lemo	Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.60	P/R De	ductio	on (\$14.	04 Bi-We	ekly)				
SUBTOTAL of Receipts This Page (optional).					, .		312.5	54			
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	□						
Any information copied from such Reports a or for commercial purposes, other than using										
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middl A. ZIGLER, JANICE, , ,	e Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 21 TREVINO CIRCLE			07 / D D / Y Y Y Y Y 07 31 2018	Y						
City ANGEL FIRE	State NM	Zip Code 87710	Transaction ID : PR2575665651134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60	0						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In Pres Ntwk 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, Middl B. ALLEN, CARL, , ,	e Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 8675 AZURE SKY DRIVE	1	7. 0.1	07 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Ŷ						
City LAS VEGAS	State NV	Zip Code 89129-2227	Transaction ID : PR2575669351134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		78.00							
Name of Employer (for Individual) Southwest Medical Assoc. Inc.		upation (for Individual) Med Dir	P/R Deduction (\$39.00 Bi-Weekly)							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 585.00								
Full Name of Individual (Last, First, Middl C. BOGATYRENKO, VICTORIA,		rganization Name	Date of Receipt							
Mailing Address 1 FRANKLIN STREET APT 2C			07 / D D / Y Y Y Y 2018	Ŷ						
City EXETER	State NH	Zip Code 03833-2816	Transaction ID : PR2575675451134 Amount of Each Receipt this Period	<u>, </u>						
FEC ID number of contributing federal political committee.	С		192.30	0						
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP I	upation (for Individual) Mktg	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date 769.20	P/R Deduction (\$96.15 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optiona	l)		654.90	0						
TOTAL This Period (last page this line num	ber only)									

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
			13 14 15 16 berson for the purpose of soliciting contributions						
	Ising the name and a	doress of any political committe	ee to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incor	porated PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, M A. MITCHELL, JILL, , ,	liddle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 11499 ASHLEY COU	IRT		07 / D D / Y Y Y Y 07 31 2018						
City INVER GROVE HEIGHTS	State MN	Zip Code 55077-5251	Transaction ID : PR2575678351134 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) outy 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, M B. STIDMAN, CHRISTOPHER,		rganization Name	Date of Receipt						
Mailing Address 6504 CHEROKEE TR			07 / D D / Y Y Y Y Y 2018						
City	State	Zip Code	Transaction ID : PR2575683851134						
EDINA	MN	55439-1109	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) CInt Relationship	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, M C. OCHIPINTI, JOSEPH, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name								
Mailing Address 2751 MEETING PLA			07 / D D / Y Y Y Y 2018						
City ORLANDO	State FL	Zip Code 32814-6136	Transaction ID : PR2575685751134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (opt	ional)		846.12						
TOTAL This Period (last page this line	number only)								

Use separate schedule(s)

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(check only one)

PAGE 158 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
or for commercial purposes, other than using			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	NC)						
Full Name of Individual (Last, First, Middle KOZA, EDWARD, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 2280 BALLARD WAY			07 / D D / Y Y Y Y 2018						
City ELLICOTT CITY	State MD	Zip Code 21042-1719	Transaction ID : PR2575687651134						
		210421113	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		365.00						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
United HealthCare Services Inc	Sr M	/led Dir							
Receipt For:	Aggregate	Year-to-Date 🔻							
Other (specify)		365.00	P/R Deduction (\$365.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. FINE, BRETT, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 707 STONINGTON ROAD			07 31 2018						
City	State	Zip Code	Transaction ID : PR2575692851134						
SILVER SPRING	MD	20902-1549	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) P Corp Strat	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$402.10 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. FARRELL, STEPHEN, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 50 MAJOR DOANE RD			07 31 2018						
City	State	Zip Code	Transaction ID : PR2575696251134						
WELLFLEET	MA	02667-7836	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		76.92						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
United HealthCare Services Inc		Plan CEO							
Receipt For:	Aggregate	Year-to-Date V							
Other (specify)		576.90	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			518.84						
TOTAL This Period (last page this line numb									

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)		adrees of any pointear commute							
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle I MOORE, EDWARD, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 3110 N CHESTNUT ST APT 106			07 31 Y Y Y Y 2018						
City CHASKA	State MN	Zip Code 55318-4594	Transaction ID : PR2575702751134 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) Info Secuirty Risk 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 I B. HERMES, JAMIL, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 9809 BROOKFORD ROAD			07 / D D / Y Y Y Y 2018						
City	State MD	Zip Code	Transaction ID : PR2575705351134						
POTOMAC		20854-2135	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.84						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Sales	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	1						
Other (specify) ▼		216.30	P/R Deduction (\$14.42 Bi-Weekly)						
Full Name of Individual (Last, First, Middle In C. PROKOCKI, ELIZABETH, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 9746 SUNSET HILL DR			07 31 2018						
City LONE TREE	State CO	Zip Code 80124-6720	Transaction ID : PR2575705851134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		455.40						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ? Ntwk	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2494.65	P/R Deduction (\$227.70 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			512.32						
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)						
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle WILSON, D ELLEN, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 400 STUART STREET 25D			07 31 Y Y Y Y Y 2018						
City BOSTON	State MA	Zip Code 02116-5011	Transaction ID : PR2575708851134 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 Human Capital	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. VOLLRATH, MICHELLE, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 7647 MARKER ROAD	1		07 / D D / Y Y Y Y Y Y 2018						
City SAN DIEGO	State CA	Zip Code 92130-5616	Transaction ID : PR2575719851134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		113.68						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP Acct Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 874.70	P/R Deduction (\$56.84 Bi-Weekly)						
Full Name of Individual (Last, First, Middle CREED, JOHN, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 6813 67TH STREET NE	State	Zin Code	07 31 2018						
City ALBERTVILLE	MN	Zip Code 55301-4643	Transaction ID : PR2575720551134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		27.94						
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 ▼ 211.44	P/R Deduction (\$13.97 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			526.22						
TOTAL This Period (last page this line number	er only)								

SCHEDULE A (FEC Form 3X) _____ _

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a		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 co	ontribi	utions fr	om such	committe	ee.			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle A. CRANDALL, KIM, , ,	e Initial) or Full O	rganization Name	Date	of Re	ceipt						
Mailing Address 6016 BRIGIDS CLOSE D	RIVE		м 07	VI /	D D 31	/ Y	2018	Y			
City DUBLIN	State OH	Zip Code 43017-3428					3125113 is Period	4			
FEC ID number of contributing federal political committee.	С				7		28.0)8			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops		Nemo	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 HELLAND, ROBYN, , ,	Initial) or Full O	rganization Name	Date	of Re	ceipt						
Mailing Address 9089 PARTRIDGE RD					07 31 / Y Y Y Y 2018						
City MINNETRISTA	State MN	Zip Code 55375-4513			-		33851134	l			
FEC ID number of contributing federal political committee.	С				Amount of Each Receipt this Period						
Name of Employer (for Individual) United HealthCare Services Inc					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 OLSON, KRISTIN, , ,	e Initial) or Full O	rganization Name	Date	of Re	ceipt						
Mailing Address 5901 TRACY AVENUE			07		31		2018				
City EDINA	State MN	Zip Code 55436-2516			-		3445113 is Period	4			
United HealthCare Services Inc				_	9	.,	27.9	98			
		upation (for Individual) Compli		Vemo	Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 211.06	P/R De	ductio	on (\$13.9	99 Bi-We	ekly)				
SUBTOTAL of Receipts This Page (optional)				,	. ,	84.1	4			
TOTAL This Period (last page this line numl	per only)										

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
			13 14 15 16 verson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	prated PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Mid KNORR, MOLLY, , ,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1144 PROSPECT AVE	NUE		07 31 / Y Y Y Y Y						
City HARTFORD	State CT	Zip Code 06105-1124	Transaction ID : PR2575735451134 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) ? Risk Adjustment	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, Mid GROSKLAGS, JEFFREY, , ,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3233 TIMBERWOLF CI		Zin Oad-	07 / D D / Y Y Y Y 2018						
City PRIOR LAKE	State MN	Zip Code 55372-3272	Transaction ID : PR2575735751134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С								
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) Fin	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, Mid WINKEY, TRAVIS, , ,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2103 SUGARWOOD D			07 / D D / Y Y Y Y Y 2018						
City LONG LAKE	State MN	Zip Code 55356-9388	Transaction ID : PR2575735851134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		416.66						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) S Chief Dev Officer	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 416.66	P/R Deduction (\$416.66 Bi-Weekly)						
SUBTOTAL of Receipts This Page (option	nal)		685.88						
TOTAL This Period (last page this line nu	mber only)								

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 e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle KRAL, JESSICA, , ,	e Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 4358 COOLIDGE AVE			07 / D D / Y Y Y Y Y 2018						
City SAINT LOUIS PARK	State MN	Zip Code 55424-1020	Transaction ID : PR2575736151134						
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2257.22	P/R Deduction (\$248.50 Bi-Weekly)						
Full Name of Individual (Last, First, Middle MURRAY, THOMAS, , ,	e Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 10 CIRCLE WEST			07 / D D / Y Y Y Y 07 31 2018						
City EDINA	State MN	Zip Code 55436-1313	Transaction ID : PR2575736551134 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 COO	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. CESARETTI, GINA, , ,	e Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 5020 CIRCLE DOWN			07 / D D / Y Y Y Y Y 2018						
City GOLDEN VALLEY	State MN	Zip Code 55416-1304	Transaction ID : PR2575739051134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) uty Gen Counsel Mgr	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)		1266.20						
TOTAL This Period (last page this line num	ber only)	••••••							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

FOR LINE NUMBER:

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			Use separate schedule(s)	(che	(check only one)						
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a	11b	11c	12			
	y information copied from such Reports and Sta for commercial purposes, other than using the r										
$\overline{\}$	NAME OF COMMITTEE (In Full)	//									
	UnitedHealth Group Incorporated	I PAC (l	UnitedHealth Group P	PAC)							
A.	Full Name of Individual (Last, First, Middle Initia STRICKLAND, JULIE, , ,	ll) or Full O	Drganization Name		Date of	Receipt					
	Mailing Address 3207 SUNNYWOOD DRIVE				м м 07	/ D 1	р / Ү	2018	Y		
	City FULLERTON	State CA	Zip Code 92835-1858			ction ID : of Each F		7 4095113 4 iis Period	1		
	FEC ID number of contributing federal political committee.	С				-	-	28.0	0		
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Mktg Cnslt		Me	mo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00		/R Dedu	ction (\$14	.00 Bi-We	eekly)			
в.	Full Name of Individual (Last, First, Middle Initia WAITE, STEPHANIE, , ,	ll) or Full O	Drganization Name		Date of	Receipt					
	Mailing Address 2501 S HORIZON DR				07 31 / Y Y Y Y Y Y 2018						
	City APPLETON	State WI	Zip Code 54915-5851					7 4325113 4 his Period	<u> </u>		
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period						
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) od Mgr		Me	mo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P .	/R Dedu	ction (\$14	.04 Bi-We	ekly)			
С.	Full Name of Individual (Last, First, Middle Initia PORTZ, THOMAS, , ,	l) or Full O	Drganization Name		Date of	Receipt					
	Mailing Address 2119 SHERIDAN HILLS RD	1 -			м м 07	/ D 1		2018			
	City WAYZATA	State MN	Zip Code 55391-2327			of Each F		74455113 iis Period	4		
	FEC ID number of contributing federal political committee.	С				y		28.0)8		
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP F	cupation (for Individual) Fin		Me	mo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.60		/R Dedu	ction (\$14	.04 Bi-We	eekly)			
s	UBTOTAL of Receipts This Page (optional)							84.1	6		
т	OTAL This Period (last page this line number or	וy)		•		-	, , ,				

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 11b 11c 12							
			13 14 15 16 17 erson for the purpose of soliciting contributions							
	ing the name and a	ddress of any political committe	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 A. PINERSKI, JENNIFER, , ,		rganization Name	Date of Receipt							
Mailing Address 3424 BRYANT AVE S MINNEAPOLIS	#2		07 31 2018							
City MINNEAPOLIS	State MN	Zip Code 55408-4110	Transaction ID : PR2575752851134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		83.32							
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 ▼ 541.58	P/R Deduction (\$41.66 Bi-Weekly)							
Full Name of Individual (Last, First, Mic LAMOINE, DAVID, , ,	Idle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 3607 W 89TH ST			07 31 2018							
City BLOOMINGTON	State MN	Zip Code 55431-1826	Transaction ID : PR2575755151134 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) Director Technology	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, Mid C. FULTON, RYAN, , ,	Idle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 805 LANEWOOD LAN	ENORTH		07 / D D / Y Y Y Y 2018							
City PLYMOUTH	State MN	Zip Code 55447-4347	Transaction ID : PR2575756951134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		27.80							
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 211.98	P/R Deduction (\$13.90 Bi-Weekly)							
SUBTOTAL of Receipts This Page (option	nal)		188.04							
TOTAL This Period (last page this line n	umber only)									

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ITEMIZED RECEIPTS			Use separate schedule(s)		(check only one)						
11			for each category of the Detailed Summary Page	X 11:	-	11b 14	11c		2 6	17	
	y information copied from such Reports and S for commercial purposes, other than using the			erson for t	he pu	irpose of	soliciting	g cont	ributio	ons	
	NAME OF COMMITTEE (In Full)										
$\left \right\rangle$	UnitedHealth Group Incorporate	ed PAC (l	UnitedHealth Group PA	AC)							
Α.	JOHNSON, KURT, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name JOHNSON, KURT, , ,									
	Mailing Address 8351 E REDFIELD RD			0	7 7	/ D D D 31) / Y	y 201	8		
	City SCOTTSDALE	State AZ	Zip Code 85260-3535			tion ID : f Each R					
	FEC ID number of contributing federal political committee.	С							77.00)	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Director Data Science		Merr	no Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 308.00	P/R D	educ	tion (\$38.	.50 Bi-We	eekly)			
в.	Full Name of Individual (Last, First, Middle Init LOWE, JANET, , ,	tial) or Full O	Organization Name	Date	e of R	leceipt					
	Mailing Address 2439 BROADMONT DRIVE	State Zip Code			07 / D D / Y Y Y Y Y 2018						
	City	State MO	Transaction ID : PR2575758651134								
	CHESTERFIELD		63017-7801	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C							30.76	6	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Acct Mgmt TPA		Mem	no Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.70			P/R Deduction (\$15.38 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Init EKLO, BENJAMIN, , ,	tial) or Full O	Organization Name	Date	e of R	leceipt					
	Mailing Address 3942 CAMPELLO CURVE				7	/ 31) / Y	201			
	City CHASKA	State MN	Zip Code 55318-4639			tion ID : f Each R					
	FEC ID number of contributing federal political committee.	С			384.60						
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP F	upation (for Individual) Fin		Merr	no Item					
	Receipt For: Primary General Other (specify)	Aggregate	P/R I	Deduc	tion (\$19)	2.30 Bi-V	Veekly	()			
s	UBTOTAL of Receipts This Page (optional)					, .	. ,	4	92.36	3	
т	OTAL This Period (last page this line number	only)							-		

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1							
Any information copied from such Reports and Sta or for commercial purposes, other than using the			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group PA	NC)							
Full Name of Individual (Last, First, Middle Initi A. NEESE, LARRY, , ,	al) or Full O	rganization Name	Date of Receipt							
Mailing Address 309 DUNLEIGH COURT			07 31 2018							
City	State	Zip Code	Transaction ID : PR2575766151134							
MADISON	MS	39110-6806	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 SIs & AM-Producing	Memo Item							
Receipt For: Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$14.04 Bi-Weekly)							
Other (specify) ▼	L	210.60								
Full Name of Individual (Last, First, Middle Initi CUNNINGHAM, MICHAEL, , ,	al) or Full O	rganization Name	Date of Receipt							
Mailing Address 50 SOUTH 16TH STREET UNIT 4706			07 31 Y Y Y Y 2018							
City Phil Adel Phia	State PA	Zip Code	Transaction ID : PR2575767851134							
		19102-2534	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 NA Acct	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 Initi MONTOYA, MATTHEW, , ,	al) or Full O	rganization Name	Date of Receipt							
Mailing Address 12370 BRADFORD DR			07 / D D / Y Y Y Y 2018							
City PARKER	State CO	Zip Code 80134-3609	Transaction ID : PR2575777651134 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 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)			440.68							
TOTAL This Period (last page this line number o										

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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. ROEPKE, KRISTIN, , ,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 11828 200TH STREET			07 31 2018						
City SILVER LAKE	State MN	Zip Code 55381-6069	Transaction ID : PR2575777751134 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) Human Capital 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 B. MULLINS, CHRISTOPHER, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 15560 SMITHFIELD PLAC			07 / D D / Y Y Y Y 07 31 2018						
City CENTREVILLE	State VA	Zip Code 20120-4901	Transaction ID : PR2575778751134						
	•••	20120-4901	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) n Plan CEO	Memo Item						
Receipt For:	Aggregate	Year-to-Date V							
Other (specify) ▼		288.45	P/R Deduction (\$19.23 Bi-Weekly)						
Full Name of Individual (Last, First, Middle MADDUX, SUSAN, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 16426 FARMERS MILL LA	1		07 31 Y Y Y Y Y 2018						
City CHESTERFIELD	State MO	Zip Code 63005-4549	Transaction ID : PR2575783851134 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) Clin Pharm	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)			94.62						
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 11a 11b 11c 12 13 14 15 16 17						
			person for the purpose of soliciting contributions te to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Midd A. BERGDOLL, JENNIFER, , ,	le Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 523 LOS DOLCES ST			07 31 2018						
City LAS VEGAS	State NV	Zip Code 89138-4559	Transaction ID : PR2575793751134 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) Human Capital Partner	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. JELINEK, TROY, , ,	le Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 16601 S MOUNTAIN STO			07 31 2018						
City PHOENIX	State AZ	Zip Code 85048-2080	Transaction ID : PR2575795651134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		111.10						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) CInt Svc Acct Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 388.85	P/R Deduction (\$55.55 Bi-Weekly)						
Full Name of Individual (Last, First, Middl C. MAURER, CARRIE, , ,	le Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2899 EDGEWATER CO			M M / D D / Y Y Y Y 07 31 2018						
City WOODBURY	State MN	Zip Code 55125-8705	Transaction ID : PR2575798151134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optiona	al)		572.62						
TOTAL This Period (last page this line nun	nber only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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		1 1a		11b	11c	12	1 47		
	y information copied from such Reports and Sta for commercial purposes, other than using the n											
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)								
A.	Full Name of Individual (Last, First, Middle Initia SANKEN, SARA, , ,	l) or Full Or	rganization Name		Date of	Re	eceipt					
Mailing Address 3018 ASPEN LAKE DRIVE					07 31 2018							
	City BLAINE	State MN	Zip Code 55449-7517					PR25757				
	FEC ID number of contributing federal political committee.	С							28.	08		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) nan Capital Partner Mgr		Me	emc	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	F	P/R Dedu	ucti	on (\$14	.04 Bi-We	eekly)			
в.	Full Name of Individual (Last, First, Middle Initia WIX, LACOSTA, , ,	l) or Full Or	rganization Name		Date of	Re	eceipt					
	Mailing Address 910 MANILA ST					1	31	/ Y	2018	Y		
	City NASHVILLE	State TN	Zip Code 37206-3437	-				PR25758		4		
	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) Dir Regl Affs				Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 587.50	P/R Deduction (\$37.50 Bi-Weekly)								
C.	Full Name of Individual (Last, First, Middle Initia GALIAN, SANDRA, , ,	l) or Full Or	rganization Name		Date of	Re	eceipt					
	Mailing Address 120 SEQUAMS LANE WEST				M M 07	1	31		2018 [°]			
	City WEST ISLIP	State NY	Zip Code 11795-4549					PR25758 leceipt th				
	FEC ID number of contributing federal political committee.	С			<u> </u>		y 1	. ,	111.	00		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Itwk Contrctng		Me	emo	tem					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 388.50	P/R Deduction (\$55.50 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)		••••••				, .	. ,	214.	08		
т	OTAL This Period (last page this line number on	ly)	•••••	-			,	. .				

SCHEDULE A (FEC Form 3X) - DEAEIDTA

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			Use separate schedule(s)	(che	(check only one)						
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12		
	y information copied from such Reports and Stat for commercial purposes, other than using the n										
	NAME OF COMMITTEE (In Full)			10 00							
\rangle	UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)							
Α.	Full Name of Individual (Last, First, Middle Initia LEVINE, CAROL, , ,	l) or Full Or	rganization Name		Date of	Red	ceipt				
	Mailing Address 9100 LARKSPUR LANE	1			м м 07	/	D D D 31	/ Y	2018	Ŷ	
	City EDEN PRAIRIE	State MN	Zip Code 55347-2004						80335113 is Period	4	
	FEC ID number of contributing federal political committee.	С					y- 1		384.	60	
Optum Services, Inc			upation (for Individual) Gen Mgmt		Me	mo	Item				
			Year-to-Date ▼ 2884.50	P	/R Dedu	ictio	n (\$192	2.30 Bi-W	/eekly)		
в.	Full Name of Individual (Last, First, Middle Initial HJERPE, ADAM, , ,	l) or Full Or	rganization Name		Date of	Red	ceipt				
Mailing Address 13932 UTAH AVE S					07 / D D / Y Y Y Y 2018						
	City SAVAGE	State MN	Zip Code 55378-2159						0625113 is Period	4	
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) Chief of Staff			384.60						
	Name of Employer (for Individual) United HealthCare Services Inc				Me	mo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)							
C.	Full Name of Individual (Last, First, Middle Initial LUKENBILL, JAMES, , ,	l) or Full Or	rganization Name		Date of	Red	ceipt				
	Mailing Address 1608 SIENNA DR	1			м м 07	/	D D D 31	/ Y	ү ү 2018	Y	
	City CEDAR PARK	State TX	Zip Code 78613-4061				-		30815113 is Period	4	
	FEC ID number of contributing federal political committee.	С					y .	, ,	27.	80	
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Fech Proj-Prgm Mgmt		Me	emo	ltem				
Receipt For: Aggrega Primary General Other (specify)			Year-to-Date ▼ 211.98	P/R Deduction (\$13.90 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)						,		797.	00	
т	OTAL This Period (last page this line number on	ly)	••••••••••••••••••••••••••••••••••••••				,				

SCHEDULE A (FEC Form 3X) _____ _

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
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 RUSSELL, LAURIE, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 3108 SONIA DRIVE			M M / D D / Y Y Y Y 07 31 2018						
City LAS VEGAS	State NV	Zip Code 89107-3246	Transaction ID : PR2575812151134 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) t Affs Dir	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 B. SHAPIRO , DAVID , , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 5215 MORGAN AVENUE S	Mailing Address 5215 MORGAN AVENUE SOUTH								
City MINNEAPOLIS	State MN	Zip Code 55419-1026	Transaction ID : PR2575814251134 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) Gen Mgmt	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 SEXTON, ELLEN, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 14750 CRESTWOOD COL	1		07 / D D / Y Y Y Y Y 2018						
City ELM GROVE	State WI	Zip Code 53122-1603	Transaction ID : PR2575823251134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			847.20						
TOTAL This Period (last page this line numb	er 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	X 11a 11b 11c 12 13 14 15 16 17						
			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 MCNATT, RICHARD, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1120 KENSINGTON CO	JRT		07 31 Y Y Y Y Y 2018						
City ALPHARETTA	State GA	Zip Code 30022-6274	Transaction ID : PR2575824951134 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 Receipt For:	VP	upation (for Individual) SIs Ops	Memo Item						
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. BRADLEY, JOEL, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 300 WHITE MOSS PLAC			07 31 / Y Y Y Y Y 07 31 2018						
City FRANKLIN	State TN	Zip Code 37064-8628	Transaction ID : PR2575825851134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		36.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Dir	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 276.90	P/R Deduction (\$18.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middl C. KAUFMAN, PHILIP, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1680 NORTH FARM RO			07 / D D / Y Y Y Y 2018						
City ORONO	State MN	Zip Code 55356-9309	Transaction ID : PR2575829851134 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 (optiona	l)		498.44						
TOTAL This Period (last page this line num	ber only)								

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 t			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)							
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)				
Full Name of Individual (Last, First, Middle HUNTLEY, MICHELLE, , ,	Initial) or Full C	organization Name	Date of Receipt				
Mailing Address 19503 HARMONY AVE			07 / D D / Y Y Y Y 07 31 2018				
City ROGERS	State MN	Zip Code 55374-4843	Transaction ID : PR2575832051134 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) outy 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 HARPER, JENNIFER, , ,		organization Name	Date of Receipt				
Mailing Address 8206 WEST 16TH STREET		Zin Onde	07 D D / Y Y Y Y 31 2018				
City SAINT LOUIS DARK	State MN	Zip Code	Transaction ID : PR2575835551134				
SAINT LOUIS PARK		55426-1904	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) outy Gen Counsel Mgr	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 C. JERDE, MARY, , ,	Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 304 EAST VERA LANE	04-1-	Zin Oode	07 / D D / Y Y Y Y 2018				
City TEMPE	State AZ	Zip Code 85284-4036	Transaction ID : PR2575837451134 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 Clin 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).			489.60				
TOTAL This Period (last page this line number	er 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					
	y information copied from such Reports and Sta for commercial purposes, other than using the r			erson for the purpose of soliciting contributions	17				
$\overline{)}$	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 MANDELL, WILLIAM, , ,	al) or Full O	rganization Name	Date of Receipt					
	Mailing Address 720 MISSION HILL WAY			07 31 2018					
	City COLORADO SPRINGS	State CO	Zip Code 80921-2672	Transaction ID : PR2575837851134 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) d Dir	Memo 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 BEESON, MARY JANE, , ,	al) or Full O	organization Name	Date of Receipt					
	Mailing Address 204 BLUE INDIGO CT			07 / 07 / 07 / 2018					
	City PONTE VEDRA BEACH	State FL	Zip Code 32082-6543	Transaction ID : PR2575839551134 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) Gen Mgmt	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1442.25	P/R Deduction (\$96.15 Bi-Weekly)					
с.	Full Name of Individual (Last, First, Middle Initia HARRISON, CHARLES, , ,	al) or Full O	organization Name	Date of Receipt					
	Mailing Address 10603 MILLET SEED HILL			07 31 2018					
	City COLUMBIA	State MD	Zip Code 21044-4150	Transaction ID : PR2575840351134 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	Occu Med	upation (for Individual) I 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)			248.46	1				
т	OTAL This Period (last page this line number or	nly)							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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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 Statem for commercial purposes, other than using the nam				or the		pose	e of s	oliciting	contribu	tions			
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated P	PAC (UnitedHealth Group PA	C)										
Α.	Full Name of Individual (Last, First, Middle Initial) of WILLIAMS, DALE, , ,	or Full C	Organization Name		Date of Receipt									
	Mailing Address 121 CHOCTAW CIRCLE	State	Zip Code	07 31 2018 Transaction ID : PR2575849251134										
	CHANHASSEN	MN	55317-9505	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.)		28.08										
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) Proj Mgmt	Memo Item										
	Receipt For: Ag Primary General Other (specify) ▼	gregate	e Year-to-Date ▼ 210.60	P/	P/R Deduction (\$14.04 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name BOROCH, BLAIR, , ,						Date of Receipt							
	Mailing Address 800 BELFRY DRIVE						D	31	/ Y	2018	Y			
	,	State PA	Zip Code 19422-1210				-			3 4995113 iis Period	4			
	FEC ID number of contributing federal political committee.	C					80.00							
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) r, Health Plan Operations	Memo Item										
	Receipt For: Ag Primary General Other (specify) ▼	gregate	e Year-to-Date ▼ 492.30	P/	R Ded	uctic	on (S	\$40.0	0 Bi-We	ekly)				
C.	Full Name of Individual (Last, First, Middle Initial) c GOLDEN, WILLIAM, , ,	or Full C	Organization Name		Date of	f Re	eceip	pt						
	Mailing Address 106 SOUND COURT				^M 07	/	L	31		2018				
	5	State NY	Zip Code 11768-3527							85935113 iis Period	4			
	FEC ID number of contributing federal political committee.)			anoun		Lat			192.	30			
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) gn CEO		М	emo	o Ite	em						
	Receipt For: Ag Primary General Other (specify) Image: Constraint of the second	gregate	e Year-to-Date ▼ 3942.25	P/	R Ded	luctio	on ((\$96.1	5 Bi-We	eekly)				
s	UBTOTAL of Receipts This Page (optional)		•	[9		9	300.	38			
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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 Full)	ng the name and a								
UnitedHealth Group Incorpo	orated PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Mid COTTINGTON, NYLE BRENT, , ,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 15050 47TH STREET N	1E		07 31 Y Y Y Y Y 2018						
City SAINT MICHAEL	State MN	Zip Code 55376-1613	Transaction ID : PR2575865351134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		129.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Acctng	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 787.62	P/R Deduction (\$64.80 Bi-Weekly)						
Full Name of Individual (Last, First, Mid B. ROSS, CHRISTY, , ,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 211 JIM CANNON RD			07 31 / Y Y Y Y Y 2018						
City	State	Zip Code	Transaction ID : PR2575873351134						
VAN ALSTYNE	ТХ	75495-2803	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		77.00						
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 ▼ 308.00	P/R Deduction (\$38.50 Bi-Weekly)						
Full Name of Individual (Last, First, Mid C. PEZHMAN, PAYMAN, , ,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3016 GROVELAND SC			07 / D D / Y Y Y Y Y 2018						
City WAYZATA	State MN	Zip Code 55391-2816	Transaction ID : PR2575883551134 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)						
SUBTOTAL of Receipts This Page (option	nal)		591.20						
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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	AME OF COMMITTEE (In Full) InitedHealth Group Incorporated	PAC (U	InitedHealth Group PA	AC)								
	ull Name of Individual (Last, First, Middle Initial ANGAN, PATRICK, , ,) or Full Or	ganization Name		Date of	Re	ceipt					
Mailing Address 405 MEADOW LANE					07 31 2018							
	ity ENSON	State MN	Zip Code 56215-1033						38505113 is Period	4		
	EC ID number of contributing deral political committee.	С					.	 	194.	00		
Name of Employer (for Individual)OUnited HealthCare Services IncV			pation (for Individual)		Me	emo	Item					
R	eceipt For: Primary General Other (specify) ▼	Aggregate \	/ear-to-Date ▼ 1455.00]	P/R Dedu	uctio	on (\$97.	00 Bi-We	ekly)			
	ull Name of Individual (Last, First, Middle Initial RANDALL, RHONDA, , ,) or Full Or	ganization Name		Date of	Re	ceipt					
	ailing Address 48 INTERLAKEN ROAD			07 / D D / Y Y Y 2018					Y			
	ity IRLANDO	State Zip Code FL 32804-3418							8965113	4		
FI	EC ID number of contributing deral political committee.	C				Amount of Each Receipt this Period						
N Ui	ame of Employer (for Individual) nited HealthCare Services Inc	Occupation (for Individual) Bus Seg Chief Med Off			Memo Item							
R	eceipt For: Primary General Other (specify) ▼	Aggregate	/ear-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)								
	ull Name of Individual (Last, First, Middle Initial MARGHERIO, MICHAEL, , ,) or Full Or	ganization Name		Date of	Re	ceipt					
_	ailing Address 111 W 67TH STREET				07	1	D D D 31	/ Y	2018	Y		
	ity KANSAS CITY	State MO	Zip Code 64113-2405				-		91635113 is Period	4		
	EC ID number of contributing deral political committee.	С			<u> </u>		y	- y	76.	92		
U	ame of Employer (for Individual) nited HealthCare Services Inc		pation (for Individual) A VP SIs Acct Mgt		Me	emc	tem					
R	eceipt For: Primary General Other (specify)	Aggregate	/ear-to-Date ▼ 538.44	1	P/R Ded	ucti	on (\$38.	.46 Bi-We	ekly)			
SUE	3TOTAL of Receipts This Page (optional)		••••••	•			, .		299.0	00		
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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		4 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	contribut	ions	
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	J PAC (L	JnitedHealth Group PA	AC)							
A.	Full Name of Individual (Last, First, Middle Initia JENSEN PFIEFFER, KIM, , ,	al) or Full Or	rganization Name		Date of	Re	ceipt				
	Mailing Address 9449 ASPEN RD				м м 07	/	D D D 31	/ Y	2018	Y	
	City LAKEVILLE	State MN	Zip Code 55044-8148	_					92975113 is Period	4	
	FEC ID number of contributing federal political committee.	С					.	-	76.9	92	
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Acctng		Me	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90		P/R Dedu	uctio	on (\$38.	46 Bi-We	ekly)		
B.	Full Name of Individual (Last, First, Middle Initia MCGOLDRICK, CHRISTOPHER, , ,		rganization Name		Date of	Re	ceipt				
	Mailing Address 48 MOUNTAIN TERRACE ROA	g Address 48 MOUNTAIN TERRACE ROAD			м м 07	/	31	J L	2018		
	WEST HARTFORD	CT	Zip Code 06107-1533				-		30451134 is Period	1	
	FEC ID number of contributing federal political committee.	Occupation (for Individual) Natl VP SIs & Bus Dev			28.08						
	Name of Employer (for Individual) United HealthCare Services Inc				Me	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$14.04 Bi-Weekly)								
C.	Full Name of Individual (Last, First, Middle Initia MEDEIROS, MICHAEL, , ,	al) or Full Or	rganization Name		Date of	Re	ceipt				
	Mailing Address 7112 LANGMUIR DRIVE	1-			м м 07	/	D D D 31		2018		
	City MCKINNEY	State TX	Zip Code 75071-4606	_					93065113 is Period	4	
	FEC ID number of contributing federal political committee.	С			Ē	_	y	,	78.0	00	
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Int Mgmt NA Accts		Me	emo	Item				
	Receipt For: Primary General Other (specify)	Aggregate	Aggregate Year-to-Date ▼ 585.00				on (\$39.	00 Bi-We	eekly)		
	UBTOTAL of Receipts This Page (optional)			▶ -	ļ.	_	y .	5	183.0	00	
Т	OTAL This Period (last page this line number or	nly)	••••••	•			_				

SCHEDULE A (FEC Form 3X) _____ _

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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 the			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle I A. ZITZER, CHRISTOPHER, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 2848 FRANCE AVE S			M M / D D / Y Y Y Y 07 31 2018						
City ST LOUIS PARK	State MN	Zip Code 55416-4204	Transaction ID : PR2575933351134 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)						
Full Name of Individual (Last, First, Middle I B. MATTERA, RICHARD, , ,									
Mailing Address 483 HIGHCROFT ROAD			07 31 2018						
City WAYZATA	State MN	Zip Code 55391-1548	Transaction ID : PR2575938451134 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) Group 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 I C. STANDIG, LAUREN, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 8660 FARLEY WAY			07 31 2018						
City FAIR OAKS	State CA	Zip Code 95628-5352	Transaction ID : PR2575939851134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		30.00						
Name of Employer (for Individual) United HealthCare Services Inc	Occ Mec	upation (for Individual) I Dir	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$15.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			491.52						
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

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				or each category of the Detailed Summary Page		K 11a 13		11		11c	12	17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the n	ements ma ame and a	ay r addr	ot be sold or used by any pe ess of any political committee	erson e to s	for the	e pur ontrib	rpos	e of s	soliciting	g contrib	utions
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Un	itedHealth Group PA	AC)							
A.	Full Name of Individual (Last, First, Middle Initial RILEY, FELICITY, , ,) or Full O	Drga	nization Name		Date of Receipt						
	Mailing Address 2315 BEVERLY ROAD					м 07	VI /		31	/ Y	үүү 2018	Y
	City SAINT PAUL	State MN		Zip Code 55104-5003							9433511	-
	FEC ID number of contributing federal political committee.	С		55104-5005		Amour	nt of	Ea	ch Re	eceipt th	nis Perio 217	
	Name of Employer (for Individual) United HealthCare Services Inc		cupa Tax	tion (for Individual)		Ν	/lemc	o Ite	эm			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 1419.66	'	P/R De	ducti	ion ((\$108	.69 Bi-V	Veekly)	
в.	Full Name of Individual (Last, First, Middle Initial CIRAFESI, JUDY, , ,) or Full O	Drga	nization Name		Date of	of Re	ecei	pt			
	Mailing Address 820 BETZ CREEK ROAD			_		[™] 07	VI /		31	/ Y	2018	Y
	City SAVANNAH	State GA		Zip Code 31410-2602							9 535511 nis Perio	
	FEC ID number of contributing federal political committee.	С				[]		-		y -	28	8.08
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) k Prgms		Ν	/lemc	o Ite	∍m			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 210,60	F	P/R De	ductio	ion (\$14.C)4 Bi-We	eekly)	
с.	Full Name of Individual (Last, First, Middle Initial SALVO, GIANCARLO, , ,) or Full O	Drga	nization Name		Date of	of Re	ecei	pt			
	Mailing Address 1027 SW 149 LANE	1				^M 07	VI /		31	/ Y	2018 [°]	Y
	City SUNRISE	State FL		Zip Code 33326-1957							9649511	
	FEC ID number of contributing federal political committee.	C				Amour	nt of	Ea	ch Re	eceipt th		d .92
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) eg SIs Dir		N	Nemo	o Ite	эm			
	Receipt For: Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 576.90		P/R De	ducti	ion	(\$38.4	46 Bi-W	eekly)	
s	UBTOTAL of Receipts This Page (optional)				•				_		322	.38
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SCHEDULE A (FEC Form 3X) DEAEIDTA

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ı ب	EMIZED RECEIPTS		Use separate schedule(s)	(cł	neck onl	у о	ne)							
11			for each category of the Detailed Summary Page		× 11a]11b	11c	12	<u> </u>				
	y information copied from such Reports and S													
or	for commercial purposes, other than using the	e name and a	ddress of any political committee	e to s	solicit co	ntrik	outions f	rom such	n committ	90.				
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)										
Α.	Full Name of Individual (Last, First, Middle Ini KISCH, DAVID, , ,		rganization Name		Date of Receipt									
	Mailing Address 7715 GIBRALTER TERRACE				07 31 2018									
	City APPLE VALLEY	State MN	Zip Code 55124-6124					PR25759 leceipt th	6605113 is Period	4				
	FEC ID number of contributing federal political committee.	C			_			-	30.0	00				
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		М	emo	tem Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 225.00]	P/R Ded	ucti	on (\$15.	.00 Bi-We	ekly)					
в.	Full Name of Individual (Last, First, Middle Ini DICELLO, MARK, , ,	tial) or Full O	rganization Name	Date of Receipt										
	Mailing Address 619 SAND CRANE CT			07 / 31 / 2018 Transaction ID : PR2575977951134										
		State FL	Zip Code							1				
	BRADENTON	FL	34212-5226	_	Amoun	t of	Each F	leceipt th	is Period					
	FEC ID number of contributing federal political committee.	С			Ľ.				28.0	00				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng		M	emo	o Item							
	Receipt For:	Aggregate	Year-to-Date ▼				(\$\$4.4	00 D' M/-	-11-2					
	Other (specify) V		, 210.00	"	P/R Dea	ucti	on (\$14.	00 Bi-We	екіу)					
с.	Full Name of Individual (Last, First, Middle Ini RICHARDS, ALISON, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt							
	Mailing Address 257 WEST GRANTLEY				м м 07	1	31) / Y	2018	Y				
	City ELMHURST	State IL	Zip Code 60126-2237						98795113 is Period	4				
	FEC ID number of contributing federal political committee.	С			<u> </u>		y 1		384.6	60				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ? NA Strat Initiv		М	emo	o Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50]	P/R Ded	lucti	on (\$19	2.30 Bi-W	/eekly)					
s	UBTOTAL of Receipts This Page (optional)		•	•			y	,	442.6	60				
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	y information copied from such Reports and Sta for commercial purposes, other than using the r			rson for the		pose of s	soliciting	contribut	ions		
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	C)							
A.	Full Name of Individual (Last, First, Middle Initia GOLD, PAMELA, , ,	l) or Full O	rganization Name	Date of	of Re	ceipt					
	Mailing Address 8370 DYNASTY WAY			07 31 2018							
	City SALT LAKE CITY	State UT	Zip Code 84121-6089					98865113 is Period	4		
	FEC ID number of contributing federal political committee.	С				-	- 	28.0	00		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs Acct Mgt		/lemo	ltem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R De	ductio	on (\$14.0)0 Bi-We	ekly)			
в.	Full Name of Individual (Last, First, Middle Initia SCHULTZ, STACY, , ,	l) or Full O	rganization Name	Date o	of Re	ceipt					
	Mailing Address 4012 S XERXES AVENUE	01-1-		07	И /	^D 31	/ Y	2018	Y		
	City MINNEAPOLIS	State MN	Zip Code 55410-1146			-		990951134 is Period	1		
	FEC ID number of contributing federal political committee.	С						76.9	92		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) buty Gen Counsel		/lemo	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Dec	ductic	on (\$38.4	ŀ6 Bi-W€	eekly)			
с.	Full Name of Individual (Last, First, Middle Initia BRIGGS, MARC, , ,	l) or Full O	rganization Name	Date o	of Re	ceipt					
	Mailing Address 13534 TUSCALEE HILL CIR			M 7		D D D 31	/ Y	2018	Ŷ		
	City DRAPER	State UT	Zip Code 84020-5653					00165113 is Period	4		
	FEC ID number of contributing federal political committee.	С				y	, ,	406.0	00		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Лето	ttem					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2759.34	P/R De	ductio	on (\$203	.00 Bi-V	/eekly)			
s	UBTOTAL of Receipts This Page (optional)		•			,	.,	510.9	2		
т	OTAL This Period (last page this line number or	ıly)	••••••								

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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		1 1a		11b	11c	12		
	y information copied from such Reports and Sta for commercial purposes, other than using the r										
	NAME OF COMMITTEE (In Full)		duress of any pointear committee	10 30							
\rangle	UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	C)							
A.	Full Name of Individual (Last, First, Middle Initia SANN, DAVID, , ,	al) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 8326 ELKO DRIVE			07 31 2018							
	City ELLICOTT CITY	State MD	Zip Code 21043-6913	_					02645113 is Period	4	
	FEC ID number of contributing federal political committee.	С							84.6	62	
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Clin Ops		Me	emo	ltem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 634.65	F	P/R Dedu	uctic	on (\$42.	31 Bi-We	ekly)		
в.	Full Name of Individual (Last, First, Middle Initia SONERHOLM, KIMBERLY, , ,	al) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 7210 HEGGIE AVE				07	/	D D 31	/ Y	2018	Y	
	City LAS VEGAS	State NV	Zip Code 89131-3233				-		33251134	1	
	FEC ID number of contributing federal political committee.	С			Amount	U			is Period 28.0	00	
	Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) KA VP SIs Acct Mgt	_	Me	emo	ltem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	F	9/R Dedu	ictic	on (\$14.0	00 Bi-We	ekly)		
с.	Full Name of Individual (Last, First, Middle Initia HOLZER SPARR, CYNTHIA, , ,	al) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 30 BRIDGHAM FARM ROAD				07	/	D D D 31	/ Y	2018 Y	Y	
	City RUMFORD	State RI	Zip Code 02916-1304						03485113 is Period	4	
	FEC ID number of contributing federal political committee.	С					, .	9	28.0)8	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ied Dir		Me	emo	ltem				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.60	F	P/R Dedu	uctio	on (\$14.	.04 Bi-We	ekly)		
s	UBTOTAL of Receipts This Page (optional)		•				, .	,	140.7	70	
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11	EIVILED RECEIPIS		for each category of the Detailed Summary Page		X 11a		11b	11c	12					
	ny 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 f	rom such	n committe	ee.				
\backslash	NAME OF COMMITTEE (In Full)		Inited Lealth Crown D/											
	UnitedHealth Group Incorporate			4C)										
V	Full Name of Individual (Last, First, Middle Init	tial) or Full C	organization Name											
Α.					Date of	f Re	eceipt							
	Mailing Address 39 CANYON RIDGE DRIVE				07 31 2018									
	City	State	Zip Code		Trans	act	ion ID :	PR25760	04035113	4				
	SANDIA PARK	NM	87047-8509		Amoun	t of	Each R	leceipt th	is Period					
	FEC ID number of contributing federal political committee.	С						1.40	192.3	30				
							ltown							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Strategic Acct Mgmt		M	emo) Item							
	Receipt For:		Year-to-Date ▼											
	Primary General	Aggregate		ιĿ.	P/R Ded	ucti	on (\$96.	.15 Bi-We	ekly)					
	Other (specify) ▼		1442.25	11					• •					
В.	Full Name of Individual (Last, First, Middle Init BYRNES, CHRISTOPHER, , ,	tial) or Full C	organization Name		Date of	f Re	eceipt							
	Mailing Address 3920 GLENWOOD STREET				м м 07	/	31		2018	Y				
	City	State	Zip Code						42851134	1				
	DULUTH	MN	55804-1403		Amoun	t of	Each R	leceipt th	is Period					
	FEC ID number of contributing federal political committee.	С				455.40								
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) SVP Ops			Memo Item									
	Receipt For:		Year-to-Date ▼		-									
	Primary General	riggrogato		ıĿ.	P/R Deduction (\$227.70 Bi-Weekly)									
	Other (specify) v	<u> </u>	2494.65	4										
	Full Name of Individual (Last, First, Middle Init KANDALAFT, KEVIN, , ,	tial) or Full C	Organization Name		Date of	f Re								
ς.	Mailing Address 4189 WINDSOR POINT PLAC)F		\neg					YY	Y				
					07		31		2018					
	City EL DORADO HILLS	State CA	Zip Code 95762-3797						04365113	4				
			95762-5797		Amoun	t of	Each R	leceipt th	is Period					
	FEC ID number of contributing federal political committee.	С			Ŀ		y	 J	192.3	30				
	Name of Employer (for Individual)		upation (for Individual)		M	emo	b Item							
	United HealthCare Services Inc	Hlth	Plan CEO											
	Receipt For: Primary General	Aggregate	Year-to-Date ▼			luoti	on (¢06	.15 Bi-We						
	Other (specify)		1038.42		F/K Deu	luci	011 (490	.15 DI-VVE	eekiy)					
					-			040 (
8	SUBTOTAL of Receipts This Page (optional)		•••••••••••••••••••••••••••••••••••••••	>	<u>_</u>	÷	,		840.0	U .				
lт	OTAL This Period (last page this line number	only)		•	Ι.		-							

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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						
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	4C)						
Full Name of Individual (Last, First, Middle STONE, LAURA, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 4644 VENETO DRIVE			07 31 Y Y Y Y Y 2018						
City FRISCO	State TX	Zip Code 75033-7135	Transaction ID : PR2576045151134 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) k Contract Dir	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. GROENENDAAL, MICHAEL, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1017 N EUCLID			07 31 / Y Y Y Y Y 2018						
City OAK PARK	State	Zip Code 60302-1321	Transaction ID : PR2576046251134						
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) Executive Compensation	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. VINCENT, BRYAN, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 5025 YVONNE TERRACE			07 31 / Y Y Y Y 2018						
City EDINA	State MN	Zip Code 55436-2423	Transaction ID : PR2576049151134 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) Comm	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)			84.08						
TOTAL This Period (last page this line numb	per only)								

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12]								
			13 14 15 16 erson for the purpose of soliciting contributions 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	e Initial) or Full O	rganization Name										
A. MONICAL, KENT, , ,			Date of Receipt									
Mailing Address 9795 E PIEDRA DRIVE			07 31 Y Y Y Y 2018									
City	State AZ	Zip Code	Transaction ID : PR2576051351134									
SCOTTSDALE	AZ	85255-9231	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item									
United HealthCare Services Inc	P Prd											
Receipt For:	Aggregate	Year-to-Date 🔻										
Primary General		2884.50	P/R Deduction (\$192.30 Bi-Weekly)									
Other (specify) v		2004.30	1									
Full Name of Individual (Last, First, Middle B. REED, BARTON, , ,	e Initial) or Full O	rganization Name	Data of Descript									
Mailing Address 16716 MAYFIELD DRIVE			Date of Receipt									
Maning Address 16716 MATFIELD DRIVE			07 31 2018									
City	State	Zip Code	Transaction ID : PR2576059251134									
EDEN PRAIRIE	MN	55347-2242	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) d Dir	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Primary General			P/R Deduction (\$14.04 Bi-Weekly)									
Other (specify) V		, 210.60										
Full Name of Individual (Last, First, Middle C. REX, JOHN, , ,	e Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 503 HARRINGTON ROA	C		07 31 2018									
City	State	Zip Code	Transaction ID : PR2576060051134									
WAYZATA	MN	55391-1512	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		384.60									
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item									
United HealthCare Services Inc		G CFO										
Receipt For:	Aggregate	Year-to-Date ▼	-									
Primary General	33 - 3 - 4		P/R Deduction (\$192.30 Bi-Weekly)									
Other (specify)		2884.50										
SUBTOTAL of Receipts This Page (optional)		797.28									
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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	EMIZED RECEIPTS			Detailed Summary Page	×	11a		11	- F		11c	12	_	
	y information copied from such Reports and State for commercial purposes, other than using the na								se of					
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated					.5. 001						commu		
A.	Full Name of Individual (Last, First, Middle Initial) MCEWAN, JOSHUA, , ,) or Full O	rgar	nization Name		Date of	Re	cei	ipt					
	Mailing Address 4711 WEST 28TH STREET				07 31 201								Y	
	City SAINT LOUIS PARK	State MN		Zip Code 55416-1927	A			-				8575113 s Period	4	
	FEC ID number of contributing federal political committee.	С						,			-95-	393.	84	
	Name of Employer (for Individual) United HealthCare Services Inc	ion (for Individual)		Me	emo) Ite	em							
	Receipt For: // Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 2833.80	P/	R Dedi	uctio	on	(\$196	5.9	2 Bi-W	eekly)		
в.	Full Name of Individual (Last, First, Middle Initial) DUDA, MICHAEL, , ,) or Full O	rgar	nization Name		Date of	Re	cei	ipt					
	Mailing Address 5208 RICHWOOD DRIVE					м м 07	/		31		/ Y	2018	Y	
	City EDINA	State MN		Zip Code 55436-2322	A	Transaction ID : PR2576089951134 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С						,			-97-	192.	30	
	Name of Employer (for Individual) United HealthCare Services Inc	Occi VP	•	ion (for Individual)		Me	emo) Ite	em					
	Receipt For: // Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 1442.25	P/	R Dedu	uctio	on ((\$96.	15	Bi-We	ekly)		
C.	Full Name of Individual (Last, First, Middle Initial) HARBISON, CECILIA, , ,) or Full O	rgar	nization Name		Date of	Re	cei	ipt					
	Mailing Address 233 MAGNOLIA STREET	1 -				м м 07	/	L	^D 31			2018 Y		
	City DRESHER	State PA		Zip Code 19025-2012	A							0015113 s Period	4	
	FEC ID number of contributing federal political committee.	С				_		,			y	27.	80	
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Mgmt		Me	emo	o Ite	em					
	Receipt For: // Primary General Other (specify)	r-to-Date ▼ 211.98	P	/R Ded	uctio	on	(\$13.	.90	Bi-We	ekly)				
s	UBTOTAL of Receipts This Page (optional)							,		Ì	,	613.	94	
Т	OTAL This Period (last page this line number onl	y)		•••••				,		ļ	-y			

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	Use separate schedule(s)	(check	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page		H			11c	12			
Any information copied from such Reports and or for commercial purposes, other than using			erson for			e of s					
NAME OF COMMITTEE (In Full)		any pointed committee		. 5011			5001	. Johnnill			
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle SCHELKIN, MIKHAIL, , ,	Initial) or Full C	rganization Name	Da	Date of Receipt							
Mailing Address 555 CANAL ST APT 1602			M	07 ^M	/	31	/ Y	2018	Y		
City MANCHESTER	State NH	Zip Code 03101-1523						0315113 is Period	4		
FEC ID number of contributing federal political committee.	C			_	-7-		4	28.0	08		
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) d Software Engineer		Mei	no Ite	em					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R	Dedu	ction ((\$14.04	4 Bi-We	ekly)			
Full Name of Individual (Last, First, Middle JOHNSON, DARRIN, , ,	Initial) or Full C	rganization Name	Da	te of	Recei	pt					
Mailing Address 11 BERTON COURT			M	07 [™]	/	31	/ Y	2018	Y		
City MIDDLETOWN	State DE	Zip Code 19709-9932						0375113	4		
FEC ID number of contributing federal political committee.	C						ceipt th	is Period 384.0	60		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ops		Mer	no Ite	em					
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 2884.50	P/R	Deduo	ction (\$192.3	30 Bi-W	eekly)			
Full Name of Individual (Last, First, Middle C. DIAMOND, TIFFANY, , ,	Initial) or Full C	rganization Name	Da	te of	Recei	pt					
Mailing Address 5 HARVEY DRIVE			M	07 [™]	/	31	/ Y	2018 Y	Y		
City GOFFSTOWN	State NH	Zip Code 03045-2315						10555113 is Period	4		
FEC ID number of contributing federal political committee.	С			_	ŗ		y	76.9	92		
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		Me	mo Ite	əm					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R	Dedu	ction ((\$38.4)	6 Bi-We	ekly)			
SUBTOTAL of Receipts This Page (optional).					9		y	489.6	60		
TOTAL This Period (last page this line numb	er only)				-		- 4				

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		Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 1 ¹								
Any information copied from such Reports and S or for commercial purposes, other than using the			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)											
Control Contro	ed PAC (l	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle In CASEY, TAMMY, , ,	itial) or Full C	rganization Name	Date of Receipt								
Mailing Address 45 STEELE ROAD			07 31 2018								
City NEW HARTFORD	State CT	Zip Code 06057-2621	Transaction ID : PR2576107351134								
		00007 2021	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.08								
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item								
United HealthCare Services Inc	VP	Gen Mgmt									
Receipt For:	Aggregate	Year-to-Date V									
Other (specify) ▼		210.60	P/R Deduction (\$14.04 Bi-Weekly)								
			1								
Full Name of Individual (Last, First, Middle In B. KIEWEL, NATHAN, , ,	itial) or Full C	rganization Name	Date of Receipt								
Mailing Address 1137 PRAIRIE VIEW DR SW			07 31 2018								
City	State	Zip Code	Transaction ID : PR2576117551134								
HUTCHINSON	MN	55350-6725	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) Agr, Software Engineering	Memo Item								
Receipt For:		Year-to-Date ▼									
Primary General	riggrogato		P/R Deduction (\$14.00 Bi-Weekly)								
Other (specify)		, 210.00									
Full Name of Individual (Last, First, Middle In SANCHEZ, VINCENT, , ,	itial) or Full C	rganization Name	Date of Receipt								
Mailing Address 5025 BRANFORD COURT			07 31 2018								
City	State	Zip Code	Transaction ID : PR2576126951134								
DUBLIN	CA	94568-7241	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		27.80								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For:	Aggregate	Year-to-Date V	P/R Deduction (\$13.90 Bi-Weekly)								
Other (specify)		211.98									
SUBTOTAL of Receipts This Page (optional)			83.88								
TOTAL This Period (last page this line number											

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
			erson for the purpose of soliciting contributions to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)	prated PAC (I	JnitedHealth Group P/	4C)							
Full Name of Individual (Last, First, Mid KERAN, PATRICK, , ,	dle Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 6631 108TH CT			07 31 2018							
City BROOKLYN PARK	State MN	Zip Code 55445-6503	Transaction ID : PR2576137851134 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 Tech Proj-Prgm 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, Mid B. LIRETTE, KARL, , ,	dle Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 9 WEST WOODLAWN			07 / D D / Y Y Y Y Y 2018							
City DESTREHAN	State LA	Zip Code 70047-2535	Transaction ID : PR2576138951134 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) Health Plan Operations	Memo Item							
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)							
Full Name of Individual (Last, First, Mid C. BOADO, ANDREA, , ,	dle Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 14924 PONDVIEW CIR	CLE		07 31 Y Y Y Y Y 2018							
City WAYZATA	State MN	Zip Code 55391-2249	Transaction ID : PR2576144651134 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) eputy Gen Counsel	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	nal)		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							
			13 14 15 16 17 verson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle A. NELSON, STEVEN, , ,	e Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 640 LOCUST HILLS DRI	/E		07 31 2018							
City WAYZATA	State MN	Zip Code 55391-1973	Transaction ID : PR2576144851134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P UHC CEO	Memo Item							
Receipt For: 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. FRIDNER, JOHN, , ,	e Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 782 PENFIELD DR			07 / D D / Y Y Y Y Y 2018							
City CAROL STREAM	State	Zip Code 60188-4738	Transaction ID : PR2576147551134							
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) NA VP SIs/Gen	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 . KEPNER, SHELLY, , ,	e Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 10165-222ND STREET E	1		07 / D D / Y Y Y Y 2018							
City LAKEVILLE	State MN	Zip Code 55044-9752	Transaction ID : PR2576147851134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		25.02							
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 ▼ 227.28	P/R Deduction (\$12.51 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)		487.62							
TOTAL This Period (last page this line num	ber only)									

SCHEDULE A (FEC Form 3X) DEOFIDTO

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	-	Use separate schedule(s)	(check on	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	11b		12							
Any information copied from such Reports a													
or for commercial purposes, other than usin	g the name and a	ddress of any political committee	e to solicit co	ntributior	ns from suc	n committe	ee.						
UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middl A. PAUNOVICH, VUKASIN, , ,	le Initial) or Full O	rganization Name	Date o	Date of Receipt									
Mailing Address 1209 KEITH RD			07	07 / D D / Y Y Y Y 2018									
City WAKE FOREST	State NC	Zip Code 27587-7301		Transaction ID : PR2576306751134 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	Occi VP I	upation (for Individual) IT	M	lemo Iter	m								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Dec	luction (\$	\$192.30 Bi-\	Veekly)							
Full Name of Individual (Last, First, Middl B. BENSON, JEAN, , ,	le Initial) or Full O	rganization Name	Date o	of Receip	ot								
Mailing Address 14951 HIGHLAND COUF	1		07	07 31 Y Y Y Y Y 2018									
City PRIOR LAKE	State MN	Zip Code 55372-4109			D:PR2576 h Receipt t		4						
FEC ID number of contributing federal political committee.	С			384.60 Memo Item									
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) Fin	M										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Ded	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middl COMBS MORGAN, LAURIE,		rganization Name	Date o	of Receip	ot								
Mailing Address 513 RIVERVIEW DRIVE			07	/ D	31 / Y	ү ү 2018	Y						
City FRANKLIN	State TN	Zip Code 37064-5512			ID : PR2578 h Receipt th		4						
FEC ID number of contributing federal political committee.	С			, y	,	38.4	40						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Ntwk Contrctng		1emo Itei	m								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 288.00	P/R Deduction (\$19.20 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional	al)			. ,	,	807.6	60						
TOTAL This Period (last page this line nun	nber only)												

SCHEDULE A (FEC Form 3X) DEAEIDTA

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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 ar or for commercial purposes, other than using	d Statements ma the name and a	L ay not be sold or used by any p ddress of any political committe	e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)											
Full Name of Individual (Last, First, Middle		· · · · · · · · · · · · · · · · · · ·									
A. IIDMARSH, BRIAN, , , Mailing Address 14425 NORTH 15TH STR	EET		Date of Receipt								
City	State	Zip Code	07 31 2018 Transaction ID : PR2578724251134								
PHOENIX	AZ	85022-4454	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.04								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) E 2 NA Accts	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.85	P/R Deduction (\$14.02 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. LONG, PAUL, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 12352 PRINCETON AVE			07 31 2018								
City EDEN PRAIRIE	State MN	Zip Code 55347-1936	Transaction ID : PR2578734951134 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) 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. EGELAND, DANIEL, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 2659 E LAKE OF THE ISI			07 / D D / Y Y Y Y Y 2018								
City MINNEAPOLIS	State MN	Zip Code 55408-1052	Transaction ID : PR2578741051134 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		416.66								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus Dev	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 416.66	P/R Deduction (\$416.66 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)		521.62								
TOTAL This Period (last page this line num	per only)										

SCHEDULE A (FEC Form 3X) DEOFIDTO

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check	(check only one)									
I LIVILLED RECEIP13		for each category of the Detailed Summary Page	X 1		11b	11c	12						
Any information copied from such Reports and	Statements m	av not be sold or used by any n	erson for		14 Irpose	of solicitin	16 a contribu	17 tions					
or for commercial purposes, other than using t													
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle STRODE, KURT, , ,	Initial) or Full C	organization Name	Dat	e of F	Receipt								
Mailing Address 15 MIRA SEGURA				07 31 Y Y Y Y 2018									
City RANCHO SANTA MARGARITA	State CA	Zip Code 92688-4113		Transaction ID : PR2578819251134 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C			28.84									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) c Gen Counsel		Mer	no Item	1							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 216.30	P/R	Deduc	tion (\$´	14.42 Bi-W	'eekly)						
Full Name of Individual (Last, First, Middle ASNER, BARTLEY, , ,	Initial) or Full C	organization Name	Dat	e of F	Receipt								
Mailing Address 25 OFFSHORE				07 / D D / Y Y Y Y 07 31 2018									
City NEWPORT BEACH	State CA	Zip Code 92657-2162				: PR2578 Receipt t							
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) 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)										
Full Name of Individual (Last, First, Middle C. HALTIWANGER, RACHEL, , ,	Initial) or Full C	organization Name	Dat	e of F	Receipt								
Mailing Address 3011 GRUNION LANE				07 ^M		D / Y	2018	Y					
City SPRING HILL	State TN	Zip Code 37174-1551				D: PR2578 Receipt t							
FEC ID number of contributing federal political committee.	С				y	,	28.						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Compli		Mer	no Item	1							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.93	P/R	P/R Deduction (\$14.01 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional).					, .		441.	46					
TOTAL This Period (last page this line number	er only)												

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 196 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 e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)		, any pointer committee									
UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle DUFFEY, KRISTY, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 42095 N 109TH PLACE			07 31 Y Y Y Y Y 07 31 2018								
City SCOTTSDALE	State AZ	Zip Code 85262-3293	Transaction ID : PR2578823251134 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) ef Clin 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 CIAVOLA, LAURA, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 1686 WILDFIRE LANE			07 / D D / Y Y Y Y 2018								
City FRISCO	State TX	Zip Code 75033-7325	Transaction ID : PR2578824351134 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 STARS & Ops	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 BUSBEE, NATHANAEL, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 611 ORPINGTON RD	01-1		07 / D D / Y Y Y Y 31 2018								
City BALTIMORE	State MD	Zip Code 21229-2128	Transaction ID : PR2578826751134 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) Bus Process	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).			846.12								
TOTAL This Period (last page this line number	er only)										

SCHEDULE A (FEC Form 3X) - DEAEIDTA

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 197 OF

	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
			13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	,										
Full Name of Individual (Last, First, Middle A. MILLER, TRACI, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 729 PINE TRAIL			07 31 2018								
City ARNOLD	State MD	Zip Code 21012-1628	Transaction ID : PR2578829951134 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) Med Clin Ops	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 FARMER, RACHEL, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 1929 ALBIZIA COURT			07 31 2018								
City BATON ROUGE	State LA	Zip Code 70808-3973	Transaction ID : PR2595208351134 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: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 865.35	P/R Deduction (\$57.69 Bi-Weekly)								
Full Name of Individual (Last, First, Middle CELLIS, DENNIS, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 6001 DRIPPING SPRING		Zin Codo									
City FRISCO	State TX	Zip Code 75034-4039	Transaction ID : PR2595209151134 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) Dir SIs	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 (optiona)		225.06								
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:

(check only one)

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	EWIZED RECEIPTS		Detailed Summary Page	×	11a		111	b	11c	12					
					13		14		15	16	17				
	y information copied from such Reports and Stat for commercial purposes, other than using the na														
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group I	PAC)											
A.	Full Name of Individual (Last, First, Middle Initial LONIGRO, ANTHONY, , ,) or Full O	organization Name		Date of Receipt										
	Mailing Address 3186 WEST CANYON AVE				M M / D D / Y Y Y Y 07 31 2018										
	City SAN DIEGO	State CA	Zip Code 92123-5426		Transaction ID : PR2595225851134 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С			76.92 Memo Item										
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P	/R Ded	uctio	on ((\$38.4	6 Bi-W	eekly)					
B.	Full Name of Individual (Last, First, Middle Initial SNYDER, MARY, , ,) or Full O	organization Name	I	Date of Receipt										
	Mailing Address 1075 BOSTON POST RD	Otata	70000-1-		^M M 07	/	D	31	/ Y	2018	Y				
	City MADISON	State CT	Zip Code 06443-3363							22935113 nis Period	4				
	FEC ID number of contributing federal political committee.	С			384.60 Memo Item										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Plan CEO												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/	P/R Deduction (\$192.30 Bi-Weekly)										
C.	Full Name of Individual (Last, First, Middle Initial DUCAYET, JULIA, , ,) or Full O	Prganization Name	(Date of	Re	eceip	pt							
	Mailing Address 5508 HARRIET AVE S				07 / D D / Y Y Y Y 2018										
	City MINNEAPOLIS	State MN	Zip Code 55419-1830							23295113 nis Period	4				
	FEC ID number of contributing federal political committee.	С					y		y	28.	08				
	Name of Employer (for Individual) Optum Services, Inc	Occi Dir M	upation (for Individual) Mktg		Memo Item										
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.60	P	P/R Deduction (\$14.04 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)						7		,	489.	60				
т	OTAL This Period (last page this line number on	ly)		•			-								

FOR LINE NUMBER:

PAGE 199 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 e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpora	ated PAC (JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle SCOTT, WESTON, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 16333 VANCE JACKSON APT 1215											
City	State	Zip Code	Transaction ID : PR2601125351134								
SAN ANTONIO	TX	78257-5090	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		61.54								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) d Dir	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.55	P/R Deduction (\$30.77 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. SHORT, MARIANNE, , ,	Initial) or Full C	Date of Receipt									
Mailing Address 2215 SUMMIT AVENUE	Chata	Zin Oode	07 31 Y Y Y Y Y 2018								
City SAINT PAUL	State MN	Zip Code 55105-1002	Transaction ID : PR2601133551134 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 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 C. PATRICK, ALLEN, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 225 W ESCALONES			07 / D D / Y Y Y Y Y 2018								
City SAN CLEMENTE	State CA	Zip Code 92672-5102	Transaction ID : PR2601136851134 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 SIs Acct Mgmt	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)			474.22								
TOTAL This Period (last page this line numb	per only)										

SCHEDULE A (FEC Form 3X) _____ _

FOR LINE NUMBER:

PAGE 200 OF

	Use separate schedule(s)	(check only one)										
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P	4C)									
Full Name of Individual (Last, First, Middle A. SWANSON, AMY, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 621 SPARROW WAY			07 31 2018									
City	State	Zip Code	Transaction ID : PR2601140751134									
WADSWORTH	OH	44281-7716	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		192.30									
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item									
United HealthCare Services Inc	Dir	Mktg Bus Dev										
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify) ▼		1442.25	P/R Deduction (\$96.15 Bi-Weekly)									
		45 1 45 1 46 1	1									
Full Name of Individual (Last, First, Middle MCBRIEN, ROBERT, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 1000 DOROTHY STREET APARTMENT 801	1-		07 / D D / Y Y Y Y Y 2018									
City CORAOPOLIS	State PA	Zip Code 15108-3757	Transaction ID : PR2601148951134									
		13108-3737	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) Mktg	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 C. MOORE, DOUGLAS, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 3900 BLACKJACK OAK LA	NE		M M / D D / Y Y Y Y 07 31 2018									
City	State	Zip Code	Transaction ID : PR2601149651134									
PLANO	ТХ	75074-7790	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) c Dir Hlthcare Econ	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).			248.46									
TOTAL This Period (last page this line number	er only)											

Use separate schedule(s)

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		Use separate schedule(s)	(ch	(check only one)									
11	EIVIIZED RECEIPIS		for each category of the Detailed Summary Page		1 1a		11b	11c	12				
	y information copied from such Reports and Sta												
or	for commercial purposes, other than using the r NAME OF COMMITTEE (In Full)	name and a	ddress of any political committee	to so	olicit con	tribi	utions f	rom sucr	i committe	96.			
\rangle	UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	C)									
A.	Full Name of Individual (Last, First, Middle Initia LESTER, SHAUNA, , ,	l) or Full O	rganization Name		Date of	Re	ceipt						
	Mailing Address 1747 228TH PL SE				07 31 Y Y Y Y 2018								
	City SAMMAMISH	State WA	Zip Code 98075-7250	_	Transaction ID : PR2601154751134 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) Proj Mgmt		Me	emo	ltem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	F	P/R Dedu	uctic	on (\$14.	04 Bi-We	ekly)				
в.	Full Name of Individual (Last, First, Middle Initia PERERA, SUSAN, , ,	l) or Full O	rganization Name		Date of	Re	ceipt						
	Mailing Address 1201 UNITY AVE N			07 / D D / Y Y Y Y 07 31 2018									
	City GOLDEN VALLEY	State MN	Zip Code 55422-4735	_			-		68851134	1			
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period								
	Name of Employer (for Individual) United HealthCare Services Inc	Occi Dep		Me	emo	Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210,60	F	P/R Deduction (\$14.04 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initia RODRIGUEZ, ROGER, , ,	ll) or Full O	rganization Name		Date of	Re	ceipt						
	Mailing Address 10501 SW 102 AVENUE				07 31 2018								
	City MIAMI	State FL	Zip Code 33176-3511						7685113 is Period	4			
	FEC ID number of contributing federal political committee.	С					, .	9	384.6	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	P/R Deduction (\$192.30 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)		•				, .	,	440.7	76			
т	OTAL This Period (last page this line number or	וy)	••••••	-									

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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	-	Use separate schedule(s)	(check only one)								
II EIVIIZED REGEIPIS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
			person for the purpose of soliciting contributions to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)	orated PAC (l	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Mid HUDSON, JEFFREY, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 1536 BREWSTER DR	VE										
City CARROLLTON	State TX	Zip Code 75010-6444	Transaction ID : PR2605703051134 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) SIs 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, Mid MCBEATH, ROBERT, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 2537 RED ARROW DF		7. 0. 1.	07 31 Y Y Y Y 2018								
City LAS VEGAS	State NV	Zip Code 89135-1628	Transaction ID : PR2605708951134 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) D Med Grp Physn	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 . RICKS, RHONDA, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 5084 JERICHO ROAD	1		07 / 0 D / Y Y Y Y Y 2018								
City COLUMBIA	State MD	Zip Code 21044-5409	Transaction ID : PR2605733451134 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	Occi Dir N	upation (for Individual) Aktg	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.70	P/R Deduction (\$15.38 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optic	nal)		443.36								
TOTAL This Period (last page this line n	umber only)										

SCHEDULE A (FEC Form 3X) DEAEIDTA

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 t											
NAME OF COMMITTEE (In Full)											
> UnitedHealth Group Incorpora	ted PAC (I	UnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle I	nitial) or Full C	Organization Name									
A. DAVIS, KELLY, , , Mailing Address 905 N LEBANON ST			Date of Receipt								
Walling Address 903 N LEBANON ST			07 31 2018								
City	State	Zip Code	Transaction ID : PR2605734251134								
ARLINGTON	VA	22205-1433	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		192.30								
Name of Employer (for Individual)		upation (for Individual)	Memo Item								
United HealthCare Services Inc Receipt For:	I	/t Affs Dir									
Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$96.15 Bi-Weekly)								
Other (specify)		1442.25									
Full Name of Individual (Look First Middle)		Newsitzetien News	-								
Full Name of Individual (Last, First, Middle I FINLAY, CHRISTOPHER, , ,	Initial) of Full C	rganization Name	Date of Receipt								
Mailing Address 3221 COLFAX AVE S			07 31 Y Y Y Y Y 2018								
City MINNEAPOLIS	State MN	Zip Code 55408-3555	Transaction ID : PR2605735151134								
FEC ID number of contributing	_		Amount of Each Receipt this Period								
federal political committee.	C		27.98								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General Other (specify) ▼		211.06	P/R Deduction (\$13.99 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I C. MALONE, TRACY, , ,	nitial) or Full C	Organization Name	Date of Receipt								
Mailing Address 900 S 22ND ST			07 31 2018								
City ARLINGTON	State VA	Zip Code	Transaction ID : PR2605736951134								
	VA	22202-2625	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 External Affs	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)			604.88								
TOTAL This Period (last page this line numbe	er only)										

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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				or each category of the Detailed Summary Page	×	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		rp	ose		oliciting	g contrib	utions		
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Jn	itedHealth Group PA	C)										
A.	Full Name of Individual (Last, First, Middle Initial) JAEGER, MICHELLE, , ,	or Full O	rga	nization Name	[Date of Receipt									
	Mailing Address 14506 MCGINTY ROAD WEST			07 31 / Y Y Y Y 2018											
	City	State		Zip Code		Transaction ID : PR2605753951134									
	WAYZATA	MN		55391-2541	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С			27.98										
	Name of Employer (for Individual) Optum Services, Inc		•	tion (for Individual) Svc Acct Mgmt	Memo Item										
	Bessint For:			ar-to-Date ▼	\neg										
	Primary General Other (specify) ▼	ggroguto	-	211.06	P/R Deduction (\$13.99 Bi-Weekly)										
В.	Full Name of Individual (Last, First, Middle Initial) SMITH, LARRY, , ,	or Full O	rga	nization Name	Date of Receipt										
	Mailing Address 1164 RUE CHINON					07 31 2018									
	City MANDEVILLE	State LA		Transaction ID : PR2605760651134 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		•	tion (for Individual) ir Compli		Ν	Nem	0	Item						
	Receipt For: A Primary General Other (specify) ▼	ggregate	P/R Deduction (\$19.23 Bi-Weekly)												
с.	Full Name of Individual (Last, First, Middle Initial) WEISSEL, MICHAEL, , ,	or Full O	rga	nization Name		Date of	of R	ec	ceipt						
	Mailing Address 99 HAGEN ROAD					[™] 07		/	D 3	D 81	/ Y	2018	Y		
	City	State		Zip Code		Tran	isac	tic	on ID):P	R2606	8429511	34		
	NEWTON	MA		02459-2731	A	mou	nt of	fE	Each	Re	ceipt th	nis Perio	d		
	FEC ID number of contributing federal political committee.	С				_		,	9		y	384	ł.60		
	Name of Employer (for Individual) Optum Services, Inc	Occu Optu	•	tion (for Individual) Exec		N	Mem	0	ltem	I					
	Receipt For: A Primary General Other (specify)	ggregate	Yea	ur-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			•								451	.04		
т	OTAL This Period (last page this line number only	/)		·····	Ī				,		7				

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

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	LIVIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
			Detailed Summary Page	13 14 15 16 17						
An or	y information copied from such Reports and for commercial purposes, other than using the	Statements mane and a	ay not be sold or used by any p ddress of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
$\langle \rangle$	NAME OF COMMITTEE (In Full)									
	UnitedHealth Group Incorporat	ted PAC (l	JnitedHealth Group PA	AC)						
۱.	Full Name of Individual (Last, First, Middle In SONSTEGARD, NATHAN, , ,	nitial) or Full C	rganization Name	Date of Receipt						
	Mailing Address 4216 ZENITH AVE S			07 / D D / Y Y Y Y Y 2018						
	City	State	Zip Code	Transaction ID : PR2606844451134						
	MINNEAPOLIS	MN	55410-1413	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		28.08						
	Name of Employer (for Individual) UHC International Services Inc	Occ VP	upation (for Individual) Fin	Memo Item						
	Receipt For:	Aggregate	Year-to-Date V							
	Primary General	Aggregale		P/R Deduction (\$14.04 Bi-Weekly)						
	Other (specify)		210.60							
	Full Name of Individual (Last, First, Middle In MATECZUN, JOHN, , ,	nitial) or Full C	rganization Name	Date of Receipt						
	Mailing Address 1908 HARBOURSIDE DRIVI UNIT 403	E		07 31 2018						
	City	State	Zip Code	Transaction ID : PR2606845151134						
	LONGBOAT KEY	FL	34228-4207	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	384.60								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) s M&V	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 II RAWLINSON, DORIEN, , ,	nitial) or Full C	rganization Name	Date of Receipt						
	Mailing Address 4795 W RED ROCK DRIVE			07 / D D / Y Y Y Y 07 31 2018						
	City	State	Zip Code	Transaction ID : PR2606854651134						
	LARKSPUR	CO	80118-8413	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		28.08						
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
	United HealthCare Services Inc		c Dir Ntwk Contrctng							
	Receipt For:	1	Year-to-Date ▼							
	Primary General	Aggregate	210.60	P/R Deduction (\$14.04 Bi-Weekly)						
	Other (specify)		7	1						
		1								

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

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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			erson for the purpose of soliciting contributions							
$\left\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	.C)							
A.	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 6241 CRESTBROOK DRIVE			07 31 2018							
	City Sta MORRISON CC		Zip Code 80465-2225	Transaction ID : PR2606857551134 Amount of Each Receipt this Period							
				28.08							
			upation (for Individual) n Exec Dir	Memo 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 MARGRITZ, CYNTHIA, , ,	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 16702 L STREET	1-		07 / D D / Y Y Y Y 2018							
	City OMAHA	State NE	Zip Code 68135-1324	Transaction ID : PR2607806151134							
	FEC ID number of contributing federal political committee.	С	00133-1324	Amount of Each Receipt this Period							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Clin Qlty	Memo Item							
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)							
С.	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 173 LAURELWOOD DRIVE			07 / D D / Y Y Y Y 2018							
	City NOVATO	State CA	Zip Code 94949-8427	Transaction ID : PR2607806751134 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		76.66							
Name of Employer (for Individual) Optum Services, Inc		Occu VP C	upation (for Individual) Dps	Memo Item							
Receipt For: Aggregate Primary General Other (specify)			Year-to-Date ▼ 578.28	P/R Deduction (\$38.33 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)		•••••	132.82							
Т	OTAL This Period (last page this line number o	nly)	••••••								

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116	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11b	11c	12	1 -7	
	information copied from such Reports and Sta for commercial purposes, other than using the n									
\setminus	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	C)						
			-							
Α.	Full Name of Individual (Last, First, Middle Initia CEGLIA, VINCENT, , ,	I) or Full O	rganization Name	Date	of Re	eceipt				
	Mailing Address 47 CONTRY ACRES DRIVE			M 07		31	/ Y	y y 2018	Y	
	City HAMPTON	State NJ	Zip Code 08827-4112					5205113 is Period	4	
	FEC ID number of contributing federal political committee.	С						28.0)8	
			upation (for Individual) Compli		Memo	o Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R De	∋ducti	on (\$14.0)4 Bi-We	ekly)		
	Full Name of Individual (Last, First, Middle Initia SCHWARTZ, SHAWN, , ,	l) or Full O	rganization Name	Date	of Re	eceipt				
	Mailing Address 338 SNELLING AVE S			07		31	/ Y	2018	Y	
	City SAINT PAUL	State MN	Zip Code 55105-2048					5935113 4 is Period	1	
-	FEC ID number of contributing federal political committee.	С		28.08						
	Name of Employer (for Individual) Jnited HealthCare Services Inc		upation (for Individual) c Dir 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 Initia	l) or Full O	rganization Name	Date	of Re	eceipt				
	Mailing Address 60 PINEAPPLE STREET APT 3J			07		D D 31	/ Y	2018	Y	
	City BROOKLYN	State NY	Zip Code 11201-6839					05955113 is Period	4	
	FEC ID number of contributing federal political committee.	С				, ,	.,	76.9	92	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Aggregate Year-to Primary General Other (specify) The second s			Year-to-Date ▼ 576.90	P/R De	əducti	ion (\$38.4	46 Bi-We	ekly)		
sı	JBTOTAL of Receipts This Page (optional)			Γ.		,		133.0)8	
т	TAL 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

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		for each cate Detailed Sun		×	11a 13		11b 14		11c	12	17				
	y information copied from such Reports and State for commercial purposes, other than using the na					or the		oose o		oliciting	contribu	tions			
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	JnitedHealt	th Group PA	C)										
Α.	Full Name of Individual (Last, First, Middle Initial) FLYNN, VIRGINIA, , ,	or Full C	rganization Nar	ne	Date of Receipt										
	Mailing Address 30 VAN TERRACE			м м 07	1	D 3		/ Y	y y 2018	Y					
	City SPARKILL	State NY	Zip Code	00	Transaction ID : PR2608061251134										
	SPARKILL		10976-14	00	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С			76.92							92			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Indiv Med Clin Ops	vidual)	Memo Item										
	Receipt For:		Year-to-Date ▼		-										
	Primary General Other (specify) ▼		576.90	P/R Deduction (\$38.46 Bi-Weekly)											
в.	Full Name of Individual (Last, First, Middle Initial) FERGUSON, SANDRA, , ,	or Full C	rganization Nar	ne	Date of Receipt										
	Mailing Address 710 SOUTH SHERATON DRIVE						/	D 3		/ Y	y y 2018	Y			
	City AKRON	State OH	Zip Code 44319-19	18				-			6195113 is Period	4			
	FEC ID number of contributing federal political committee.	C						,		-97-	76.	92			
	Name of Employer (for Individual) United HealthCare Services Inc	Occ Ass	Memo Item												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	576.90	P/	R Dedu	uctio	on (\$3	8.46	6 Bi-We	ekly)				
с.	Full Name of Individual (Last, First, Middle Initial) HECK, ALLYN, , ,	or Full C	rganization Nar	ne		Date of	Re	ceipt							
	Mailing Address 3233 BARHITE STREET					м м 07	/	3		/ Y	2018	Y			
	City PASADENA	State CA	Zip Code 91107-125	54							31095113 is Period	4			
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this F					28.	08				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for India c Dir Underwritin	,		Me	emo	Item							
	Receipt For: A Primary General Other (specify)	Aggregate	Year-to-Date V	210.60	P/	'R Ded	uctio	on (\$1	4.0	4 Bi-We	eekly)				
s	UBTOTAL of Receipts This Page (optional)			••••••							181.	92			
т	OTAL This Period (last page this line number only	y)			ĺ					-					

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	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 Incorpor	ated PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle BODELL , LESLIE, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 18710 34TH AVENUE NO	DRTH		07 31 / Y Y Y Y Y							
City PLYMOUTH	State MN	Zip Code 55447-1000	Transaction ID : PR2609811351134 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	Occi VP	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)							
Full Name of Individual (Last, First, Middle B. WRIGHT, NORMAN, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 5205 KELSEY TERRACE			07 31 / Y Y Y Y							
City EDINA	State MN	Zip Code 55436-1172	Transaction ID : PR2609812351134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С	33430-1172	384.60							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ef of Ops	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. STRAUSS, DAVID, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 5000 FRANCE AVENUE			M M / D D / Y Y Y Y Y 07 31 2018							
City MINNEAPOLIS	State MN	Zip Code 55410-2061	Transaction ID : PR2612521851134 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) Total Rewards, HC Svs	Memo Item							
Receipt For: Primary General Other (specify)	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	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle SMITH, MELANIE, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 15340 HIGHLAND PLACE			07 31 Y Y Y Y Y							
City MINNETONKA	State MN	Zip Code 55345-4613	Transaction ID : PR2612527651134 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) Recruit Ops	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. STEVENS, J, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 93 CONSERVATION ROAD			07 / D D / Y Y Y Y 2018							
City SUFFIELD	State CT	Zip Code 06078-2442	Transaction ID : PR2612528551134							
FEC ID number of contributing		00070-2442	Amount of Each Receipt this Period							
federal political committee.	C		76.92							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Tech Proj-Prgm Mgmt	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 BAKER, MICHAEL, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 2383 HIGHOVER TRAIL			07 31 / Y Y Y Y							
City CHANHASSEN	State MN	Zip Code 55317-4744	Transaction ID : PR2612530551134 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) ? 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).			538.44							
TOTAL This Period (last page this line number	er only)									

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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11	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										
$\overline{\langle}$	NAME OF COMMITTEE (In Full)			, 10 0							
\rangle	UnitedHealth Group Incorporated	d PAC (L	JnitedHealth Group PA	AC)							
Α.	Full Name of Individual (Last, First, Middle Initia RIVERS, CAROLINE, , ,	al) or Full Or	rganization Name	Date of Receipt							
	Mailing Address 6368 TIMBER TRACE				м м 07	/	D D D 31) / Y	2018	Y	
	City BROWNSBURG	State IN	Zip Code 46112-8641	-	Transaction ID : PR2612533751134 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С			<u> </u>				28.	02	
	Name of Employer (for Individual) Optum Services, Inc	Occu Exec	upation (for Individual) c Dir		Me	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.97	P/R Deduction (\$14.01 Bi-Weekly)							
в.	Full Name of Individual (Last, First, Middle Initia KIECKHAFER, REGINA, , ,	al) or Full Or	rganization Name		Date of	Re	ceipt				
Mailing Address 83 TEWKSBURY STREET					M M 07	1	D D D 31	/ Y	2018	Y	
	City ANDOVER	State MA	Zip Code 01810-5856						3625113	4	
	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		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)		
с.	Full Name of Individual (Last, First, Middle Initia HANSEN, KIMBERLY, , ,	al) or Full Or	rganization Name		Date of	Re	ceipt				
	Mailing Address 6227 UPLAND LN N				м м 07	1	31) / Y	y 2018	Y	
	City MAPLE GROVE	State MN	Zip Code 55311-4003						38325113 is Period	4	
	FEC ID number of contributing federal political committee.	С					27.	80			
Name of Employer (for Individual) United HealthCare Services Inc			upation (for Individual) Prov Data	Memo Item							
Receipt For: Aggregate Year-to-Date Primary General Other (specify) Other			Year-to-Date ▼ 211.98		P/R Ded	ucti	on (\$13.	.90 Bi-We	ekly)		
s	UBTOTAL of Receipts This Page (optional)		••••••				,	. ,	83.	90	
т	OTAL This Period (last page this line number or	nly)		-				- 41-			

SCHEDULE A (FEC Form 3X) DEAEIDTA

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	EMIZED RECEIPTS			category of the Summary Page		× 11a		11b	11c	12		
Ar	y information copied from such Reports and Sta	tements ma	ly not be sol	d or used by any pe	erson	13 for the plicit	purpo	14 ose of s	15 soliciting	contribu	17 tions	
or	for commercial purposes, other than using the n	ame and a	ddress of an	y political committee	e to s	olicit con	itribu	tions fr	om suci	n commit	tee.	
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	JnitedHe	alth Group PA	NC)							
A.	Full Name of Individual (Last, First, Middle Initia DEIDESHEIMER, THERESA, , ,	l) or Full O	rganization N	lame	Date of Receipt							
	Mailing Address 6319 21 ST AVE NE					07 31 2018						
	City SEATTLE	State WA	Zip Cod 98115							38345113 iis Period		
	FEC ID number of contributing federal political committee.	С								27.	80	
United HealthCare Services Inc Dir Gen			upation (for li Gen Mgmt	ndividual)		Me	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date	211.98	P/R Deduction (\$13.90 Bi-Weekly)							
в.	Full Name of Individual (Last, First, Middle Initia CORCORAN, SUSAN, , ,	l) or Full O	rganization N	lame		Date of	Rec	eipt				
	Mailing Address 4 DONBUSH ROAD					м м 07	/	D D D 31	/ Y	ү ү 2018	Y	
	City NORTH OAKS	State MN						38535113 iis Period				
	FEC ID number of contributing federal political committee.	С								76.	92	
	Name of Employer (for Individual) Optum Services, Inc		Occupation (for Individual) VP Acctng					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 DICKINSON, DAVID, , ,	l) or Full O	rganization N	lame		Date of	Rec	eipt				
	Mailing Address 57 ATKINSON LANE					м м 07	1	D D D 31	/ Y	2018	Y	
	City SUDBURY	State MA	Zip Cod 01776-							38895113 iis Period		
	FEC ID number of contributing federal political committee.	С				<u> </u>	,		,	114.	28	
Name of Employer (for Individual) Occupation (for Individual) Optum Services, Inc VP Mktg Bus Dev Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) To the second sec			•	,		Me	emo	ltem				
			871.38		P/R Ded	uctio	n (\$57.1	14 Bi-We	eekly)			
s	UBTOTAL of Receipts This Page (optional)			••••••						219.	00	
т	OTAL This Period (last page this line number or	ly)			•			-				

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports 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 I A. KREJCI, ANDREW, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 19880 LAKEVIEW AVENUE	Ē		M M / D D / Y Y Y Y 07 31 2018							
City EXCELSIOR	State MN	Zip Code 55331-9352	Transaction ID : PR2614310751134 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		upation (for Individual) Comm	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 421.20	P/R Deduction (\$28.08 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I B. MEYER, RAYNEE, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 6299 BELLEVUE LANE			07 31 / Y Y Y Y							
City	State	Zip Code	Transaction ID : PR2614314051134							
EDEN PRAIRIE	MN	55344-5201	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		105.26							
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) Fin	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General Other (specify) ▼		421.04	P/R Deduction (\$52.63 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I C. THOMPSON, JOHN, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 1697 COUNCIL BLUFF DR	IVE NE		07 / D D / Y Y Y Y 2018							
City ATLANTA	State GA	Zip Code 30345-4137	Transaction ID : PR2614322351134 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) S Dir SIs	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)			199.88							
TOTAL This Period (last page this line number	er only)									

Use separate schedule(s)

FOR LINE NUMBER:

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IT.	EMIZED RECEIPTS		Use separate schedule(s)	(che	ck only	y or	ne)	L				
11			for each category of the Detailed Summary Page	×	11a 13		11b 14	11c 15		2 16	17	
	y information copied from such Reports and S for commercial purposes, other than using the				or the		pose of	soliciting	g cont	ributio	ons	
	NAME OF COMMITTEE (In Full)			0 10 001								
	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)								
Α.	Full Name of Individual (Last, First, Middle Init BURKHOLDER, CHAD, , ,	ial) or Full O	rganization Name	Date of Receipt								
	Mailing Address 2423 DUBONNET DRIVE				07 31 Y Y Y Y Y							
	City MACUNGIE	State PA	Zip Code 18062-8857	A				PR2615				
	FEC ID number of contributing federal political committee.	С							3	384.60)	
	Name of Employer (for Individual) Optum Services, Inc	Occi VP (upation (for Individual) Ops		M	emc) Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/	R Ded	ucti	on (\$192	2.30 Bi-V	Veekly	()		
в.	Full Name of Individual (Last, First, Middle Init OCONNOR, THOMAS, , ,	ial) or Full O	rganization Name	C	Date of	f Re	eceipt					
	Mailing Address 1510 JAMES STREET				м м 07	1	31	/ Y	201	8 8		
	City	State NC	Zip Code 27707-1514				-	PR26150				
	DURHAM	NC	A	Amount	t of	Each R	eceipt th	nis Pe	riod			
	FEC ID number of contributing federal political committee.	C				384.60						
	Name of Employer (for Individual) United HealthCare Services Inc	Occ Hith		M	emc	ltem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$192.30 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Init VANNORMAN, SAMUEL, , ,	ial) or Full O	rganization Name		Date of	f Re	eceipt					
	Mailing Address 6216 CONCORD AVE	1			^M 07	1	31	/ Y	ү 201			
	City EDINA	State MN	Zip Code 55424-1736	A				PR2615				
	FEC ID number of contributing federal political committee.	С					,	, ,		28.08	3	
	Name of Employer (for Individual) Optum Services, Inc	Occu VP F	upation (for Individual) Prod		M	emo	tem Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.60	P/	/R Ded	lucti	on (\$14	.04 Bi-W	eekly)			
s	UBTOTAL of Receipts This Page (optional)			.					7	797.28	3	
T	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 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	ated PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle A. SOLOMON, RANDALL, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 760 HAIGHT STREET			07 31 2018						
City SAN FRANCISCO	State CA	Zip Code 94117-3317	Transaction ID : PR2615671551134 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) Behvrl Med 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. BIRNBAUM, MICHAEL, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 55 DEAN STREET			07 / D D / Y Y Y Y Y 2018						
City BROOKLYN	State NY	Zip Code 11201-6245	Transaction ID : PR2615671651134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) HIthcare Econ	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. KNUTSON, DIANE, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 701 Pennsylvania Ave NV Suite 200	V	Zin Code	07 31 2018						
City Washington	DC	Zip Code 20004-3610	Transaction ID : PR2615923951134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		38.46						
Name of Employer (for Individual) UHC International Services Inc		upation (for Individual) Ntwk Pricing	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 (optiona)		499.98						
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 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 te to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Inc	orporated PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, Firs A. YOUNG, JENNIFER, , ,	t, Middle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 939 OCEAN BLV UNIT 15	2		07 31 Y Y Y Y Y 07 31 2018							
City HAMPTON	State NH	Zip Code 03842-1442	Transaction ID : PR2615929451134 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) 2 Sales	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, Firs GARVEY, MARISA, , ,	t, Middle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1986 MABEL CO	JRT		07 31 2018							
City CHASKA	State MN	Zip Code 55318-1241	Transaction ID : PR2615937751134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	s a l									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) SIs Strat Mkt Allis	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$115.38 Bi-Weekly)							
Full Name of Individual (Last, Firs KIRBY, WESLEY, , ,	t, Middle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 3213 SAGE BRU	SH TRL	Zin Code	07 / 07 / 07 / 2018							
City PLANO	TX	Zip Code 75023-5631	Transaction ID : PR2615957051134 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 Receipt For:		upation (for Individual) ager, Advisory Svcs	Memo Item							
Aggregate Year-to-Date ▼ Primary General Other (specify) 210.60			P/R Deduction (\$14.04 Bi-Weekly)							
SUBTOTAL of Receipts This Page	optional)		286.92							
TOTAL This Period (last page this I	ne number 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 13 14 15 16 1								
Any information copied from such Reports and a or for commercial purposes, other than using the			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorporat	ed PAC (l	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle Ir LONGORIA, PATRICIA, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 906 BLUEBIRD			07 31 2018								
City MANCHACA	State TX	Zip Code 78652-4154	Transaction ID : PR2617361151134 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 Mktg	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. TRAW, KEVIN, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 518 13TH ST			07 / D D / Y Y Y Y 2018								
City HUNTINGTON BEACH	State CA	Zip Code 92648-4038	Transaction ID : PR2617365651134 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) Bus Process	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 Ir C. CHERRY, MARK, , ,	iitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 612 BEMIS HEIGHTS PL			07 / D D / Y Y Y Y 2018								
City SAINT CHARLES	State MO	Zip Code 63303-1752	Transaction ID : PR2617922851134 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) Analytics Svcs	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)			133.08								
TOTAL This Period (last page this line number	only)										

Use separate schedule(s)

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T			(ch	(check only one)								
	EMIZED RECEIPTS		for each category of the Detailed Summary Page		K 11a		11b	11c	12	Г	47	
	y information copied from such Reports and Sta for commercial purposes, other than using the r						pose of			butio		
<u> </u>	NAME OF COMMITTEE (In Full)											
\rangle	UnitedHealth Group Incorporated	d PAC (L	InitedHealth Group PA	AC)								
A.	Full Name of Individual (Last, First, Middle Initia BAUBLIT, MICHAEL, , ,	al) or Full O	rganization Name		Date of	Re	ceipt					
	Mailing Address 2201 RIDGEWIND WAY				07 31 2018							
	City WINDERMERE	State FL	Zip Code 34786-5823					PR26179 eceipt th				
	FEC ID number of contributing federal political committee.	С			<u> </u>				2	28.08		
	Name of Employer (for Individual) Optum Services, Inc		ipation (for Individual) Gen Mgmt		M	emc	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60]	P/R Ded	ucti	on (\$14.	04 Bi-We	ekly)			
B.	Full Name of Individual (Last, First, Middle Initia PUTTERMAN, JAY, , ,	al) or Full O	rganization Name		Date of	f Re	ceipt					
	Mailing Address 7 SUNNY REACH DRIVE			07 / D D / Y Y Y Y 2018								
	City WEST HARTFORD	State CT	Zip Code 06117-1531					PR26179				
	FEC ID number of contributing federal political committee.	С	00117-1331	Amount of Each Receipt this Period								
	Name of Employer (for Individual) United HealthCare Services Inc	Occu	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60]	P/R Ded	uctio	on (\$14.)	04 Bi-We	ekly)			
с.	Full Name of Individual (Last, First, Middle Initia JOHNSON, MARK, , ,	al) or Full O	rganization Name		Date of	Re	ceipt					
	Mailing Address 8687 RILEY CURVE				07	1	31	/ Y	2018]	
	City CHANHASSEN	State MN	Zip Code 55317-4822					PR26179 eceipt th				
	FEC ID number of contributing federal political committee.	С			<u> </u>		, .	y	9	92.30		
	Name of Employer (for Individual) Optum Services, Inc		ipation (for Individual) Gen Mgmt		M	emo	tem					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 692.25	P/R Deduction (\$46.15 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)			•			,	,	14	8.46		
т	OTAL This Period (last page this line number or	nly)	•••••••	- •			-	1.45		-		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle MISKELL-CLOUTIER, DOMINIQUE,		rganization Name	Date of Receipt						
Mailing Address 12101 STRETFORD FORE	EST COURT		07 / D D / Y Y Y Y Y 07 31 2018						
City BRISTOW	State VA	Zip Code 20136-2078	Transaction ID : PR2618984951134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		27.80						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Preservice Review	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.98	P/R Deduction (\$13.90 Bi-Weekly)						
Full Name of Individual (Last, First, Middle BROWN, ROGER, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 512 EAST STATE AVE			07 / D D / Y Y Y Y Y 2018						
City PHOENIX	State AZ	Zip Code 85020-4940	Transaction ID : PR2622557951134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) ▼		2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle GARELLI, JOLENE, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 9 PROSPECT VIEW DRIV	1		07 / D D / Y Y Y Y 2018						
City DUMMERSTON	State VT	Zip Code 05301-8875	Transaction ID : PR2622559251134 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) Fech Proj-Prgm Mgmt	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)			440.48						
TOTAL This Period (last page this line numb	er only)								

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

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)	porated PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Mi A. OLSON, MARK, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 891 14TH ST UNIT 1210			M M / D D / Y Y Y Y 07 31 2018						
City DENVER	State CO	Zip Code 80202-3259	Transaction ID : PR2622561651134 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) VP SIs Acct 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, Mi B. CAMPBELL, THERESA, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1117 XERXES AVEN			07 / D D / Y Y Y Y 2018						
City MINNEAPOLIS	State MN	Zip Code 55405-2128	Transaction ID : PR2622562151134 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) Human Capital Partner	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, Mi C. TROCINSKI, CAROL, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1030 ROBIN COURT			07 / D D / Y Y Y Y 2018						
City WEST SALEM	State WI	Zip Code 54669-1919	Transaction ID : PR2623691051134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		27.38						
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 ▼ 214.47	P/R Deduction (\$13.69 Bi-Weekly)						
SUBTOTAL of Receipts This Page (option	onal)		132.38						
TOTAL This Period (last page this line r	number only)								

SCHEDULE A (FEC Form 3X) _____ _

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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	d Statements ma the name and a	ay not be sold or used by any p ddress of any political committe	person for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middle CAMP, MELISSA, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 124 WOODFIELD BLVD			07 31 2018								
City MECHANICVILLE	State NY	Zip Code 12118-3038	Transaction ID : PR2624436851134 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 Ntwk Contrctng	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. MULES, REBECCA, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 660 DOVER STREET			07 / D D / Y Y Y Y 2018								
City BALTIMORE	State MD	Zip Code 21230-2228	Transaction ID : PR2624442651134								
		21230-2228	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item								
Receipt For:	Aggregate	Year-to-Date 🔻									
Other (specify) ▼		2692,20	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle SINGH, KANWAR, , ,	,	rganization Name	Date of Receipt								
Mailing Address 829 CONCORDE CIRCLE APT # 4202			07 / D D / Y Y Y Y 2018								
City LINTHICUM HEIGHTS	State MD	Zip Code 21090-1778	Transaction ID : PR2624445951134 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		27.98								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) e Practitioner 3	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 211.06	P/R Deduction (\$13.99 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			440.66								
TOTAL This Period (last page this line numb	er only)										

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	-	Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using			person for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle STALLWOOD, GREGG, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 4842 JUNIPER DR			07 31 Y Y Y Y Y							
City PALM HARBOR	State FL	Zip Code 34685-2688	Transaction ID : PR2625499051134 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) Ops	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2692.20	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle COLLETTE, CHRISTOPHER, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 4776 MANITOU ROAD			07 / D D / Y Y Y Y 2018							
City	State MN	Zip Code	Transaction ID : PR2625499551134							
EXCELSIOR	IVIIN	55331-9400	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P UnitedHlth Grp	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify)		2884.50	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle RELLER, TAMI, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 5120 MIRROR LAKES DR	1		07 D D / Y Y Y Y 2018							
City EDINA	State MN	Zip Code 55436-1342	Transaction ID : PR2625501951134 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) Grp Chief Mktg 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 (optional)			1153.80							
TOTAL This Period (last page this line numb	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 Stater for commercial purposes, other than using the nan											
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F											
Α.	Full Name of Individual (Last, First, Middle Initial) (SMITH, LISA, , ,	or Full Or	ganization Name	Date of Receipt								
	Mailing Address 5040 INTERLACHEN BLUFF		- 1	07 31 Y Y Y Y Y 2018								
	- 3	State MN	Zip Code	Transaction ID : PR2625503751134								
	EDINA	IVIIN	55436-1360	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	0		76.52								
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) Sen Mgmt	Memo Item								
	Receipt For: Ac	areaate `	Year-to-Date ▼									
	Primary General Other (specify) ▼	jg. og uto	579.12	P/R Deduction (\$38.26 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Initial) (LAWTON, MICHAEL, , ,	or Full Or	ganization Name	Date of Receipt								
	Mailing Address 1720 CROSS PINES DR			07 / D D / Y Y Y Y Y 2018								
	City	State	Zip Code	Transaction ID : PR2625505451134								
	FLEMING ISLAND	FL	32003-4915	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	0		384.60								
	Name of Employer (for Individual) United HealthCare Services Inc		pation (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)								
с.	Full Name of Individual (Last, First, Middle Initial) (HOMER, WILLIAM, , ,	or Full Or	ganization Name	Date of Receipt								
	Mailing Address 3120 LAKE CENTER DR			07 / D D / Y Y Y Y 07 31 2018								
	5	State	Zip Code	Transaction ID : PR2625507751134								
	SANTA ANA	CA	92704-6917	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.			27.98								
	Name of Employer (for Individual)		pation (for Individual)	Memo Item								
	Optum Services, Inc	Sr Pr	incipal Proj-Prgm Mgr									
		ggregate `	Year-to-Date ▼									
	Other (specify)		211.06	P/R Deduction (\$13.99 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)		>	489.10								
т	OTAL This Period (last page this line number only)		•••••									

Use separate schedule(s)

FOR LINE NUMBER:

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17			Use separate schedule(s)	(check o	(check only one)						
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a 13	F	11b	11c	12	17		
	y information copied from such Reports and Sta for commercial purposes, other than using the n			rson for th		pose of a		contribut	ions		
$\left\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	C)							
A.	Full Name of Individual (Last, First, Middle Initia LIVERS, JEFFREY, , ,	l) or Full O	organization Name	Date	of Re	eceipt					
	Mailing Address 402 DERBY COURT			07 31 2018							
	City MEBANE	State NC	Zip Code 27302-9452					3 4605113 is Period	4		
	FEC ID number of contributing federal political committee.	С			_		- 41-	28.0)8		
	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 ▼ 210.60	P/R De	educti	ion (\$14.()4 Bi-We	eekly)			
в.	Full Name of Individual (Last, First, Middle Initia CULHANE, DEBORAH, , ,	l) or Full O	organization Name	Date	of Re	eceipt					
	Mailing Address 100 COVE WAY UNIT 301 City	State	Zip Code	07 / 31 / 2018 Transaction ID : PR2626356051134							
	QUINCY	MA	02169-5857			-		3 5605113 4 is Period	I		
	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)							
с.	Full Name of Individual (Last, First, Middle Initia TERRAL, RECCA, , ,	l) or Full O	organization Name	Date	of Re	eceipt					
	Mailing Address 6828 SIMMONS RD			07		D D 31	/ Y	2018	Y		
	City NORTH RICHLAND HILLS	State TX	Zip Code 76182-4259					3 5965113 is Period	4		
	FEC ID number of contributing federal political committee.	С			_	, .	, ,	27.8	30		
Name of Employer (for Individual) Optum Services, Inc			upation (for Individual) Gen Mgmt		Memo	o Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 211.98	P/R Deduction (\$13.90 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)					,	,	440.4	18		
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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17			Use separate schedule(s)	(check only	(check only one)							
ITEMIZED RECEIPTS			for each category of the Detailed Summary Page	× 11a 13	11b 11c	12	17					
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the p	urpose of solicitir	ng contribu	tions					
\setminus	NAME OF COMMITTEE (In Full)											
	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group P/	AC)								
Α.	Full Name of Individual (Last, First, Middle Init HINES, GREGORY, , ,	ial) or Full O	rganization Name	Date of Receipt								
	Mailing Address 3660 SILVERWOOD RD			07								
	City WEST SACRAMENTO	State CA	Zip Code 95691-5403		ction ID : PR262 of Each Receipt							
	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	Me	no Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Dedu	ction (\$192.30 Bi-	Weekly)						
в.	Full Name of Individual (Last, First, Middle Init BONAR, BRUCE, , ,	ial) or Full O	rganization Name	Date of	Receipt							
	Mailing Address 1362 DOS HERMANOS GLEN			07 / D D / Y Y Y Y 31 2018								
	City	State CA	Zip Code		ction ID : PR262							
	ESCONDIDO FEC ID number of contributing	C	92027-1270	Amount of Each Receipt this Period								
	federal political committee. Name of Employer (for Individual)		upation (for Individual)	Memo Item								
	Optum Services, Inc	Sr N	Mgr, Software Engineering									
	Receipt For:	Aggregate	Year-to-Date 211.98	P/R Deduction (\$13.90 Bi-Weekly)								
<u></u> с.	Full Name of Individual (Last, First, Middle Init STOCKSTAD, LYNNE, , ,	ial) or Full O	rganization Name	Date of	Receipt							
	Mailing Address 55 GIDEONS POINT RD			07	/ D D / 31	2018	Y					
	City EXCELSIOR	State MN	Zip Code 55331-9526		ction ID : PR262 of Each Receipt							
	FEC ID number of contributing federal political committee.	С			y y	384.	60					
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Grp Chief Mktg Off	Me	mo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date 2884.50	P/R Deduction (\$192.30 Bi-Weekly)								
⊢	UBTOTAL of Receipts This Page (optional)				<u> </u>	797.	00					

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 t			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
Full Name of Individual (Last, First, Middle A. SCHENCK, ERIK, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 1 FLORENCE CT			07 31 2018							
City PALM COAST	State FL	Zip Code 32137-8305	Transaction ID : PR2627730451134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		27.80							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) c Dir Clin Cnslt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.98	P/R Deduction (\$13.90 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. SCOTT, NICOLE, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 29039 HOBBLEBUSH			07 / D D / Y Y Y 2018							
City SAN ANTONIO	State TX	Zip Code 78260-2249	Transaction ID : PR2627731951134 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 SIs Acct 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 C. MORRIS, BARBARA, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 1045 SWEET GUM WAY	1 -	1	07 / D D / Y Y Y Y 2018							
City MEBANE	State NC	Zip Code 27302-6511	Transaction ID : PR2627735551134 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)							
SUBTOTAL of Receipts This Page (optional).			83.96							
TOTAL This Period (last page this line number	er only)									

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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	EIVIZED RECEIPTS			or each category of the Detailed Summary Page	×]11a		11	b	1	1c [12		
						13		14	,	1	5	16		17
	y information copied from such Reports and State for commercial purposes, other than using the na													
	NAME OF COMMITTEE (In Full)		_											
$\Big/$	UnitedHealth Group Incorporated	PAC (l	Jni	tedHealth Group PA	.C)									
Α.	Full Name of Individual (Last, First, Middle Initial) LINDLEY, SHEILA, , ,) or Full O	rgar	nization Name		Date of Receipt								
	Mailing Address 102 NORMANDY CT					м м 07	1		31	/	Y	y y 2018	Y	
	City	State		Zip Code		Transaction ID : PR2627739851134								
	MADISON	MS		39110-6711	/	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С												
	Name of Employer (for Individual) United HealthCare Services Inc		upat d Dir	ion (for Individual)		Me	emo	lte	əm					
	Poppint For:		Vea	r-to-Date ▼	-									
	Primary General Other (specify) ▼	iggrogato	Tea	211.98	P/	R Ded	uctic	on ((\$13.9	90 B	si-Wee	ekly)		
			7											
B.	Full Name of Individual (Last, First, Middle Initial) SENDEN, SCOTT, , ,) or Full O	rgar	nization Name	Date of Receipt									
	Mailing Address 6285 BUTTERWORTH LANE			м м 07	/		31	/	Y	y y 2018	Y			
	City	State		Zip Code		Trans	actio	on	ID : F	PR2	62774	134511	34	
	CORCORAN	MN		55340-9406	/	Amount	of	Ea	ch Re	ecei	pt this	s Perio	d	
	FEC ID number of contributing federal political committee.	С				28.08 Memo Item								
	Name of Employer (for Individual) Optum Services, Inc		•	tion (for Individual) Secuirty Risk Mgmt										
	Receipt For:	Agaregate	Yea	r-to-Date ▼										
	Primary General	33 . 3			P/	R Dedu	uctio	on ((\$14.0)4 B	i-Wee	ekly)		
	Other (specify) v		,	210.60										
C.	Full Name of Individual (Last, First, Middle Initial) RUSH, ROBERT, , ,) or Full O	rgar	nization Name	[Date of	Re	cei	pt					
	Mailing Address 4735 BYWOOD CT					^M 07	/		31	/	Y	2018	Y	
	City	State		Zip Code		Trans	acti	ion	ID : I	PR2	62774	438511	34	_
	COLORADO SPRINGS	CO		80906-5936	/	Amount	of	Ea	ch Re	eceij	pt this	s Perio	d	
	FEC ID number of contributing federal political committee.	С						y			,	11	1.10	
	Name of Employer (for Individual)	Occi	unat	ion (for Individual)	_	M	emo) Ite	em					
	United HealthCare Services Inc		•	Contrctng										
	Receipt For:	1		r-to-Date ▼	-									
	Primary General	iggrogato	Tou		I P.	/R Ded	uctio	on	(\$55.	55 B	Bi-Wee	ekly)		
	Other (specify)		-	388.85	P/R Deduction (\$55.55 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)											166	6.98	
т	OTAL This Period (last page this line number onl	y)			Ì			-						Π
		- /					-	1	-		7			

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PAGE 228 OF

	,		Use separate schedule(s)	(ch	(check only one)								
ITEMIZED RECEIF	13		or each category of the Detailed Summary Page		× 11a		11b	11c	12				
	n such Reports and Statement , other than using the name a					purp							
				10 5					1 Commu				
	oup Incorporated PA	C (Uni	itedHealth Group PA	C)									
A. NAKAJIMA, KENICH		ull Organ	nization Name		Date of	Red	ceipt						
Mailing Address 15822				07 31 / Y Y Y Y 2018									
City HUNTINGTON BEACH	State CA	9	Zip Code 92647-3104						31905113 is Period	4			
FEC ID number of control federal political committee	ů.				<u> </u>		y		27.8	30			
Name of Employer (for United HealthCare Servi	,	Occupat Sr Act C		Me	emo	Item							
Receipt For: Primary Other (specify) ▼	General Aggree	Aggregate Year-to-Date ▼ 211.98					on (\$13.	90 Bi-We	eekly)				
B. MANNING, KIM, ,	, ,	nitial) or Full Organization Name					ceipt						
Mailing Address 12703	1						07 / D D / Y Y Y Y 2018						
City	State	9	Zip Code 68142-1762				-		31451134	4			
OMAHA		Occupation (for Individual) Assc Dir Mktg				of	Each R	eceipt th	is Period	_			
FEC ID number of contr federal political committe	ů.					28.08							
Name of Employer (for United HealthCare Service						Memo Item							
Receipt For: Primary Other (specify) ▼	General	gate Yea	r-to-Date ▼ 210.60	F	P/R Dedu	uctio	ın (\$14.0	04 Bi-We	ekly)				
Full Name of Individual C. VAN DER WALD	Last, First, Middle Initial) or Fi E, LAMBERT, , ,	ull Organ	nization Name		Date of	Red	ceipt						
Mailing Address 45 AU	DUBON CAUSEWAY				07	/	31	/ Y	2018	Y			
City LANTANA	State FL	9	Zip Code 33462-4756						33235113 is Period	4			
FEC ID number of contr federal political committe	ů.				<u> </u>		, .	9	384.6	50			
Name of Employer (for United HealthCare Servi	,	•	tion (for Individual) h Reform/Modernizatn		Me	emo	ltem						
Receipt For: Primary Other (specify)	General Aggre	ggregate Year-to-Date ▼ 2884.50				P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts T	his Page (optional)		•				, .	9	440.4	18			
TOTAL This Period (last p	age this line number only)		••••••	-			,						

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

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PAGE 229 OF

IT.			Use separate schedule(s		(check only one)							
ITEMIZED RECEIPTS			for each category of the Detailed Summary Page		X 11a 11b 11c							
	y information copied from such Reports and Sta for commercial purposes, other than using the n											
	NAME OF COMMITTEE (In Full)		address of any political com	inilitee to	SOUCIL COL	ומחזו	ations in	om suci	Commu	ee.		
\rangle	UnitedHealth Group Incorporated	I PAC (l	UnitedHealth Group	o PAC)								
A.	Full Name of Individual (Last, First, Middle Initia KORNHAUSER, MICHAEL, , ,	l) or Full O	Organization Name		Date of	Red	ceipt					
	Mailing Address 180 SUMMIT LANE				07 ^M	/	D D D 31	/ Y	2018	Y		
	City BALA CYNWYD	State PA	Zip Code 19004-2931						33575113 is Period	4		
	FEC ID number of contributing federal political committee.	С					y	7	115.9	92		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) d Dir		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 869.40)	P/R Dedu	uctio	n (\$57.9	96 Bi-We	ekly)			
в.	Full Name of Individual (Last, First, Middle Initia BROERSE, DEBRA, , ,	l) or Full O	Organization Name		Date of	Red	ceipt					
	Mailing Address 443 FARLEY DR	1	Zip Code		07 / D D / Y Y Y Y Y 2018							
	City INDIANAPOLIS	State IN	_	Transaction ID : PR2628791351134 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		supation (for Individual) sc Dir Underwriting		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	0	P/R Dedu	uctio	n (\$14.(04 Bi-We	ekly)			
с.	Full Name of Individual (Last, First, Middle Initia MALIK, SHKEELA, , ,	l) or Full O	Organization Name		Date of	Red	ceipt					
	Mailing Address 4410 APPLE VALLEY LN				07 ^M	/	D D D 31	/ Y	2018 Y	Y		
	City W BLOOMFIELD	State MI	Zip Code 48323-2804	-					79815113 is Period	4		
	FEC ID number of contributing federal political committee.	С					9		27.8	80		
			upation (for Individual) c Dir Clin Qlty		Memo Item							
			Year-to-Date 211.98		P/R Ded	uctic	on (\$13.)	90 Bi-We	eekly)			
s	UBTOTAL of Receipts This Page (optional)			🕨			,		171.8	30		
т	OTAL This Period (last page this line number or	ıly)		🕨			y-		4			

SCHEDULE A (FEC Form 3X) _____ _

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorporat	ted PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle Ir ERICKSON, ALYSSA, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 6430 POLARIS LANE N			07 31 2018							
City MAPLE GROVE	State MN	Zip Code 55311-4320	Transaction ID : PR2628798951134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		27.80							
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 ▼ 211.15	P/R Deduction (\$13.90 Bi-Weekly)							
Full Name of Individual (Last, First, Middle Ir B. HANSEN, YVETTE, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 10524 MUIRFIELD DRIVE			07 31 2018							
City NAPERVILLE	State IL	Zip Code 60564-8086	Transaction ID : PR2628807151134 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) Recruit	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 C. THOMPSON, BRUCE, , ,	hitial) or Full C	organization Name	Date of Receipt							
Mailing Address 2826 HEDGEROW DRIVE			07 31 2018							
City DALLAS	State TX	Zip Code 75235-7590	Transaction ID : PR2628833651134 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)			440.48							
TOTAL This Period (last page this line number	r only)									

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using t	Statements ma he name and a	ay not be sold or used by any puddess of any political committe	person for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle I A. WONG, MING, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 21066 ASHLEY LANE			07 31 2018							
City LAKE FOREST	State CA	Zip Code 92630-5867	Transaction ID : PR2629556851134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		120.00							
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Dir	upation (for Individual) Med Clin Ops	Memo Item							
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 900.00	P/R Deduction (\$60.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I B. TITA, MARYBETH, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 16 BEACH WOOD ROAD			07 / D D / Y Y Y Y 2018							
City FERNANDINA BEACH	State FL	Zip Code 32034-6504	Transaction ID : PR2632077851134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		76.92 Memo Item							
Name of Employer (for Individual) United HealthCare Services Inc	Occ	upation (for Individual) Fin								
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 I C. SAYEED, OMER, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 2239 HOLLISTON AVE			07 31 / Y Y Y Y 07 31 2018							
City ALTADENA	State CA	Zip Code 91001-3213	Transaction ID : PR2632078251134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		105.26							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Advisory Svc	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 421.04	P/R Deduction (\$52.63 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			302.18							
TOTAL This Period (last page this line number	er only)	······								

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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 11b 11c 12							
			13 14 15 16 17 verson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)		,								
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle OTTESON, WILLIAM, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 4545 OXFORD AVE			07 31 2018							
City EDINA	State MN	Zip Code 55436-1405	Transaction ID : PR2632082551134 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) outy 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, Middle B. MILLIGAN JR, CHARLES, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 6901 RIM ROCK CIRCLE			07 31 2018							
City ALBUQUERQUE	State NM	Zip Code 87120-3196	Transaction ID : PR2632083551134							
		07120-3190	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		80.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Plan CEO	Memo Item							
Receipt For:	Aggregate	Year-to-Date 🔻	1							
Other (specify)		600.00	P/R Deduction (\$40.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. HIBBERT, LINDA, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 924 BENTLEY COURT			07 / D D / Y Y Y Y 2018							
City CHALFONT	State PA	Zip Code 18914-3762	Transaction ID : PR2632085351134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		76.66							
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 ▼ 578.28	P/R Deduction (\$38.33 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional))		233.58							
TOTAL This Period (last page this line numb	per only)									

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page			X 11a		11b	11c	12	_	_	
	y information copied from such Reports and Sta for commercial purposes, other than using the n												
	NAME OF COMMITTEE (In Full)	ame and a		ess of any political committee	10 5			utions ii	rom suc	n comm	intee		
\rangle	UnitedHealth Group Incorporated	I PAC (l	Uni	tedHealth Group PA	.C)								
A.	Full Name of Individual (Last, First, Middle Initia NAPOLITANO, DIANE, , ,	l) or Full O	rgar	nization Name		Date of	Re	ceipt					
	Mailing Address 9 CHESTNUT COURT				07 31 Y Y Y Y Y								
	City BASKING RIDGE	State NJ		Zip Code 07920-3100					PR2632 eceipt th				
	FEC ID number of contributing federal political committee.	С								2	8.08		
	United HealthCare Services Inc Di			ion (for Individual) Process		Me	emo	Item					
				ar-to-Date ▼ 210.60		P/R Ded	uctio	on (\$14.	04 Bi-W	eekly)			
в.	Full Name of Individual (Last, First, Middle Initia GORSUCH, KIRSTEN, , ,	l) or Full O		Date of	Re	ceipt							
	Mailing Address 2780 COUNTRYSIDE DRIVE W			07 / D D / Y Y Y Y 2018									
	City ORONO	State Zip Code MN 55356-9676				Transaction ID : PR2632087851134 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С					384.60						
	Name of Employer (for Individual) United HealthCare Services Inc	Occi VP		Me	emo	Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 2884.50		P/R Dedu	uctic	on (\$192	2.30 Bi-W	/eekly)			
С.	Full Name of Individual (Last, First, Middle Initia TUFFIN, MICHAEL, , ,	l) or Full O	Orgar	nization Name		Date of	Re	ceipt					
	Mailing Address 5904 ASHBY MANOR PLACE					м м 07	1	D D D 31	/ Y	2018	Y		
	City ALEXANDRIA	State VA		Zip Code 22310-2267					PR2632 eceipt th				
	FEC ID number of contributing federal political committee.	С				384.60							
			•	ion (for Individual) blic Affairs		Memo Item							
Receipt For: Aggregate Ye Primary General Other (specify) The second			Yea	r-to-Date ▼ 2884.50		P/R Ded	uctio	on (\$192	2.30 Bi-V	Veekly)			
s	UBTOTAL of Receipts This Page (optional)							,		79	7.28		
Т	OTAL This Period (last page this line number or	ly)		••••••							-		

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							
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/	4C)							
Full Name of Individual (Last, First, Middle I A. WALTER, JEFFREY, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 1490 SETTLER ST			07 31 2018							
City ELBURN	State IL	Zip Code 60119-7841	Transaction ID : PR2632088851134 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) Principal Proj-Prgm 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, Middle I B. ORRICK, VERONICA, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 10403 SANTA RITA ST			07 / D D / Y Y Y Y Y 2018							
City CYPRESS	State CA	Zip Code 90630-4221	Transaction ID : PR2632858551134 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 Prgm Mgr	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 C. TEMPLE, MARTHA, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 194 LITTLE LANE			07 / D D / Y Y Y Y 2018							
City DURHAM	State CT	Zip Code 06422-1303	Transaction ID : PR2632873651134 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)			489.60							
TOTAL This Period (last page this line numbe	r only)									

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 1								
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorport	ated PAC (l	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middle WALTHOUR, JOHN, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 5049 COLFAX AVE S			M M / D D / Y Y Y Y 07 31 2018								
City	State MN	Zip Code	Transaction ID : PR2632877051134								
MINNEAPOLIS		55419-1145	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		76.92								
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item								
United HealthCare Services Inc	VP	Mktg Rsch									
Receipt For:	Aggregate	Year-to-Date V									
Other (specify) V		576.90	P/R Deduction (\$38.46 Bi-Weekly)								
			1								
Full Name of Individual (Last, First, Middle B. KRUPNICK, BRUCE, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 5616 GATE PARK RD			07 31 2018								
City	State	Zip Code	Transaction ID : PR2632878051134								
EDINA	MN	55436-2208	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		27.98								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) le Practitioner 3	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General Other (specify) ▼		, 211.06	P/R Deduction (\$13.99 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. PLATT, LAWRENCE, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 3830 KING STREET											
	1	1	07 31 2018								
City ALEXANDRIA	State VA	Zip Code 22302-1906	Transaction ID : PR2632880751134								
		22302-1900	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:	Aggregate	Year-to-Date ▼									
Primary General Other (specify)		2884.50	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optiona)		489.50								
	,										
TOTAL This Period (last page this line num	ber only)										

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17										
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ted PAC (I	JnitedHealth Group P	AC)										
Full Name of Individual (Last, First, Middle Ir A. PARR, MICHAEL, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 2625 LEROY LANE			07 31 2018										
City WEST BLOOMFIELD	State MI	Zip Code 48324-2237	Transaction ID : PR2632883551134 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		27.80										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Compli	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.98	P/R Deduction (\$13.90 Bi-Weekly)										
Full Name of Individual (Last, First, Middle Ir SARGENT, GLORIA, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 3659 HEMPSTEAD			07 31 Y Y Y Y Y										
City SAINT CHARLES	State MO	Zip Code 63301	Transaction ID : PR2634119351134 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 SIs Acct 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 Ir C. HAYES, TREVOR, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 3108 SONIA DRIVE			07 / D D / Y Y Y Y Y 2018										
City LAS VEGAS	State NV	Zip Code 89107-3246	Transaction ID : PR2634166851134 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		27.74										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Comm	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 212.43	P/R Deduction (\$13.87 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)			83.62										
TOTAL This Period (last page this line number	r only)												

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	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 Incorpora	ated PAC (l	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle A. HAPGOOD, WADE, , ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 330 NW 82ND			07 31 2018									
City TOPEKA	State KS	Zip Code 66617-2223	Transaction ID : PR2634167051134 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: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 865.35	P/R Deduction (\$57.69 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. ROALDI, MICHAEL, , ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 4720 HARRIET AVE			07 31 / Y Y Y Y 2018									
City MINNEAPOLIS	State MN	Zip Code 55419-5434	Transaction ID : PR2634169551134 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		77.00									
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 ▼ 269,50	P/R Deduction (\$38.50 Bi-Weekly)									
Full Name of Individual (Last, First, Middle C. PRIBLE, JOHN, , ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 1923 SHIVER DR			07 / D D / Y Y Y Y 2018									
City ALEXANDRIA	State VA	Zip Code 22307-1629	Transaction ID : PR2634656651134 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)									
SUBTOTAL of Receipts This Page (optional))		576.98									
TOTAL This Period (last page this line numb	per only)											

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							
Any information copied from such Reports and or for commercial purposes, other than using t	Statements manual statements manual statements and a	I ay not be sold or used by any p address of any political committe	13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ted PAC (UnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle SCHEID, ADREAN, , ,	Initial) or Full C	Organization Name	Date of Receipt							
Mailing Address 2915 CATHEDRAL AVENU			07 31 Y Y Y Y Y							
City WASHINGTON	State DC	Zip Code 20008-3406	Transaction ID : PR2634880451134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) UHC International Services Inc		upation (for Individual) External 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 I LARAMEE, CHRISTINE, , ,	Initial) or Full C	Organization Name	Date of Receipt							
Mailing Address 2902 S ESPERANZA AVEN	IUE		07 / D D / Y Y Y Y 2018							
City TAMPA	State FL	Zip Code 33629-7119	Transaction ID : PR2634881551134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		92.30							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) d Dir	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼	1							
Primary General Other (specify) ▼		692.25	P/R Deduction (\$46.15 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I C. PESCATELLO, SARA, , ,	Initial) or Full C	Organization Name	Date of Receipt							
Mailing Address 2149 CALIFORNIA STREE		Zin Onda	07 J D D / Y Y Y Y Y 2018							
City WASHINGTON	State DC	Zip Code 20008-1834	Transaction ID : PR2634888551134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
United HealthCare Services Inc Di		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)							
SUBTOTAL of Receipts This Page (optional)			861.50							
TOTAL This Period (last page this line number	er only)									

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		1c 12							
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of solid								
NAME OF COMMITTEE (In Full)											
> UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group PA	(C)								
Full Name of Individual (Last, First, Middle A. POWER, ROBERT, , ,	Initial) or Full C	Prganization Name	Date of Receipt								
Mailing Address 20 SMITH LANE			M M / D D / Y Y Y Y								
City	State	Zip Code	07 31 2018 Transaction ID : PR2634892851134								
SAINT JAMES	NY	11780-3810	Amount of Each Recei								
FEC ID number of contributing federal political committee.	С			76.92							
Name of Employer (for Individual) Optum360 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 B. REED, PAM , , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 2983 BLACKSTONE			07 / D D / Y Y Y Y 2018								
City FRISCO	State TX	Zip Code 75033-7389	Transaction ID : PR2								
FEC ID number of contributing		13033 1303	Amount of Each Recei								
federal political committee.	С		38.46								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mgr Acct Mgmt	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼	-								
Other (specify) ▼		, 288.45	P/R Deduction (\$19.23 B	i-Weekly)							
Full Name of Individual (Last, First, Middle C. PAYET, KEITH, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 405 ENCLAVE CT			07 / 31 /	2018 Y							
City BRENTWOOD	State TN	Zip Code 37027-7894	Transaction ID : PR2 Amount of Each Recei								
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 ▼ 1538.40	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional).				499.98							
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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		Detailed Summary Page	×	11a		11b		11c	12					
Any information copied from such Reports	and Statements ma	v not be sold or used by any no	erson fo	13 or the i	<u> </u>	14 pose	of s	15 oliciting	16 a contribu	17 tions				
or for commercial purposes, other than usin														
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (l	JnitedHealth Group PA	NC)											
/ Full Name of Individual (Last, First, Mido A. NGUYEN, ANTHONY, , ,	dle Initial) or Full O	rganization Name		Date of Receipt										
Mailing Address 17816 PORTO MARINA	۱.		_	07 31 2018										
City PACIFIC PALISADES	State CA	Zip Code 90272-4154	Transaction ID : PR2635444051134 Amount of Each Receipt this Period 105.26											
FEC ID number of contributing federal political committee.	С													
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Population HIth		Me	∍mo	ltem	ı							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 421.04	P/I	R Dedu	JCtic	on (\$ł	52.6	3 Bi-We	eekly)					
Full Name of Individual (Last, First, Mide B. ELLER, JESSE, , ,	lle Initial) or Full O	rganization Name		ate of	Ree	ceipt								
Mailing Address 28108 N 17TH DR				07 / D D / Y Y Y Y 2018										
City PHOENIX	State AZ	Zip Code 85085-5352		Transaction ID : PR2635445151134 Amount of Each Receipt this Period 28.08										
FEC ID number of contributing federal political committee.	C													
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir	ו	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/F	P/R Deduction (\$14.04 Bi-Weekly)										
Full Name of Individual (Last, First, Mide EICHENLAUB, MANDIE, , ,	le Initial) or Full O	rganization Name		Date of	Re	ceipt								
Mailing Address 6607 CINDY LANE				07	/	3	31 D	/ Y	ү ү 2018					
City HOUSTON	State TX	Zip Code 77008-5110	A			-			44855113 his Period	4				
FEC ID number of contributing federal political committee.	С				_	1		,	142.	84				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Prgms		Me	∍mo	tem	ı							
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 214.26				R Dedu	uctic	on (\$	71.4	2 Bi-We	eekly)					
SUBTOTAL of Receipts This Page (option	al)		. [-				276.	18				
TOTAL This Period (last page this line nu	mber only)		Ī					-						

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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						
	y information copied from such Reports and SI for commercial purposes, other than using the			erson for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full)									
\rangle	UnitedHealth Group Incorporate	d PAC (I	UnitedHealth Group P	AC)						
Α.	Full Name of Individual (Last, First, Middle Init ROOS, THOMAS, , ,	ial) or Full C	Organization Name	Date of Receipt						
	Mailing Address 3199 KAGEN AVE NE	- 1		07 07 V V V V V V V V V V V V V V V V V						
	City SAINT MICHAEL	State MN	Zip Code 55376-3416	Transaction ID : PR2635451251134 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 Chief Acctng Off	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
B.	Full Name of Individual (Last, First, Middle Init NELSON, MICHAEL, , ,	ial) or Full C	Organization Name	Date of Receipt						
	Mailing Address 3253 MARSCHALL RD			07 / D D / Y Y Y Y Y 2018						
	City SHAKOPEE	State MN	Zip Code	Transaction ID : PR2636719351134						
	FEC ID number of contributing federal political committee.	С	55379-3337	Amount of Each Receipt this Period						
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) sc Dir Recruit Global	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Init GRIMES, MATT, , ,	ial) or Full C	Organization Name	Date of Receipt						
	Mailing Address 136 SOUTH PERKINS ROAD			07 / D D / Y Y Y Y Y 2018						
	City MEMPHIS	State TN	Zip Code 38117-3233	Transaction ID : PR2636733351134 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		cupation (for Individual) Med Clin Ops	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)						
	UBTOTAL of Receipts This Page (optional)			440.76						

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	MIZED RECEIPTS			or each category of the Detailed Summary Page	[X 1'	la		11	b	11c	; [12			
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	nformation copied from such Reports and Sta commercial purposes, other than using the n															
	ME OF COMMITTEE (In Full)															
	nitedHealth Group Incorporated	I PAC (l	Jni	itedHealth Group PA	(C)											
	ll Name of Individual (Last, First, Middle Initia MITH, KENNETH, , ,	l) or Full O)rgai	nization Name		Date of Receipt										
	illing Address 1200 WASHINGTON ST #202						07 [™]	1	Г	31] ' [Y	y y 2018	Y]	
Cit	-	State		Zip Code		Tr	ans	acti	ion	ID :	PR26	3673	345511	34		
B	DSTON	MA		02118-2132	_	Am	oun	t of	Ea	ch R	eceipt	this	8 Perio	d		
	C ID number of contributing leral political committee.	С							-				76	6.92	_	
	me of Employer (for Individual) ited HealthCare Services Inc		•	tion (for Individual) g Bus Dev			М	emo	o Ite	эm						
	agint For:			.	-											
	Primary General Other (specify) v	Aggregate	Tea	ar-to-Date ▼ 576.90		P/R	Ded	uctio	on	(\$38.4	46 Bi-'	Wee	kly)			
	II Name of Individual (Last, First, Middle Initia EDERSEN, NICHOLAS, , ,	l) or Full O)rga	nization Name		Dat		f Re	rei	nt						
	illing Address 1862 CLOVER MEADOW DR				-				_			v	Y Y	v		
		State		Zin Codo			07		Ľ	31			2018	T		
Cit	y HASKA	State Zip Code MN 55318-5400						Transaction ID : PR2637684751134 Amount of Each Receipt this Period								
									Ea	CN R	eceipt	this	Perio	a		
	C ID number of contributing leral political committee.	Itical committee. Occupation (for Individual)						28.08								
	me of Employer (for Individual) ited HealthCare Services Inc							Memo Item								
Re	ceipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 210.60		P/R I	Ded	uctio	on ((\$14.(04 Bi-\	Nee	kly)			
	II Name of Individual (Last, First, Middle Initia	l) or Full O	rga	nization Name		Dat	e o	f Re	ecei	pt						
Ma	uiling Address 3360 VISTA COURT						07 [™]	1	Γ	31	1		ү ү 2018	Y	1	
Cit		State		Zip Code		Т	rans	sact	ion	ID :	PR26	3768	887511	34	<u> </u>	
H	ASTINGS	MN		55033-3347		Am	oun	t of	Ea	ch R	eceipt	this	8 Perio	d		
	C ID number of contributing leral political committee.	С							y	_	. ,		28	8.08	Ξ	
Na	me of Employer (for Individual)	Occi	una	tion (for Individual)	-		Μ	emc	o Ite	эm						
O	otum Services, Inc	Occupation (for Individual) Sr Bus Anlys Cnslt														
	Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 210.60		P/R	Dec	lucti	on	(\$14.	.04 Bi-	Wee	∗kly)			
	TOTAL of Receipts This Page (optional)			F	I 				,				133	.08	-	

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							
			person for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	rated PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middl A. FLOOD, ANDREW, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 4833 TOWNES ROAD			07 31 Y Y Y Y Y							
City EDINA	State MN	Zip Code 55424-1239	Transaction ID : PR2637693251134 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) cipal Data Scientist	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 B. LIST, CHRISTINE, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 340 DAVIS ST			07 / D D / Y Y Y Y Y 2018							
City NORTHBOROUGH	State MA	Zip Code 01532-2420	Transaction ID : PR2637694651134 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)							
Full Name of Individual (Last, First, Middl C. SIVLEY III, HARRY, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 12020 WEXFORD OVER			07 / D D / Y Y Y Y 31 2018							
City ROSWELL	State GA	Zip Code 30075-1454	Transaction ID : PR2638106651134 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)							
SUBTOTAL of Receipts This Page (optiona	l)		143.46							
TOTAL This Period (last page this line num	ber only)									

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	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle I LOGAN, BRETT, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 121 3RD STREET NE			07 31 / Y Y Y Y Y 2018						
City WASHINGTON	State DC	Zip Code 20002-7313	Transaction ID : PR2638112751134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.20						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Regl Affs	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 581.01	P/R Deduction (\$38.10 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I HAUSCHILDT, TODD, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 111 4TH AVE N UNIT 703	0	7. 0.4	07 / D D / Y Y Y Y 2018						
City MINNEAPOLIS	State MN	Zip Code 55401-1538	Transaction ID : PR2638114751134 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 VP	upation (for Individual) IT	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 I C. ZEGLINSKI, MICHAEL, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1 TRIMONT LANE #610A			07 / D D / Y Y Y Y Y 31 / 2018						
City PITTSBURGH	State PA	Zip Code 15211-1206	Transaction ID : PR2639701851134 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) Pharm 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)			537.72						
TOTAL This Period (last page this line numbe	r only)								

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
			person for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P	4C)						
Full Name of Individual (Last, First, Midd EDWARDS, MICHAEL, , ,	le Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 379 DURHAM ROAD			07 31 2018						
City WYCKOFF	State NJ	Zip Code 07481-1018	Transaction ID : PR2639702051134 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) SIs SVP OptumI	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 B. CALABRESE, DAVID, , ,	le Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 85 LITTLE POND RD			07 31 2018						
City	State	Zip Code	Transaction ID : PR2639708351134						
NORTHBOROUGH	MA	01532-1686	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Pharmacy Programs	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2377.26	P/R Deduction (\$238.50 Bi-Weekly)						
Full Name of Individual (Last, First, Midd C. KAHL, ROBERT, , ,	le Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 28101 SONOMA PASS			07 / D D / Y Y Y Y 2018						
City LAKEMOOR	State	Zip Code 60051-6673	Transaction ID : PR2639726151134						
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) Cint Svc Acct Mgt	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	al)		889.68						
TOTAL This Period (last page this line nur	nber only)	······							

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c						
Any information copied from such Reports and or for commercial purposes, other than using t				ting contributions					
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	C)						
Full Name of Individual (Last, First, Middle MESSING, KEITH, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 9 BUTTERFIELD DR			07 31 /	2018					
City GREENLAWN	State NY	Zip Code 11740-2001	Transaction ID : PR26 Amount of Each Receipt						
FEC ID number of contributing federal political committee.	С			28.08					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) d Software Engineer	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 SMITH, ANTHONY, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 1 ROCKAWAY AVE			07 / 07 / 31	Y Y Y Y 2018					
City MARBLEHEAD	State MA	Zip Code 01945-1726	Transaction ID : PR26						
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 86.94 Memo Item						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Regl Affs							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 521.64	P/R Deduction (\$43.47 Bi-	Weekly)					
Full Name of Individual (Last, First, Middle C. SURRELL, CHRISTOPHER, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 620 DARTINGTON WAY			07 / 07 / 01 / / 07 / 07 / 07 / 07 / 07	2018					
City JOHNS CREEK	State GA	Zip Code 30022-8045	Transaction ID : PR26 Amount of Each Receipt						
FEC ID number of contributing federal political committee.	С			145.44					
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 ▼ 953.76	P/R Deduction (\$72.72 Bi	-Weekly)					
SUBTOTAL of Receipts This Page (optional).			, ,	260.46					
TOTAL This Period (last page this line number	er only)								

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 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 (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle HEPLER, CAREY, , ,		rganization Name	Date of Receipt							
Mailing Address 2936 RIVERSIDE AVENU APT 3			07 31 2018							
City JACKSONVILLE	State FL	Zip Code 32205-8133	Transaction ID : PR2639760751134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		27.80							
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 ▼ 211.98	P/R Deduction (\$13.90 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. JENSEN MOORE, KIMBERLY, ,		organization Name	Date of Receipt							
Mailing Address 230 ROSE AVENUE			07 31 2018							
City	State CA	Zip Code	Transaction ID : PR2639770351134							
MILL VALLEY		94941-1728	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		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For:	Aggregate	Year-to-Date V	-							
Other (specify) ▼		377.59	P/R Deduction (\$24.76 Bi-Weekly)							
Full Name of Individual (Last, First, Middle BIGHAM, ANNE, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 2610 HOLLY LANE NORT			07 / D D / Y Y Y Y Y 2018							
City PLYMOUTH	State MN	Zip Code 55447-1727	Transaction ID : PR2639771451134 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) Med Clin 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))		461.92							
TOTAL This Period (last page this line num	per only)									

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			Use separate schedule(s)			(check only one)						
II EWIZED RECEIF 13			for each category of the Detailed Summary Page		× 11a		11b	11c	12	<u> </u>		
Any information copied from such Reports and Statements			ay not be sold or used by any p	erson	13 for the	pur	14 pose of	15 soliciting	contribut	17 ions		
or	for commercial purposes, other than using the	e name and a	doress of any political committee	e to s	OIICIT COI	ntric	outions	rom sucr	i committ	96.		
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)								
Α.	Full Name of Individual (Last, First, Middle Ini DUTTA, SUMIT, , ,	,	rganization Name		Date of	f Re	eceipt					
	Mailing Address 1112 W WRIGHTWOOD AVE				м м 07	1	D 31) / Y	2018	Y		
	City CHICAGO	State IL	Zip Code 60614-1315	_				PR26397 Receipt th	7385113 is Period	4		
	FEC ID number of contributing federal political committee.	С			<u> </u>				384.6	50		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Seg Chief Med Off		M	emo	ttem					
	Receipt For: Primary General Other (specify) ▼	nary General Aggregate real-to-Date				P/R Deduction (\$192.30 Bi-Weekly)						
в.	Full Name of Individual (Last, First, Middle Ini KETTLEWELL, KELLY, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt					
	Mailing Address 457 N OAK ST				07	1	31) / Y	2018	Y		
	City ELMHURST	State	Zip Code 60126-2215						7415113	1		
	FEC ID number of contributing		00120-2213		Amoun	t of	Each F	Receipt th				
	federal political committee.	C		0.00								
	Name of Employer (for Individual) Optum Services, Inc	Occ VP		Memo Item								
	Receipt For: Primary General	Aggregate	Year-to-Date ▼									
	Other (specify) ▼		4999.90	'	P/R Deduction (\$0.00 Bi-Weekly)							
c.	Full Name of Individual (Last, First, Middle Ini FITZGERALD, JAMES, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt					
	Mailing Address 6206 CLIFTON COURT				м м 07	1	31		2018	Y		
	City PLAINFIELD	State IL	Zip Code 60586-1761					PR26397 Receipt th	78305113 is Period	4		
	FEC ID number of contributing federal political committee.	С			<u> </u>		y 1		30.7	76		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Igr I O Engineering		Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.70	1	P/R Ded	lucti	on (\$15	.38 Bi-We	eekly)			
s	UBTOTAL of Receipts This Page (optional)		••••••	•			,	. ,	415.3	86		
Г	OTAL This Period (last page this line number	only)		- •	Γ.							

SCHEDULE A (FEC Form 3X) DEOFIDTO

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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b	11c		2	17
	y information copied from such Reports and Stat for commercial purposes, other than using the n				for the		pose of	soliciting	g cont	ributio	ons
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	InitedHealth Group PA	C)							
A.	Full Name of Individual (Last, First, Middle Initial NELSON, ELLEN, , ,) or Full Or	ganization Name		Date of	Re	ceipt				
	Mailing Address 11882 TILDEN PLACE				м м 07	1	D D D 31	/ Y	y 201	Y 18	Ý
	City WELLINGTON	State FL	Zip Code 33414-6056					PR2639 eceipt th			
	FEC ID number of contributing federal political committee.	С						1 - 95	3	384.6	0
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) Cint Svc Acct Mgmt		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 SMITH, DELYLE, , ,) or Full Or	ganization Name		Date of	Re	ceipt				
	Mailing Address PO BOX 447				м м 07	1	D D D 31	/ Y	201	8	
	City MT PROSPECT	State IL	Zip Code 60056-0447					PR26398 eceipt th			
	FEC ID number of contributing federal political committee.	С					-			74.6	6
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) irector Technology		Me	emo	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 589.28	P	/R Dedi	uctio	on (\$37.:	33 Bi-We	ekly)		
с.	Full Name of Individual (Last, First, Middle Initial BARRAGREE, SHERI, , ,) or Full Or	ganization Name		Date of	Re	ceipt				
	Mailing Address 812 BARNES STREET				07	1	D D D 31	/ Y	201		Y
	City MCKINNEY	State TX	Zip Code 75069-5549					PR2640			
	FEC ID number of contributing federal political committee.	С					y :	,		38.4	6
United HealthCare Services Inc			Occupation (for Individual) KA Dir Acct Mgmt				tem				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 288.45	P	P/R Ded	ucti	on (\$19.	23 Bi-We	eekly)		
s	UBTOTAL of Receipts This Page (optional)						, .		4	197.72	2
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									
or for commercial purposes, other than using			erson for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle A. GALLOWAY, MERCEDEIS, , ,	e Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 630 E 10TH STREET			07 31 Y Y Y Y Y									
City CHARLOTTE	State NC	Zip Code 28202-3130	Transaction ID : PR2640452051134									
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) CInt Svc Acct Mgt	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.06	P/R Deduction (\$13.99 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. MOHORIC, MARGARET, , ,	e Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 6000 REDONDO SIERRA	VISTA NE		07 / ^D D / ^Y Y Y Y 2018									
City RIO RANCHO	State NM	Zip Code 87144-0606	Transaction ID : PR2640460051134 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		28.08 Memo Item									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Clin Qlty										
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. WU, LAMBERT, , ,	e Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 11008 CHERWELL COUF	1		07 / D D / Y Y Y Y Y 2018									
City LAS VEGAS	State NV	Zip Code 89144-4526	Transaction ID : PR2640461651134 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		76.92									
Name of Employer (for Individual) Health Plan of Nevada	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)									
SUBTOTAL of Receipts This Page (optional)		132.98									
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 1						
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle A. STOW, CHRISTINA, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 4709 ALTON PL NW			07 31 2018						
City WASHINGTON	State DC	Zip Code 20016-2041	Transaction ID : PR2640466451134 Amount of Each Receipt this Period						
FEC ID number of contributing	<u> </u>								
federal political committee.	C		364.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) External Affs	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-Weekly)						
		7	1						
Full Name of Individual (Last, First, Middle B. WILJANEN HATHAWAY, AMY, , ,		rganization Name	Date of Receipt						
Mailing Address 369 135TH AVE			07 / D D / Y Y Y Y 07 31 2018						
City WAYLAND	State MI	Zip Code 49348-9402	Transaction ID : PR2640835251134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		27.66						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) DVIp Cons	Memo Item						
Receipt For:		Year-to-Date ▼	-						
Primary General Other (specify) ▼		212.83	P/R Deduction (\$13.83 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. SHARKEY, S PAUL, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 8607 ELLISTON DRIVE			07 31 2018						
City WYNDMOOR	State PA	Zip Code 19038-7957	Transaction ID : PR2640845451134 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) SIs SB KA	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).			440.34						
TOTAL This Period (last page this line number	er only)								

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12							
			13 14 15 16 1 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 BRISSON, SAMUEL, , ,	e Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 3408 YUKON AVENUE			07 31 Y Y Y Y Y 2018							
City ST LOUIS PARK	State MN	Zip Code 55426-3840	Transaction ID : PR2640854551134 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) Tech Proj-Prgm Mgmt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.02	P/R Deduction (\$14.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. PIERCE-HARRIS, PHELISHA, ,		rganization Name	Date of Receipt							
Mailing Address 3041 DEE ANN DRIVE			07 / D D / Y Y Y Y Y 2018							
City MEMPHIS	State TN	Zip Code 38119-9132	Transaction ID : PR2640866351134							
		30119-9132	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		27.80							
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 V								
Other (specify) ▼		211.98	P/R Deduction (\$13.90 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. WAGNER, JOSEPH, , ,	e Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 3405 MEREDITH RIDGE	1		07 / D D / Y Y Y Y 2018							
City PHOENIX	State MD	Zip Code 21131-1456	Transaction ID : PR2640875851134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		88.00							
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP I	upation (for Individual) Fin	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 610.46	P/R Deduction (\$44.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)		143.80							
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 or	(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 the											
							Commu				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle I WITT, JULIE, , ,	nitial) or Full C	rganization Name	Date	of Re	eceipt						
Mailing Address 155 TALBERT TOWN LOOF	D		м 07	07 / D D / Y Y Y Y 2018							
City MOORESVILLE	State NC	Zip Code 28117-8069				PR26408 leceipt th	3 7605113 4 is Period	1			
FEC ID number of contributing federal political committee.	С			_		-	28.0	8			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Director, Actuarial		Nemo) Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R De	ductio	on (\$14.	.04 Bi-We	ekly)				
Full Name of Individual (Last, First, Middle I E. ESTESS, SHARON, , ,	nitial) or Full C	rganization Name	Date	of Re	eceipt						
Mailing Address 128 ASHBROOKE TRAIL		07	M /	31	/ Y	y y 2018	Y				
City MADISON	State MS	Zip Code 39110-6855					76551134				
FEC ID number of contributing		33110-0033	Amou	nt or	Each H	leceipt th		-			
federal political committee.	С		76.92								
Name of Employer (for Individual) United HealthCare Services Inc	Occ Dir	upation (for Individual) Fin		Лето	o 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 I METKO, SARA, , ,	nitial) or Full C	rganization Name	Date	of Re	eceipt						
Mailing Address 23665 HIGHVIEW LANE			07		31		2018				
City LAKEVILLE	State MN	Zip Code 55044-6025			-	PR26408 Receipt th	37735113 is Period	4			
FEC ID number of contributing federal political committee.	С			_	, .	, ,	76.9	2			
Name of Employer (for Individual) United HealthCare Services Inc	Occ Dir T	upation (for Individual) Fax		vlemo	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)					,		181.9	2			
TOTAL This Period (last page this line numbe	r only)										

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

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	ED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a ☐ 11b ☐ 11c ☐ 12
				13 14 15 16 17 rson for the purpose of soliciting contributions to collect approximation
	of COMMITTEE (In Full) of Health Group Incorporated			to solicit contributions from such committee.
A. STEG Mailing City MINNE FEC ID	me of Individual (Last, First, Middle Initial) MAN, PAM, , , Address 401 2ND STREET NORTH #110 APOLIS number of contributing political committee.	Date of Receipt 07 / 31 / 2018 Transaction ID : PR2640878451134 Amount of Each Receipt this Period 27.80		
Optum Receipt	of Employer (for Individual) Services, Inc : For: rimary General Wher (specify) ▼	Sr F	upation (for Individual) Prod Mgr Year-to-Date ▼ 211.98	P/R Deduction (\$13.90 Bi-Weekly)
B. MINT	me of Individual (Last, First, Middle Initial) O, RYAN, , , Address 1505 HERITAGE CLUB AVE) or Full O	rganization Name	Date of Receipt
FEC ID	FOREST number of contributing political committee.	State NC	Zip Code 27587-7698	Transaction ID : PR2640882451134 Amount of Each Receipt this Period 95.92
United H Receipt	of Employer (for Individual) HealthCare Services Inc For: rimary General ther (specify) ▼	Dir	upation (for Individual) Govt Affs Year-to-Date ▼ 722,40	P/R Deduction (\$47.96 Bi-Weekly)
C. ADV	me of Individual (Last, First, Middle Initial) ANI, PROTIMA, , , Address 7618 BRITTANY PARC CT) or Full O	rganization Name	Date of Receipt
FEC ID federal Name c United I Receipt	CHURCH I number of contributing political committee. of Employer (for Individual) HealthCare Services Inc For: For: General ther (specify)	VP F	Zip Code 22043-2907	Transaction ID : PR2642024151134 Amount of Each Receipt this Period 384.60 Memo Item P/R Deduction (\$192.30 Bi-Weekly)
SUBTOT	AL of Receipts This Page (optional)		•	508.32
TOTAL T	his Period (last page this line number only	y)	•••••	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only	one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	11b	11c	12	_				
Any information copied from such Reports and											
or for commercial purposes, other than using t	ine name and a	uuress or any political committee	e to solicit cont	uidutions fro	III SUCh	committe	e.				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle LIMBAGO, DANIEL, , ,	Initial) or Full O	rganization Name	Date of	Receipt							
Mailing Address 9100 PIXIE COURT	,		07	M M / D D / Y Y Y Y Y							
City FAIRFAX	State VA	Zip Code 22031-3119		of Each Rec			ł				
FEC ID number of contributing federal political committee.	С				aje.	28.0	8				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) t Affs Dir	Me	mo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.60	P/R Dedu	ction (\$14.04	4 Bi-We	ekly)					
Full Name of Individual (Last, First, Middle DASTVAR, DEAN, , ,	Initial) or Full O	rganization Name	Date of	Receipt							
Mailing Address 212 ROSS DR			07	/ D D 31	/ Y	2018	Y				
City VIENNA	State VA	Zip Code 22180-6720		ction ID : PF of Each Rec			<u>.</u>				
FEC ID number of contributing federal political committee.	С				-9	28.0	8				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Gen Counsel	Me	mo 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 BRUECKMAN, BRIAN, , ,	,	rganization Name	Date of	Receipt							
Mailing Address 4601 PARK COMMONS D #417 City	RIVE	Zip Code	07 Troppo	/ 31		2018					
SAINT LOUIS PARK	MN	55416-4993		of Each Rec			•				
FEC ID number of contributing federal political committee.	С			,	y	384.6	0				
Name of Employer (for Individual) United HealthCare Services Inc	SVP	upation (for Individual) UHC Operations	Me	mo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50	P/R Dedu	uction (\$192.3	30 Bi-W	eekly)					
SUBTOTAL of Receipts This Page (optional).				,	y	440.7	6				
TOTAL This Period (last page this line number	er only)				T						

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								
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements ma g the name and a	A not be sold or used by any p ddress of any political committed	13 14 15 16 17 verson 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/	4C)								
Full Name of Individual (Last, First, Middl BRANNEN, RAYMOND, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 6258 FORT PIERCE WA	Y		07 31 Y Y Y Y Y 07 31 2018								
City HERRIMAN	State UT	Zip Code 84096-3977	Transaction ID : PR2642030751134 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		49.52								
Name of Employer (for Individual) Optum360 Services Inc		upation (for Individual) Training	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 377.59	P/R Deduction (\$24.76 Bi-Weekly)								
Full Name of Individual (Last, First, Middl B. MARTIN, STEPHANIE, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 7002 N VIA DE MANANA			07 31 2018								
City SCOTTSDALE	State AZ	Zip Code 85258-3951	Transaction ID : PR2642818051134 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) Dir Strat Accts	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 C. YOUNG, ALLISON, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 15222 ALMA MATER CT	-		07 / D D / Y Y Y Y 2018								
City BATON ROUGE	State LA	Zip Code 70810-8389	Transaction ID : PR2642830351134 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		234.80								
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 1208.42	P/R Deduction (\$117.40 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optiona	l)		361.24								
TOTAL This Period (last page this line nun	nber only)										

SCHEDULE A (FEC Form 3X) - DEAEIDTA

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ידו			Use separate schedule(s)	(ch	neck only	/ on	ie)						
	EMIZED RECEIPTS		for each category of the Detailed Summary Page		× 11a	\square	11b	11c	12	17			
	y information copied from such Reports and Sta for commercial purposes, other than using the r												
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group P/	AC)									
A.	Full Name of Individual (Last, First, Middle Initia LONG, RICHARD, , ,	al) or Full O	rganization Name		Date of	Re	ceipt						
	Mailing Address 2900 THOMAS AVE S UNIT 1623				07 31 2018								
	City State MINNEAPOLIS MN		Zip Code 55416-4474					PR26428 eceipt th					
	FEC ID number of contributing federal political committee.	ě (<u> </u>		-			6.92			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90] '	P/R Ded	uctio	on (\$38.	46 Bi-We	eekly)				
в.	Full Name of Individual (Last, First, Middle Initia FOX, ELIZABETH, , ,	al) or Full O	rganization Name		Date of	Re	ceipt						
	Mailing Address 1021 NORTH GARFIELD STRE #308			м м 07	1	D D 31	/ Y	2018	Y				
	City ARLINGTON	State VA	Zip Code 22201-2559	\vdash		nsaction ID : PR2642832051134 Int 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) Govt Affs		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1442.25]	P/R Dedu	uctic	on (\$96. ⁻	15 Bi-We	ekly)				
с.	Full Name of Individual (Last, First, Middle Initia KEISER-JENKINS, KAREN, , ,	al) or Full O	rganization Name		Date of	Re	ceipt						
	Mailing Address 9325 MARTINS LAKE DRIVE				м м 07	/	D D D 31		2018 [°]	_			
	City ROSWELL	State GA	Zip Code 30076-2865					PR26428 eceipt th					
	FEC ID number of contributing federal political committee.	С			<u> </u>		9	y	27	.94			
	Name of Employer (for Individual) United HealthCare Services Inc	Dir N	upation (for Individual) /Iktg Bus Dev		Me	emo	Item						
Receipt For: Aggr Primary General Other (specify)			Year-to-Date ▼ 211.44	P/R Deduction (\$13.97 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)			•			9		297	.16			
Т	OTAL This Period (last page this line number or	nly)		→	—								

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
or for commercial purposes, other than using t			person 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 JOHNSON, SUSAN, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 13024 GRAY FOX TRAIL			07 31 Y Y Y Y Y Y 07 31 2018								
City ROGERS	State MN	Zip Code 55374-8724	Transaction ID : PR2642836651134 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) Cust Service	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 308.00	P/R Deduction (\$38.50 Bi-Weekly)								
Full Name of Individual (Last, First, Middle 3. CRESTA, BRIAN, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 5 OGDEN LANE											
City MIDDLETON	State MA	Zip Code 01949-1669	Transaction ID : PR2642837551134 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) 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 C. KUSSIE, TIMOTHY, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 8445 NE NEW BROOKLYN			07 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y								
City BAINBRIDGE ISLAND	State WA	Zip Code 98110-3611	Transaction ID : PR2642838851134 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		365.00								
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 ▼ 365.00	P/R Deduction (\$365.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional).			518.92								
TOTAL This Period (last page this line number	er only)										

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	Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 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 WILLENBRING, LYNN, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 935 FERNDALE STREET UNIT 318			07 / D D / Y Y Y Y 2018								
City MAPLEWOOD	State MN	Zip Code 55119-4145	Transaction ID : PR2642839351134 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		434.78								
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 ▼ 2608.68	P/R Deduction (\$217.39 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. SIVERTSEN, DARREN, , ,	Initial) or Full C	rganization Name	Date of Receipt								
	Mailing Address 11632 SLEEPY HEAVEN PLACE										
City LAS VEGAS	State NV	Zip Code 89138-7557	Transaction ID : PR2643132651134 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:	Aggregate	Year-to-Date ▼	1								
Other (specify) ▼		576.90	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle SOCZYNSKI, PAUL, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 915 SOUTH 91ST STREE			07 / D D / Y Y Y Y 07 31 2018								
City WEST ALLIS	State WI	Zip Code 53214-2848	Transaction ID : PR2643197751134 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		75.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 587.50	P/R Deduction (\$37.50 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			586.70								
TOTAL This Period (last page this line numb	er only)										

Use separate schedule(s)

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17			Use separate schedule(s)	(check	only	one)		·				
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 1	- F	11b	·	11c	12	17		
	y information copied from such Reports and Sta for commercial purposes, other than using the r			rson for	the p	urpose			contribu	tions		
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	C)								
A.	Full Name of Individual (Last, First, Middle Initia CRAGLE, STEVE, , ,	al) or Full O	rganization Name	Dat	te of I	Receip	ot					
	Mailing Address 6604 MOHAWK TRAIL			07 31 2018								
	City EDINA	State MN	Zip Code 55439-1030	Transaction ID : PR2643200651134 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.					_	-7-		-95-	497.	00		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CMO		Mer	no Itei	m					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2257.22	P/R	Deduo	ction (\$	\$248.5	50 Bi-W	/eekly)			
в.	Full Name of Individual (Last, First, Middle Initia NEELY, MARC, , ,	al) or Full O	rganization Name	Dat	te of I	Receip	ot					
	Mailing Address 1159 BUFFALO RIDGE RD				07 [™]	/ D	31	/ Y	ү ү 2018	Ŷ		
	City CASTLE PINES	State CO	Zip Code 80108-8190						0315113 is Period			
	FEC ID number of contributing federal political committee.	С		409.46						_		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Mer	no Itei	m					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 909.44	P/R	Deduc	tion (\$	\$371.0	0 Bi-W	eekly)			
с.	Full Name of Individual (Last, First, Middle Initia HAMMOND, MICHAEL, , ,	al) or Full O	rganization Name	Dat	te of I	Receip	ot					
	Mailing Address 244 NE 59TH TERR				07 ^M	/ D	^р 31	/ Y	2018	Y		
	City TOPEKA	State KS	Zip Code 66617-1661						54485113 is Period			
	FEC ID number of contributing federal political committee.	С			_	9		9	76.	92		
	Name of Employer (for Individual) Optum Services, Inc	Occu Proc	upation (for Individual) d Dir		Mer	no Ite	m					
	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)		•			,		y	983.	38		
т	OTAL This Period (last page this line number or	nly)		Γ		45		-9-				

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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				or each category of the Detailed Summary Page		× 11	1a 3] 11 14	F	11	1c 5	12		17						
	y information copied from such Reports and State for commercial purposes, other than using the na					n for	the		pos	se of	solic	citing	contr	ibutio	ons						
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	Uni	tedHealth Group PA	AC)																
Α.	Full Name of Individual (Last, First, Middle Initial) WINNEROSKI, KEVIN, , ,											Date of Receipt									
	Mailing Address 4624 WASHBURN AVE S					07 31 Y Y Y Y Y								ſ							
	City MINNEAPOLIS	State MN		Zip Code 55410-1846									47151								
	FFC ID number of contributing	C		55410-1646	Amount of Each Receipt this Period 27.98								3								
	Name of Employer (for Individual)		cupat Mkto	ion (for Individual)	Memo Item																
	Optum Services, Inc A Receipt For: A Primary General Other (specify) ▼ I	P/R Deduction (\$13.99 Bi-Weekly)																			
В.	Full Name of Individual (Last, First, Middle Initial) MCKOY, PHILIP, , ,	or Full C	Drgar	nization Name	Date of Receipt																
	Mailing Address 927 LINCOLN AVE							07 / D D / Y Y Y Y 2018							(
	City SAINT PAUL	StateZip CodeMN55105-3149											5165 1 s Per	-							
	FEC ID number of contributing federal political committee.	С						384.60)							
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) Mkt Grp CIO					Memo Item														
	Receipt For: Primary General Other (specify) ▼	r: ary General Aggregate Year-to-Date ▼								(\$192	2.30 I	Bi-We	eekly)								
с.	Full Name of Individual (Last, First, Middle Initial) CONTRERAS, LISA, , ,	or Full C	Drgar	nization Name		Dat	e of	Re	ecei	ipt											
	Mailing Address 11065 E SUNRISE VIEW DRIVE						07 ^M	/	L	D D 31		L	2018	3							
	City TUCSON	State AZ		Zip Code 85748-7768									5265								
	FEC ID number of contributing federal political committee.	С				Amount of Each Receipt this								28.08	3						
	Name of Employer (for Individual) United HealthCare Services Inc	Occ Ass	Memo Item																		
	Receipt For: A Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 210.60		P/R	Ded	uctio	on	(\$14.	.04 B	si-We	ekly)								
s	UBTOTAL of Receipts This Page (optional)				•				,			,	4	40.66	6						
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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 🗌 11k		12						
Any information copied from such Reports a											
or for commercial purposes, other than usin	ig the name and a	doress of any political committee	to solicit contributio	ons from such	committe	<i>:</i> е.					
UnitedHealth Group Incorpo	orated PAC (l	JnitedHealth Group P/	C)								
Full Name of Individual (Last, First, Midd A. JEZARIAN, WENDY, , ,	le Initial) or Full O	rganization Name	Date of Receip	ot							
Mailing Address 5251 HUMBOLDT AVE	S		07 31 2018								
City MINNEAPOLIS	State MN	Zip Code 55419-1121	Transaction ID : PR2644659651134 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С			1 1 7	38.4	6					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Iktg Rsch CnsIt	Memo Ite	im							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.45	P/R Deduction (\$19.23 Bi-We	ekly)						
Full Name of Individual (Last, First, Midd B. ZIRKELBACH, ANGELA, , ,	le Initial) or Full O	rganization Name	Date of Receip	ot							
Mailing Address 1615 Q ST NW APT #1110	APT #1110					Y					
City WASHINGTON	State DC	Zip Code 20009-6349	Amount of Eac								
FEC ID number of contributing federal political committee.	С				28.0	8					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ernal Affs Dir	Memo Ite	em							
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 C. MISTRY, RASHMITA, , ,	le Initial) or Full O	rganization Name	Date of Receip	ot							
Mailing Address 6658 WATERTON CIRC			07 ^D	31 / Y	y y 2018	Y					
City MUKILTEO	State WA	Zip Code 98275-4805	Transaction Amount of Eac			<u>.</u>					
FEC ID number of contributing federal political committee.	ů – Elektrik				384.6	0					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment COO	Memo Ite	em							
Receipt For: Primary General Other (specify)	Year-to-Date ▼ 2884.50	P/R Deduction (\$192.30 Bi-W	/eekly)							
SUBTOTAL of Receipts This Page (optional	al)				451.1	4					
TOTAL This Period (last page this line nur	nber only)										

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177			Use separate schedule(s)	(check only one)						
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	≭ 11a ☐ 11b ☐ 11c ☐ 12						
	y information copied from such Reports and Sta for commercial purposes, other than using the n									
	NAME OF COMMITTEE (In Full)		duress of any political committee	to solicit contributions norm such committee.						
\rangle	UnitedHealth Group Incorporated	PAC (l	UnitedHealth Group PA	.C)						
A.	Full Name of Individual (Last, First, Middle Initia NEALE, MATTHEW, , ,	l) or Full O	Organization Name	Date of Receipt						
	Mailing Address 11380 WILD HERON PT	1		07 31 2018						
	City EDEN PRAIRIE	State MN	Zip Code 55347-4729	Transaction ID : PR2645175251134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.				76.92						
	Name of Employer (for Individual) Optum Services, Inc	Occu VP I	upation (for Individual) IT	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 Initia MAHRT, JONATHAN, , ,	l) or Full O	Organization Name	Date of Receipt						
	Mailing Address 4035 W 65TH ST APT 127		07 / D D / Y Y Y Y Y 2018							
	City EDINA	State MN	Zip Code 55435-1749	Transaction ID : PR2645176951134 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		555.54						
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Ops	Memo Item						
	Receipt For:	Aggregate	Year-to-Date ▼	-						
	Primary General Other (specify) ▼		, 1944.39	P/R Deduction (\$277.77 Bi-Weekly)						
	Full Name of Individual (Last, First, Middle Initia HOFFMAN, SHERRI, , ,	l) or Full O	Organization Name	Date of Receipt						
	Mailing Address 3409 DEEP WILLOW AVENUE	1 -		07 / D D / Y Y Y Y 07 31 2018						
	City PIKESVILLE	State MD	Zip Code 21208-3116	Transaction ID : PR2646294651134 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) Clnt Svc Acct Mgt	Memo Item						
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 57			576.90	P/R Deduction (\$38.46 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)			709.38						
т	OTAL This Period (last page this line number or	ly)	••••••							

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a ☐ 11b ☐ 11c ☐ 12							
Any information and information in the	-44	, ,	13 14 15 16 17							
Any information copied from such Reports and Sta or for commercial purposes, other than using the										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated										
Full Name of Individual (Last, First, Middle Initia A. ALEXANDER, BRADLEY, , ,	al) or Full C	rganization Name	Date of Receipt							
Mailing Address 1700 COACHLITE DRIVE			07 31 2018							
City	State VA	Zip Code	Transaction ID : PR2646298651134							
RICHMOND	VA	23238-4440	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		27.74							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Comm	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General Other (specify) ▼	55 - 51.10	212.43	P/R Deduction (\$13.87 Bi-Weekly)							
Full Name of Individual (Last, First, Middle Initia B. STANKIEWICZ, DENNIS, , ,	al) or Full C	rganization Name	Date of Receipt							
Mailing Address 17761 WEAVER LAKE DRIVE		07 31 2018								
City MAPLE GROVE	State MN	Zip Code 55311-1328	Transaction ID : PR2646304051134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Auditor	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4999.90	P/R Deduction (\$0.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle Initia	al) or Full C	rganization Name	Date of Receipt							
Mailing Address 10000 TOWN CENTER AVE #	269		07 / D D / Y Y Y Y 07 31 2018							
City	State	Zip Code	Transaction ID : PR2698345151134							
COLUMBIA	MD	21044-5432	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) Med Clin Ops	Memo Item							
Receipt For:		Year-to-Date ▼	-							
Primary General Other (specify)		210.60	P/R Deduction (\$14.04 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			55.82							
TOTAL This Period (last page this line number o										

SCHEDULE A (FEC Form 3X) _____ _

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
Any information copied from such Reports and or for commercial purposes, other than using t									
	ne name and a	usitess of any political committee	to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle I A. LANIER, MICHAEL, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 10006 FOX SPRING COUR	Т		07 / D D / Y Y Y Y 2018						
City OAKTON	State VA	Zip Code 22124-2657	Transaction ID : PR2698404251134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		27.74						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Dvlp Sr Cons	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 212.43	P/R Deduction (\$13.87 Bi-Weekly)						
Full Name of Individual (Last, First, Middle ROSENHAUS, MORGANNE, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 3801 GEORGIA AVE NW APT 506	04-1-	Zin Ood-	07 / D D / Y Y Y Y Y Y 2018						
City WASHINGTON	State DC	Zip Code 20011-5938	Transaction ID : PR2698409851134 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) ⁄t Affs Dir	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) ▼		211.06	P/R Deduction (\$13.99 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I ZENICK, GEOFFREY, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 7714 TWISTED OAKS CIR		Zin Code	07 / D D / Y Y Y Y 07 31 2018						
City DALLAS	State TX	Zip Code 75231-4711	Transaction ID : PR2698410851134 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) VP CInt Relationship	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)			132.64						
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ITEMIZED RECEIPTS			Use separate schedule(s)	(check	(check only one)								
			for each category of the Detailed Summary Page	X 11	_	11b 14	11c 15	12	Г	17			
	y information copied from such Reports and S for commercial purposes, other than using the			person for	the pu	irpose of	soliciting	g contri	ibutio	ns			
\setminus	NAME OF COMMITTEE (In Full)												
	UnitedHealth Group Incorporate	ed PAC (UnitedHealth Group P	AC)									
<u> </u>	Full Name of Individual (Last, First, Middle Init	ial) or Full C	Drganization Name										
Α.	GROSSMAN, BEVERLY, , ,			Date	Date of Receipt								
	Mailing Address 5 BROOKSIDE AVE)7	/ D D 31	/ Y	ې 2018	Y Y 8				
	City	State NY	Zip Code			tion ID :							
	MENANDS		12204-2301	Amo	ount o	f Each R	eceipt th	is Peri	iod				
	FEC ID number of contributing federal political committee.	С				-11-	-	Ę	86.94				
	Name of Employer (for Individual)	Occ	cupation (for Individual)		Men	no Item							
	United HealthCare Services Inc	Dir	Govt Affs										
	Receipt For:	Aggregate	e Year-to-Date ▼										
	Primary General		535.86	P/R [Deduc	tion (\$43.	47 Bi-We	ekly)					
	Other (specify) v												
	Full Name of Individual (Last, First, Middle Init	ial) or Full C	Drganization Name										
В.	SELIG, JOHN, , ,			Date	e of F	Receipt							
	Mailing Address 6406 WESTMINSTER				07 / D D / Y Y Y Y 2018								
	City	State	Zip Code			tion ID :			-				
	BENTON	AR	72019-6682	Amo	ount o	f Each R	eceipt th	is Peri	iod				
	FEC ID number of contributing federal political committee.	С	153.84										
	Name of Employer (for Individual) Optum Services, Inc	Occ VP		Memo Item									
	Receipt For:	Aggregate	e Year-to-Date ▼		P/R Deduction (\$76.92 Bi-Weekly)								
	Primary General			P/R D									
	Other (specify) v		1153.80										
C.	Full Name of Individual (Last, First, Middle Init AHLSTROM, ALEXIS, , ,	ial) or Full C	Drganization Name	Date	e of F	Receipt							
	Mailing Address 3421 OAKWOOD TERRACE)7	/ D D 31	/ Y	y 2018		1			
	City	State	Zip Code	Tr	ansad	tion ID :	PR2699	187151	1134				
	WASHINGTON	DC	20010-1819	Amo	ount o	f Each R	eceipt th	iis Peri	iod				
	FEC ID number of contributing federal political committee.	С				,	,		76.72				
	Name of Employer (for Individual)	Occ	cupation (for Individual)		Men	no Item							
	United HealthCare Services Inc	Gov	<i>r</i> t Affs Dir										
	Receipt For:	Aggregate	e Year-to-Date ▼										
	Other (specify)		575.40	P/R I	Deduc	tion (\$38.	36 Bi-We	ekly)					
s	UBTOTAL of Receipts This Page (optional)					9	,	34	17.50	_			
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				or each category of the Detailed Summary Page	×	11a		-	11b 14		11c	12	47			
	y information copied from such Reports and State for commercial purposes, other than using the nar					or the		rpo	ose			g contribu				
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I	PAC (L	Jni	tedHealth Group PA	C)											
Α.	Full Name of Individual (Last, First, Middle Initial) ZHOU, JINGXIN, , ,	or Full O	rgar	ization Name		Date of Receipt										
	Mailing Address 12011 FAIRVIEW CT	01	07 / D D / Y Y Y Y Y 2018													
	City MINNETONKA	State MN						Transaction ID : PR2699187851134								
		C						Amount of Each Receipt this Period								
	Name of Employer (for Individual) Optum Services, Inc	Occu Dir F	•	ion (for Individual)			Mem	10	Item	ı						
	Receipt For: A Primary General Other (specify) ▼	ggregate	P	/R De	duct	tio	n (\$:	38.4	6 Bi-W	eekly)						
B.	Full Name of Individual (Last, First, Middle Initial) FARRELL, ELIZABETH, , ,	or Full O	rgar	nization Name		Date	of R	ec	ceipt							
	Mailing Address 18777 THE PINES	State Zip Code					07 / D D / Y Y Y Y 2018									
	City EDEN PRAIRIE	State MN	/							9800511: nis Perioc						
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) SVP Ops					384.60									
	Name of Employer (for Individual) Optum Services, Inc						Memo Item									
	Receipt For: A Primary General Other (specify) ▼	ggregate	P/R Deduction (\$192.30 Bi-Weekly)													
	Full Name of Individual (Last, First, Middle Initial) HECK, DARRYL, , ,	or Full O	rgar	nization Name		Date	of R	ec	eipt							
	Mailing Address 9801 DORSET LANE					[™] 07		/	-	а 31	/ Y	у у 2018	_			
	City EDEN PRAIRIE	State MN		Zip Code 55347-3139								8319511 nis Period				
		C				-inou		, ,	_au		Jeipi li		.80			
	Name of Employer (for Individual) Optum Services, Inc	Occupation (for Individual) Principal Proj-Prgm Mgr						Memo Item								
	Receipt For: A Primary General Other (specify) I	ggregate	Yea	r-to-Date ▼ 211.98	P	/R De	educt	tio	n (\$	13.9	0 Bi-W	eekly)				
s	UBTOTAL of Receipts This Page (optional)			•				,	,		,	489	.32			
т	OTAL This Period (last page this line number only)		▶					,							

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	nformation copied from such Reports and Stat commercial purposes, other than using the n														
	ME OF COMMITTEE (In Full)			10 50					ii commu						
	nitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)											
	I Name of Individual (Last, First, Middle Initia OOGERD, MICHAEL, , ,) or Full Oi	rganization Name		Date of	Re	ceipt								
	iling Address 1595 SUMMIT SHORES CIRCL	E		07 31 Y Y Y Y 2018											
	City BURNSVILLE		StateZip CodeMN55306-5817					Transaction ID : PR2700842351134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Optum Services, Inc Receipt For: Aggre Primary General Other (specify) ▼ Image: Contributing federal political committee.									27.	80					
			upation (for Individual) cipal Proj-Prgm Mgr		Me	emo	ltem								
			Year-to-Date ▼ 211.98	F	P/R Dedu	uctio	on (\$13	.90 Bi-We	eekly)						
	I Name of Individual (Last, First, Middle Initia ERRANOVA, THOMAS, , ,) or Full O	rganization Name		Date of	Re	ceipt								
	iling Address 18 DANEMAR DRIVE			07	1	31) / Y	2018	Y						
City	y DDLETOWN	State NJ	Zip Code 07748-3625	-					34365113	4					
FE	C ID number of contributing eral political committee.	С	Amount of Each Receipt this Period												
	me of Employer (for Individual) ited HealthCare Services Inc	Occu M&F		Me	emo	Item									
Re	ceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.98	P/R Deduction (\$13.90 Bi-Weekly)											
	I Name of Individual (Last, First, Middle Initia AGGART, ELIZABETH, , ,) or Full O	rganization Name		Date of	Re	ceipt								
Ма	iling Address 7134 BRUNSWICK CIRCLE				м м 07	1	31		2018	Y					
City BC	y DYNTON BEACH	State FL	Zip Code 33472-2534	_					84655113 his Period	4					
	C ID number of contributing eral political committee.	С			<u> </u>		,	, , , , , , , , , , , , , , , , , , ,	27.	94					
Un	me of Employer (for Individual) ited HealthCare Services Inc		upation (for Individual) Agnt Mgr	Memo Item											
He	ceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 211.44	F	P/R Dedu	uctio	on (\$13	.97 Bi-We	eekly)						
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SCHEDULE A (FEC Form 3X) DEOFIDTO

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check c	(check only one)								
		for each category of the Detailed Summary Page	X 11a	ı 🗌	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 PA	AC)									
Full Name of Individual (Last, First, Middle A. OFFIELD, MIRANDA, , ,	Initial) or Full C	rganization Name	Date	of R	eceipt							
Mailing Address 2240 N COUNTRY VISTA	BLVD			07 31 2018								
City LIBERTY LAKE	State WA	Zip Code 99019-5071					85755113 is Period	4				
FEC ID number of contributing federal political committee.	C				-	y	30.7	76				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Bus Process		Mem	o Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.70	P/R D	educt	ion (\$15.	.38 Bi-We	ekly)					
Full Name of Individual (Last, First, Middle B. STEARNS, SALLIE, , ,	Initial) or Full C	rganization Name	Date	of R [,]	eceipt							
Mailing Address 211 COLONIAL HOMES D #1505		Zip Code	07		31	/ Y	2018	Y				
City ATLANTA	State GA					6175113	1					
FEC ID number of contributing federal political committee.	С	30309-1293	Amount of Each Receipt this Period									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ent Executive II		Mem	o Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.98	P/R Deduction (\$13.90 Bi-Weekly)									
Full Name of Individual (Last, First, Middle C. WARNER, JONATHAN, , ,	Initial) or Full C	rganization Name	Date	of R [,]	eceipt							
Mailing Address 258 CAMBRIDGE DRIVE	1		0		31) / Y	2018 Y	Y				
City RAMSEY	State NJ	Zip Code 07446-1260					37355113 is Period	4				
FEC ID number of contributing federal political committee.	С				y	, ,	27.8	30				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) : Mgt Cons CInt Svc		Mem	o Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 211.98	P/R D	educt	ion (\$13	.90 Bi-We	eekly)					
SUBTOTAL of Receipts This Page (optional)					7	. ,	86.3	86				
TOTAL This Period (last page this line numb	er only)				-							

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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						
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 PERRY, KIMBERLY, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 5045 LINDELL BLVD			07 31 Y Y Y Y Y						
City SAINT LOUIS	State MO	Zip Code 63108-1219	Transaction ID : PR2700918051134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		27.80						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) <i>N</i> ed Dir	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 233.06	P/R Deduction (\$13.90 Bi-Weekly)						
Full Name of Individual (Last, First, Middle MCSWEENEY, ERIN , , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 10 NOUVELLE WAY SUIT			07 / D D / Y Y Y Y Y 2018						
City	State MA	Zip Code	Transaction ID : PR2701818051134						
NATICK	IVIA	01760-1570	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, Mkt Grp CHRO	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. FRINGER, TRICIA, , ,	Initial) or Full C	Prganization Name	Date of Receipt						
Mailing Address 2809 STANFORD AVE			07 31 / Y Y Y Y						
City DALLAS	State TX	Zip Code 75225-7917	Transaction ID : PR2701818651134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Underwriting	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)			797.00						
TOTAL This Period (last page this line numb	er only)								

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ITEMIZED RECEIPTS for e		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 the									
NAME OF COMMITTEE (In Full)	io name dilu à								
UnitedHealth Group Incorporat	ted PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle In A. O'CONNELL, DANIEL, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 3325 W 18TH AVENUE			07 31 / Y Y Y Y Y 07 31 2018						
City DENVER	State CO	Zip Code 80204-1681	Transaction ID : PR2701819651134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		180.76						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1355.70	P/R Deduction (\$126.80 Bi-Weekly)						
Full Name of Individual (Last, First, Middle In BRUCE, JAMIE, , ,	nitial) or Full C	Prganization Name	Date of Receipt						
Mailing Address 336 THOREAU BLVD			07 31 / Y Y Y Y Y 2018						
City O FALLON	State MO	Zip Code 63366-7451	Transaction ID : PR2701823051134 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 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 In SPARKS, KEVIN, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 10681 S CEDAR NILES BL	·		M M / D D / Y Y Y Y Y 07 31 2018						
City OLATHE	State KS	Zip Code 66061-7415	Transaction ID : PR2701825551134 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) 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)			757.66						
TOTAL This Period (last page this line numbe	r only)								

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
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) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle A. ROTH, TROY, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 7982 WOOD COURT			07 31 2018							
City FRISCO	State TX	Zip Code 75034-8203	Transaction ID : PR2701828951134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		38.46							
Name of Employer (for Individual) Optum360 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 B. UNGAR, ELIZABETH, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 10115 48TH AV N			07 31 / Y Y Y Y Y							
City PLYMOUTH	State MN	Zip Code 55442-2521	Transaction ID : PR2702474951134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		27.80							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir HRIS	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.98	P/R Deduction (\$13.90 Bi-Weekly)							
Full Name of Individual (Last, First, Middle KRAMER, NANCY , , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 9661 WATERFORD PL APT 102 City	State	Zip Code	07 31 2018 Transaction ID : PR2702501451134							
LOVELAND	OH	45140-4600	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		76.92							
Optum Services, Inc		upation (for Individual) RN	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).			143.18							
TOTAL This Period (last page this line numb	er only)									

SCHEDULE A (FEC Form 3X) _____ _

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (UnitedHealth Group P	łC)						
Full Name of Individual (Last, First, Middle ALLEN, RONALD, , ,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 1245 4TH ST SW APT E709			07 31 Y Y Y Y Y 2018						
City WASHINGTON	State DC	Zip Code 20024-2318	Transaction ID : PR2702503851134 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 BRENNER, JEFFREY, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 4610 CEDAR AVE APT 301	04-4-	7. 0.1	07 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
City PHILADELPHIA	State PA	Zip Code 19143-2118	Transaction ID : PR2702506351134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		464.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Integrated HIth Human Svs	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 2434.14	P/R Deduction (\$232.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. CHURCHES, KATHRYN, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 713 WEALD BRIDGE RD			07 / D D / Y Y Y Y Y 2018						
City COTTAGE GROVE	State WI	Zip Code 53527-8310	Transaction ID : PR2702506751134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		27.80						
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 ▼ 211.98	P/R Deduction (\$13.90 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			530.26						
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	✗ 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 (JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle MORRIS, MITCHELL, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 200 CONGRESS AVE 47Y			07 31 Y Y Y Y Y 2018						
City AUSTIN	State TX	Zip Code 78701-4507	Transaction ID : PR2702508451134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		0.00						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Advisory Svc	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4999.90	P/R Deduction (\$0.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. MERZLICKER, CAREY, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 950 BENTLEY PARK CIRC	LE		07 31 YYYYY 2018						
City O FALLON	State MO	Zip Code 63368-8022	Transaction ID : PR2703246951134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		72.00						
Name of Employer (for Individual) United HealthCare Services Inc	Occ Dir	upation (for Individual) Fin	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	1						
Other (specify) ▼		604.00	P/R Deduction (\$36.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle VENNERSTROM, EMILY, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 179 MEADOW LANE			07 31 / Y Y Y Y 2018						
City LONG LAKE	State MN	Zip Code 55356-9493	Transaction ID : PR2703253751134 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		27.48						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Found/Social Resp	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 213.83	P/R Deduction (\$13.74 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			99.48						
TOTAL This Period (last page this line number	er only)								

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ITEMIZED RECEIPTS			for each category of the Detailed Summary Page		× 11a		11b	11c	12	 .			
	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	1 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 HARVEY, CATHERINE, , ,	rganization Name		Date of	f Re	eceipt							
	Mailing Address 541 E ERIE ST UNIT 602				07 31 Y Y Y Y Y 07 31 2018								
	City MILWAUKEE	State WI	Zip Code 53202-6251						63705113 his Period	4			
	FEC ID number of contributing federal political committee.	С							192.:	30			
	Name of Employer (for Individual) United HealthCare Services Inc	ed HealthCare Services Inc HIth Plan CEO			Μ	emo	ttem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1249.95		P/R Ded	ucti	on (\$96	.15 Bi-We	ekly)				
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. CRIPPIN, TODD, , ,					Date of	f Re	eceipt						
	Mailing Address 1309 RUSTICVIEW DRIVE			07 / D D / Y Y Y Y 07 31 2018									
	City BALLWIN	State MO	Zip Code 63011-4266	-					6 3955113	4			
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period									
	Name of Employer (for Individual) United HealthCare Services Inc	Occ		Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 214.47	P/R Deduction (\$13.69 Bi-Weekly)									
<u>с</u> .	Full Name of Individual (Last, First, Middle Init SABASTEANSKI, LISA, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt						
	Mailing Address 4307 FALLGOLD PARKWAY	N			м м 07	1	31		2018	Y			
	City BROOKLYN PARK	State MN	Zip Code 55443-1889						65205113 his Period	4			
	FEC ID number of contributing federal political committee.	С			Ľ.		y		27.2	26			
	Name of Employer (for Individual) Optum Services, Inc				M	emo	o Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 215.15		P/R Ded	lucti	on (\$13	.63 Bi-We	ekly)				
s	UBTOTAL of Receipts This Page (optional)			•			,		246.9	94			
T	OTAL This Period (last page this line number	only)		-									

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle I YOUNG, DAVID, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 654 CHISWELL CT			M M / D D / Y Y Y Y 07 31 2018							
City BRENTWOOD	State TN	Zip Code 37027-3109	Transaction ID : PR2703655451134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		526.30							
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 ▼ 2105.20	P/R Deduction (\$263.15 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I ROLLINS, CARISSA, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 6805 CHEYENNE TRAIL			07 / D D / Y Y Y Y 2018							
City	State	Zip Code	Transaction ID : PR2704188951134							
EDINA	MN	55439-1158	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	upation (for Individual) IT	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	nitial) or Full C	rganization Name								
C. HOROHO, PATRICIA, , , Mailing Address 13516 COMPTON ROAD			Date of Receipt							
City CLIFTON	State VA	Zip Code 20124-1203	Transaction ID : PR2704194651134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		666.66							
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 ▼ 1333.32	P/R Deduction (\$333.33 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			1577.56							
TOTAL This Period (last page this line number	er only)									

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ITEMIZED RECEIPTS			Use separate schedule(s)	(che	(check only one)										
	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b 14	11c 15		2 6	17				
	y information copied from such Reports and S for commercial purposes, other than using the				for the		oose of	soliciting	g cont	ributio	ons				
	NAME OF COMMITTEE (In Full)														
	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)											
Α.	Full Name of Individual (Last, First, Middle Init DELANY, ANDREW, , ,	tial) or Full O	rganization Name		Date of Receipt										
	Mailing Address 209 GARLAND AVENUE	-			07 31 Y Y Y Y Y										
	City DECATUR	State GA	Zip Code 30030-4940					PR2704 eceipt th							
	FEC ID number of contributing federal political committee.	С			<u> </u>		,		Э	84.60)				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Cust Svs		M	emo	Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2884.50]	P/R Ded	uctic	on (\$192	2.30 Bi-V	Veekly	')					
в.	Full Name of Individual (Last, First, Middle Init HAYEK, ANDREW, , ,	tial) or Full O	organization Name		Date of	f Re	ceipt								
	Mailing Address 500 ADAMS AVENUE				07	1	31	/ Y	201	8 8					
	City GLENCOE	State IL	Zip Code 60022-1865					PR2705							
	FEC ID number of contributing federal political committee.	С			Amoun	t of	Each R	eceipt th		rioa 384.60)				
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) s Segment CEO		M	emo	Item								
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1153.80	P	/R Ded	uctio	on (\$192	2.30 Bi-W	/eekly)					
с.	Full Name of Individual (Last, First, Middle Init SHARFF, RICHARD, , ,	tial) or Full O	organization Name		Date of	f Re	ceipt								
	Mailing Address 508 RUMSON ROAD				м м 07		D D D 31	L	ý 201	8					
	City BIRMINGHAM	State AL	Zip Code 35209-4312					PR2705 eceipt th							
	FEC ID number of contributing federal political committee.	С			<u> </u>		y	, ,	3	84.60)				
	Optum Services, Inc		upation (for Individual) Segment Gen Counsel		M	emo	Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2884.50]	P/R Ded	luctio	on (\$192	2.30 Bi-V	Veekly	()					
s	UBTOTAL of Receipts This Page (optional)			•			,	. ,	11	53.80)				
Г	OTAL This Period (last page this line number	only)		►						-					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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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	(C)
Full Name of Individual (Last, First, Middle FELLENBAUM, DANIEL, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 9125 FRIARS ROAD			07 31 Y Y Y Y Y 2018
City BETHESDA	State MD	Zip Code 20817-3329	Transaction ID : PR2705065951134
FEC ID number of contributing federal political committee.	C	20017-3329	Amount of Each Receipt this Period
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) rt Affs Assc Dir	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. BUNTEN, BRIAN, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 401 TATLOW DR			07 31 Y Y Y Y Y 2018
City COLUMBIA	State MO	Zip Code 65203-6130	Transaction ID : PR2705070551134 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		118.86
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 ▼ 846.06	P/R Deduction (\$59.43 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. ZELLER, TRISHA, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 9230 SHETLAND ROAD			07 / D D / Y Y Y Y Y 2018
City EDEN PRAIRIE	State MN	Zip Code 55347-3747	Transaction ID : PR2705971451134
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
Name of Employer (for Individual)		upation (for Individual)	Memo Item
United HealthCare Services Inc Receipt For: Primary General Other (specify)		Bus Anlys Year-to-Date ▼ 210.60	P/R Deduction (\$14.04 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)			175.02
TOTAL This Period (last page this line numb	per only)		

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		Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P/	AC)
Full Name of Individual (Last, First, Middle SPADE, NATHAN, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 12 WARWICK CIRCLE			07 31 / Y Y Y Y 2018
	State PA	Zip Code	Transaction ID : PR2705987051134
MECHANICSBURG	FA	17050-2643	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:	Aggregate	Year-to-Date ▼	—
Primary General			P/R Deduction (\$76.92 Bi-Weekly)
Other (specify) v		1153.80	1
Full Name of Individual (Last, First, Middle AGEN RYAN, BARBARA, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 180 HIGH PARK LANE #43	3		07 31 / Y Y Y Y 07 31 2018
City	State	Zip Code	Transaction ID : PR2705987451134
SILVER SPRING	MD	20910-3198	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) Gen Mgmt	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	_
Other (specify) ▼		, 1442.25	P/R Deduction (\$96.15 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. STILLO, KATHLEEN, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 15 HENDERSON AVE			07 31 2018
City	State	Zip Code	Transaction ID : PR2706451051134
PRINCETON	NJ	08540-2607	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		100.00
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item
Receipt For:		Year-to-Date ▼	
Primary General Other (specify)		450.00	P/R Deduction (\$50.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional).			446.14
TOTAL This Period (last page this line number	er only)		

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ITEMIZED RECEIPTS Use separate schedule(s) for each category of the		(check only one)	
		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P	AC)
Full Name of Individual (Last, First, Middle BARTHOLET, DANIEL, , ,	nitial) or Full C	organization Name	Date of Receipt
Mailing Address 5918 VALEWOOD DRIVE			07 / D D / Y Y Y Y 2018
City MINNETONKA	State MN	Zip Code 55345-6545	Transaction ID : PR2706451151134 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) Tax	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 B. MULDOON, ALLISON, , ,	nitial) or Full C	organization Name	Date of Receipt
Mailing Address 2500 CLARENDON BLVD APT 435	State	Zin Codo	07 / ^D D / ^Y Y Y Y Y 2018
City ARLINGTON	State VA	Zip Code 22201-3828	Transaction ID : PR2706452751134 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) ⁄t Affs Assc Dir	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	P/R Deduction (\$20.00 Bi-Weekly)
Full Name of Individual (Last, First, Middle I MADRID, MERLE, , ,	nitial) or Full C	organization Name	Date of Receipt
Mailing Address 514 SOUTH 3RD STREET			07 / D D / Y Y Y Y Y 2018
City COLUMBUS	State OH	Zip Code 43215-5756	Transaction ID : PR2740510351134 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		192.00
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 ▼ 1440.00	P/R Deduction (\$96.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)			616.60
TOTAL This Period (last page this line number	er only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b		11c 15	12	17
Any information copied from such Reports or for commercial purposes, other than usin				or the		pose		oliciting	contribu	tions
NAME OF COMMITTEE (In Full)	orated PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Mide A. KORPMAN, RALPH, , ,	lle Initial) or Full C	organization Name	D	ate of	Re	ceipt				
Mailing Address 102 WOODMONT BLV	O SUITE 200			м м 07	1	D	в В1	/ Y	ү ү 2018	Y
City	State	Zip Code		Trans	acti	ion ID) : P	R27405	51465113	4
NASHVILLE	TN	37205-2216	A	mount	of	Each	Re	ceipt th	is Period	
FEC ID number of contributing federal political committee.	C					-		-	0.	00
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef Scientific Officer	[Me	emo	Item	ı			
Receipt For:	Agaregate	Year-to-Date V								
Primary General Other (specify) ▼		4999.90	P/I	R Dedu	uctio	on (\$0	0.00	Bi-Wee	ekly)	
Full Name of Individual (Last, First, Mide B. DAVIS, MICHAEL, , ,	lle Initial) or Full C	organization Name	D	ate of	Re	ceipt				
Mailing Address 533 TENNIS AVENUE				™ 07	/	D	D 31	/ Y	ү 2018	Y
City AMBLER	State PA	Zip Code 19002-6016				-			1685113 is Period	
FEC ID number of contributing federal political committee.	С					-		- 9	28.	08
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) nager, Analytics Svcs	[Me	emo	Item	ı			
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 210.60	P/F	R Dedu	uctic	on (\$1	4.0	4 Bi-We	ekly)	
Full Name of Individual (Last, First, Mide C. MATHIS, BRIAN, , ,	lle Initial) or Full C	Organization Name	D	ate of	Re	ceipt				
Mailing Address 4632 RESERVOIR ROA				^M 07	1		в В1	/ Y	y y 2018	Y
City WASHINGTON	State DC	Zip Code 20007-1917							75875113 is Period	
FEC ID number of contributing federal political committee.	С					,		,	497.	_
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Bus Dev		Me	emo	ltem	I			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2257.22	P/I	R Dedi	uctio	on (\$2	248.	50 Bi-W	/eekly)	
SUBTOTAL of Receipts This Page (option	al)		. [525.	08
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	X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using			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	ated PAC (I	JnitedHealth Group P	AC)
Full Name of Individual (Last, First, Middle A. MUHLBAUER, CYNTHIA, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 5211 TIMBERRIDGE DR			07 31 Y Y Y Y Y 07 31 2018
City PAPILLION	State NE	Zip Code 68133-2781	Transaction ID : PR2748019551134 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		105.26
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 ▼ 421.04	P/R Deduction (\$52.63 Bi-Weekly)
Full Name of Individual (Last, First, Middle B. FEHR, STEPHANIE, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 6601 BLACKFOOT PASS			07 31 2018
City EDINA	State MN	Zip Code 55439-1103	Transaction ID : PR2748020551134 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		526.30
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P, Mkt Grp CHRO	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2105.20	P/R Deduction (\$263.15 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. KIM, KARLTON, , ,	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 11052 HARDING ROAD	State	Zip Code	07 31 2018
City LAUREL	MD	20723-2034	Transaction ID : PR2749705551134 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		133.32
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 ▼ 266.64	P/R Deduction (\$66.66 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional).			764.88
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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•••				Detailed Summary Page		X 11a		11	b	1	1c		12											
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or	y information copied from such Reports and S for commercial purposes, other than using the																							
	NAME OF COMMITTEE (In Full) UnitedHealth Group PA																							
۹.	Full Name of Individual (Last, First, Middle Init PRONOVOST, PETER, , ,	Individual (Last, First, Middle Initial) or Full Organization Name DST, PETER, , ,											Date of Receipt											
	Mailing Address 6960 WOODLANDS LANE					07 31 2018 Transaction ID : PR2750286351134																		
	City SOLON	State OH		Zip Code 44139-4664		Trans Amount								1										
	FEC ID number of contributing federal political committee.	С						- -			- -		526.3	0										
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) O Chief Clin Off		Me	emc) Ite	em															
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 2105.20]	P/R Dedi	uctio	on ((\$263	5.15	Bi-W	eekl	y)											
	Full Name of Individual (Last, First, Middle Init	tial) or Full C	Drga	nization Name		Date of	Re	ecei	pt															
	Mailing Address 1388 DIAMOND COURT					M M 07	1		31	/	Y	20 ²	ү 18	Y										
	City PITTSBURGH	State PA		Zip Code 15241-1220		Trans: Amount		-																
	FEC ID number of contributing federal political committee.	С						,			-g		526.3	0										
	Name of Employer (for Individual) Optum Services, Inc		•	tion (for Individual) dvisory Svc		Me	emc) Ite	əm															
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 2105.20]	P/R Dedu	uctio	on ((\$263	.15	Bi-We	eekl	y)											
	Full Name of Individual (Last, First, Middle Init BOTHRA, SIDDHARTH, , ,	tial) or Full C	Drga	nization Name		Date of	Re	ecei	pt															
	Mailing Address 17200 SE 45TH STREET					^M 07	1	Ľ	31	1	Y	20 [°]	18 [°]	Y										
	City BELLEVUE	State WA		Zip Code 98006-6510		Trans Amount								4										
	FEC ID number of contributing federal political committee.	С						,			y		416.6	6										
	Name of Employer (for Individual) United HealthCare Services Inc	Occ SVF	•	tion (for Individual) s		Me	emo	o Ite	əm															
	Receipt For: Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 416.66]	P/R Ded	ucti	on	(\$416	6.66	Bi-W	eekl	ly)											
						_	-	-	-			_	-	26										

FOR LINE NUMBER:

PAGE 284 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	I Statements mathematic and a	I ay not be sold or used by any p address of any political committe	13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
UnitedHealth Group Incorpora	ated PAC (UnitedHealth Group P/	AC)
Full Name of Individual (Last, First, Middle EHLERT, KENNETH , , ,	Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 10431 TOLEDO DR N			07 31 Y Y Y Y Y 07 31 2018
City BROOKLYN PARK	State MN	Zip Code 55443-4501	Transaction ID : PR2755316151134 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		0.00
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) s Segment CEO	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4999.90	P/R Deduction (\$0.00 Bi-Weekly)
Full Name of Individual (Last, First, Middle ABRAHAM, SANTIAGO, , ,	Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 2637 ARCOLA LANE	Otata	Zin Code	07 / D D / Y Y Y Y Y 2018
City WAYZATA	State MN	Zip Code 55391-9703	Transaction ID : PR2755652151134 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		769.22
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) IT	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 769.22	P/R Deduction (\$384.61 Bi-Weekly)
Full Name of Individual (Last, First, Middle C.	Initial) or Full C	Organization Name	Date of Receipt
Mailing Address			
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]
SUBTOTAL of Receipts This Page (optional).			769.22
TOTAL This Period (last page this line numb	er only)		150038.43

S	CHEDULE B (FEC Form 3X)			FC		NUMBER: PAGE 285 OF 295
IT	EMIZED DISBURSEMENTS		rate schedule(s) category of the		neck only	one)
			Summary Page		21b	22 ★ 23 26 27 28b 28c 29 30b
	ny information copied from such Reports and State for commercial purposes, other than using the nat					n for the purpose of soliciting contributions
\mathbb{N}	NAME OF COMMITTEE (In Full)		_			
	UnitedHealth Group Incorporated	PAC (Un	itedHealth G	Group	o PAC)	
Α.	Full Name (Last, First, Middle Initial) Larson for Congress					Date of Disbursement
	Mailing Address PO Box 261172					05 15 2018
	City Hartford	State CT	Zip Code 06126-1172			FEC Identification Number
	Purpose of Disbursement Contribution Funds Reported On June 20th FEC R	eport		0,	11	C C00330142 Transaction ID : 42430448
	Candidate Name				gory/	Amount of Each Disbursement this Period
	Larson, John, B., Rep., Office Sought: x House Disburse	ment For: 2	2018	Ту	pe	2500.00
	Senate X	Primary Other (spec	General			Contribution Funds Reported On
	State: CT District: 01		······································			Memo Item June 20th FEC Report
_	Full Name (Last, First, Middle Initial)					
в.	Larson for Congress					Date of Disbursement
	Mailing Address PO Box 261172					07 09 2018
	City Hartford	State CT	Zip Code 06126-1172			FEC Identification Number
	Purpose of Disbursement Contribution Re-designated funds for trans. dated			0	11	C C00330142
	Candidate Name				gory/	Transaction ID : 42430449 Amount of Each Disbursement this Period
	Larson, John, B., Rep.,				pe	
	Senate President	ment For: 2 Primary Other (spec	¥ General			2500.00 Contribution Re-designated funds for trans. dated 5/15/2018
	State: CT District: 01 Full Name (Last, First, Middle Initial)					
C.	Virginia Foxx For Congress					Date of Disbursement
	Mailing Address PO Box 2676					07 / 24 / 2018
	City Boone	State NC	Zip Code 28607			FEC Identification Number
	Purpose of Disbursement Contribution			0,	11	C C00386748
	Candidate Name Foxx, Virginia, , Rep.,			Cate	gory/ pe	Transaction ID : 42468163 Amount of Each Disbursement this Period
		ment For: 2	2018	1 9	PC	2500.00
	Senate	Primary	x General			Contribution
	State: NC District: 05	Other (spec	ciry) 🔻			Memo Item
s	UBTOTAL of Disbursements This Page (optional).				🕨	2500.00
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SCHEDULE B (FEC Form 3X)			FC	DR L	INE N	UMBER	:			PAG	E 2	86 OF 2	295	
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	Detailed	Summary Page			210 28a	22 28b	×	23 28c		20		27 30b		
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NAME OF COMMITTEE (In Full)														
UnitedHealth Group Incorporated	PAC (Un	itedHealth G	Grou	p F	PAC)									
Full Name (Last, First, Middle Initial) A. Reclaim America PAC						Date o				_				
Mailing Address 228 S Washington Street, Suite 1	15					07	/	2		Y	20 ⁻	18		
City Alexandria	State VA	Zip Code 22314				FEC Id	entifi	catior	n Nun	nber				
Purpose of Disbursement Contribution			0	11		С	1. Alt 1.	50002						
Candidate Name			Cate	egory	//					2468 rsem		this Perio	d	
Office Sought: House Disburse Senate	ment For: Primary	General		he					Contri	,	-	500.00		
State: District:	Other (spe	cify) ▼				Me	emo l		JUNT	butior	I			
Full Name (Last, First, Middle Initial) B. Treasure State PAC						Date o		D	D /	Y		Y Y		
Mailing Address 3242 Cummins Way	Otata	Zin Onde				07		2	4		20	10		
City Missoula	State MT	Zip Code 59802				FEC Id	entifi	catior	n Nun	nber	_	_		
Purpose of Disbursement Contribution Candidate Name			0)11		•		43368 ction	-	2468 [,]	190			
			Cate Ty	egory /pe	//	Amoun	t of I	Each	Disbu	rsem	-	this Perio	t	
Office Sought: House Disburse Senate President	ement For: Primary Other (spec	General				<u> </u>			Contr	butio	-	000.00	1	
State: District:		ony)				Me	emo l	ltem						
Full Name (Last, First, Middle Initial) C. Wild and Wonderful PAC						Date o			_					
Mailing Address 332 W Lee Hwy # 303						м м 07	<i>'</i>	D 2			20 [,]	18 18		
City Warrenton	State VA	Zip Code 20186				FEC Id	entifi	catior	n Nun	nber				
Purpose of Disbursement Contribution			0	11	٦	C	_	48933 ction		2468	191			
Candidate Name			Cate Ty	egory /pe	//						-	this Perio	b	
	ment For:					L.		<u></u>		7	2	500.00		
President	Primary Other (spe	General cify) ▼				Me	emo l		Contr	ibutio	n			
State: District:													_	
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\backslash	NAME OF COMMITTEE (In Full)				_									
	UnitedHealth Group Incorporated	PAC (Un	itedHealth G	irou	p P/	AC))							
Α.	Full Name (Last, First, Middle Initial) Rene Oliveira Campaign						Date of	Dis			t			
	Mailing Address 855 West Price Road, Suite 9						07	/	D (02			018	Ŷ
	City	State	Zip Code				FEC Ide	entifi	icatio	n Nu	mbe	r		
	Brownsville Purpose of Disbursement	ТХ	78520					-	-				-	
	Void - Rene Oliveira Campaign; check dated 5/8/1	8		0	011	11	С	_						
	Candidate Name			-	egory/	11	Tra Amount			ID :				Period
	Oliveira, Rene, O., TX Rep.,				ype		Amount		Lach	DISD	uisc	men	t tino	renou
	Office Sought: House Disburse	ement For:	I						- I		-10-	- 7	1000.	
	Senate	Primary	General				_		,	Void	- Re	ene C	Diveira	Campaig
	State: District:	Other (spe	сіту) 🔻				Me	mo l	ltem	chec	k da	ted 5	/8/18	
	Full Name (Last, First, Middle Initial)													
Β.	Scott Cosper Campaign						Date of	Dis	burse	emen	t			
							M M	/	D		/		Y	Y
	Mailing Address 2110 Southport Drive						07		(02	J.	2	018	
	City	State	Zip Code				FEC Ide	entifi	icatio	n Nu	mbe	r		
	Killeen Purpose of Disbursement	ТХ	76542				0	_	_	-	-		-	
	Void - Scott Cosper Campaign; check dated 5/8/18	8		C	011	11	С	_					_	
	Candidate Name			Cate	egory/	11	Tra Amount			Disb				Period
	Cosper, Scott, , TX Rep.,				ype			_						
		ment For:							-				1000.	
	Senate President	Primary Other (spec	General				-			Void	- So	ott C	osper 5/8/18	Campaigr
	State: District:	Other (spec	city)				Me	mo l	ltem	CHEC	r ua	leu c	0/0/10	
_	Full Name (Last, First, Middle Initial)													
C.	Friends of Matt Dolan						Date of	Dis			t			
	Mailing Address 2226 Edgeview Dr						07	/		D 03			018	Y
	City	State	Zip Code			+	FEC Ide	entifi	icatio	n Nu	mbe	r		
	Hudson Purpose of Disbursement	OH	44236					_		-		-		
	Contribution			0)11	11	С	_					_	
	Candidate Name			-	egory/	11	Tra Amount			ו ID : Dish	-			Period
	Dolan, Matt, , ,				ype		, ano ano		Luon	Diob	uioc		t tino	i onou
		ment For:							<u> </u>		-		1000.	00
	Senate	Primary	General				_			Cont	ribu	tion		
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	olito. District.							_	_	_	_		_	_
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IT	EMIZED DISBURSEMENTS					nly one)
		Detailed	Summary Page		28	
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ments may me and add	not be sold or use ress of any politica	ed by al com	any pe nmittee	erson for the purpose of soliciting contributions
\backslash	NAME OF COMMITTEE (In Full)					
Ĺ	UnitedHealth Group Incorporated	PAC (Ur	nitedHealth G	irou	p PA	(C)
Α.	Full Name (Last, First, Middle Initial) Azinger for Senate					Date of Disbursement
	Mailing Address 1007 51st Street					07 / 12 / Y Y Y Y 2018
	City Vienna	State WV	Zip Code 26105			FEC Identification Number
	Purpose of Disbursement Contribution			0	11	C Transaction ID : 42448016
	Candidate Name				egory/	Amount of Each Disbursement this Period
	Azinger, Mike, , WV Sen., Office Sought: House Disburse	ment For:		Ty	ype	1000.00
	Senate President	Primary Other (spe	General cify) ▼			Contribution Memo Item
	State: District:					
в.	Full Name (Last, First, Middle Initial) Committee to Elect Charles Cleme	ents				Date of Disbursement
	Mailing Address 242 E. Thistle Court					07 / D D / Y Y Y Y 12 2018
	City New Martinsville	State WV	Zip Code 26155			FEC Identification Number
	Purpose of Disbursement Contribution			0)11	C Transaction ID : 42448021
	Candidate Name Clements, Charles, , WV Sen.,				egory/ /pe	Amount of Each Disbursement this Period
		ment For:		1)	he	1000.00
	Senate	Primary	General			Contribution
	State: District:	Other (spe	city)			Memo Item
<u>с.</u>	Full Name (Last, First, Middle Initial)	2018				Date of Disbursement
	Mailing Address 613 Pigeon Roost Trail					07 12 2018
	City	State	Zip Code			FEC Identification Number
	Princeton Purpose of Disbursement	WV	24740			
	Contribution Candidate Name			<u> </u>	11 egory/	Transaction ID : 42448022 Amount of Each Disbursement this Period
	Ellington, Joe, , WV Del., Jr.	. –			ype	1000.00
	Office Sought: House Disburse Senate	ment For: Primary	General			1000.00
	State: District:	Other (spe				Contribution Memo Item
Γ						
s	UBTOTAL of Disbursements This Page (optional).				••••• •	3000.00
Т	OTAL This Period (last page this line number only	/)			►	, ,

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS			Use separate schedule(s)		NUMBER: PAGE 289 OF 295 one)
			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				
$\left \right\rangle$	NAME OF COMMITTEE (In Full)		·, ·		,
	UnitedHealth Group Incorporated	PAC (Ur	itedHealth G	Froup PAC)
Α.	Full Name (Last, First, Middle Initial) Committee to Re-Elect Roman Pro	Date of Disbursement			
	Mailing Address 1806 Dogwood Drive	07 12 2018			
	City Fairmont	State WV	Zip Code 26554		FEC Identification Number
	Purpose of Disbursement Contribution			011	
	Candidate Name			Category/	Transaction ID : 42448177 Amount of Each Disbursement this Period
	Prezioso, Roman, , WV Sen., Jr.			Туре	750.00
	Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General cify) ▼		Contribution Memo Item
	State: District:	1			
B.	Full Name (Last, First, Middle Initial) Committee to Re-Elect Roman Prezioso Mailing Address 1806 Dogwood Drive				Date of Disbursement 07 12 2018
	City	State	Zip Code		
	Fairmont	WV	26554		FEC Identification Number
	Purpose of Disbursement Contribution	011	C Transaction ID : 42448357		
	Candidate Name Prezioso, Roman, , WV Sen., Jr. Office Sought: House Disbursement For:				Amount of Each Disbursement this Period
					250.00
	Senate	Primary	General		Contribution
	State: District:	Other (spe	cify)		Memo Item
с.	Full Name (Last, First, Middle Initial) Committee to Re-Elect Tim Miley				Date of Disbursement
	Mailing Address 229 West Main St Ste 400		07 / D D / Y Y Y Y 2018		
	City Clarksburg	State WV	Zip Code 26301		FEC Identification Number
	Purpose of Disbursement Contribution				C Transaction ID : 42448366
	Candidate Name Miley, Timothy, , WV Del.,				Amount of Each Disbursement this Period
	Office Sought: House Disburse	ment For:		1000.00	
	State: District:	Primary Other (spe	General cify) ▼		Contribution Memo Item
	olato. District.				
s	UBTOTAL of Disbursements This Page (optional).			••••••	2000.00
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SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 290 OF 295	
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a		
Any information copied from such Reports and State or for commercial purposes, other than using the na					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (Ur	nitedHealth G	Froup PAC)	
Full Name (Last, First, Middle Initial)					
A. Cowles for Delegate 2018	Cowles for Delegate 2018				
Mailing Address 2612 Martinsburg Rd				07 / D D / Y Y Y Y Y 12 2018	
City Berkeley Springs	State WV	Zip Code 25411		FEC Identification Number	
Purpose of Disbursement Contribution	Purpose of Disbursement				
Candidate Name			Category/ Type	Transaction ID : 42448369 Amount of Each Disbursement this Period	
Cowles, Daryl, , WV Del., Office Sought: House Disburse	, Disbursement For:			1000.00	
Senate President	Primary Other (spe	General cify) ▼		Contribution Memo Item	
State: District:					
Full Name (Last, First, Middle Initial) B. Tom Takubo for Senate				Date of Disbursement	
Mailing Address 101 Bowling Lane	07 12 2018				
City Charleston	State WV	Zip Code 25314		FEC Identification Number	
Purpose of Disbursement Contribution Candidate Name			011 Category/ Type	C Transaction ID : 42448371	
Takubo, Tom, , WV Sen.,				Amount of Each Disbursement this Period	
				1000.00	
State: District:	Primary Other (spe			Contribution Memo Item	
Full Name (Last, First, Middle Initial)					
Mailing Address PO Box 249					
City	State WV	Zip Code 25271		FEC Identification Number	
Ripley Purpose of Disbursement Contribution	011	С			
Candidate Name Westfall, Steve, , WV Del.,	Category/ Type	Transaction ID : 42448372 Amount of Each Disbursement this Period			
Office Sought: House Disburse	71	1000.00			
State: District:	Primary Other (spe	General cify) ▼		Contribution Memo Item	
SUBTOTAL of Disbursements This Page (optional).			····· •	3000.00	
TOTAL This Period (last page this line number only	/)		••••••	, ,	

S	CHEDULE B (FEC Form 3X)			FOR LINE I	NUMBER: PAGE 291 OF 295
	EMIZED 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
	ny information copied from such Reports and State for commercial purposes, other than using the na				
\square	NAME OF COMMITTEE (In Full)				
	UnitedHealth Group Incorporated	PAC (Ur	nitedHealth G	Group PAC)
Α.	Full Name (Last, First, Middle Initial) West Virginia Republican Legislati	Date of Disbursement			
	Mailing Address PO Box 548	07 12 2018			
	City	State	Zip Code		FEC Identification Number
	Charleston Purpose of Disbursement	WV	25322		С
	Contribution	011	Transaction ID : 42448438		
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period
	Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General		1000.00 Contribution
	State: District:		u.,,, ↓		Memo Item
B.	Full Name (Last, First, Middle Initial) WV Republican Senatorial Commi Mailing Address P.O. Box 11316		Date of Disbursement		
	City Charleston	State WV	Zip Code 25339		FEC Identification Number
	Purpose of Disbursement Contribution	011	C		
	Candidate Name			Category/ Type	Transaction ID : 42448458 Amount of Each Disbursement this Period
	Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General cify)		1000.00 Contribution
	State: District:				Memo Item
C.	Full Name (Last, First, Middle Initial) Dean Elliott Committee	Date of Disbursement			
	Mailing Address 12 Basswood Terrace	07 / D D / Y Y Y Y 2018			
	City Maumelle	State AR	Zip Code 72113		FEC Identification Number
	Purpose of Disbursement Void - Dean Elliott Committee; Check dated 5/3/18	011	C Transaction ID : 42451457		
	Candidate Name Elliott, Dean, , ,	Category/ Type	Amount of Each Disbursement this Period		
		ement For: Primary General Other (specify) ▼			- 500.00 Void - Dean Elliott Committee Memo Item Check dated 5/3/18
_	State: District:				L.
⊢	CUBTOTAL of Disbursements This Page (optional).				1500.00

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 292 OF 295	
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a	-	
Any information copied from such Reports and State or for commercial purposes, other than using the na					
NAME OF COMMITTEE (In Full)					
UnitedHealth Group Incorporated	PAC (Ur	nitedHealth G	Froup PAC)	
Full Name (Last, First, Middle Initial) A. Tom Wolf for Governor	Date of Disbursement				
Mailing Address PO Box 22454	Mailing Address PO Box 22454				
City	State PA	Zip Code		FEC Identification Number	
Purpose of Disbursement Contribution	Purpose of Disbursement				
Candidate Name	Candidate Name Cate				
Wolf, Tom, , Gov., Office Sought: House Disburse	ement For:		Туре	25000.00	
Senate President	Primary Other (spe	General cify) ▼		Contribution Memo Item	
State: District:					
Full Name (Last, First, Middle Initial) B. Matthew Shepherd Campaign				Date of Disbursement	
Mailing Address P.O. Box 12004	07 30 2018				
City El Dorado	State AR	Zip Code 71730		FEC Identification Number	
Purpose of Disbursement Contribution	Purpose of Disbursement				
Candidate Name			Category/	Transaction ID: 42492487 Amount of Each Disbursement this Period	
Shepherd, Matthew, , AR Rep., Ty Office Sought: House Disbursement For: Ty				500.00	
Senate	Senate Primary General			Contribution	
State: District:	Other (spe	cify)		Memo Item	
Full Name (Last, First, Middle Initial) C. Angela Paxton Campaign					
Mailing Address 5613 S Woodcreek Circle				M M / D D / Y	
City McKinney	State TX	Zip Code 75071		FEC Identification Number	
Purpose of Disbursement Contribution	011	C Transaction ID : 42502472			
Candidate Name	Candidate Name Paxton, Angela, , , Category/ Type				
Office Sought: House Disburse	туре	2000.00			
Senate President	Primary Other (spe	General cify) ▼		Contribution Memo Item	
State: District:					
SUBTOTAL of Disbursements This Page (optional).			····· ►	27500.00	
TOTAL This Period (last page this line number only	y)		••••••		

SCHEDULE B (FEC Form 3X)			FOR LINE		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page		(check only 21b 28a	rone) 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	ments may me and add	not be sold or use ress of any politica	ed by any perso al committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.	
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (Un	itedHealth G	Froup PAC)	
Full Name (Last, First, Middle Initial) A. Charles Perry Campaign	Charles Perry Campaign				
Mailing Address P.O. Box 94806	07 30 2018				
City Lubbock Purpose of Disbursement	State TX	Zip Code 79493		FEC Identification Number	
Contribution 01				C Transaction ID : 42505361 Amount of Each Disbursement this Period	
Perry, Charles, , TX Sen., Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spec	General cify) ▼	Category/ Type	Contribution Memo Item	
Full Name (Last, First, Middle Initial) B. Gene Wu Campaign Mailing Address 5708 Dolores, Unit H		Date of Disbursement			
City Houston Purpose of Disbursement Contribution	011	FEC Identification Number			
Candidate Name Wu, Gene, , TX Rep., Office Sought: House Senate President State: District:	ment For: Primary Other (spec	General Cify)	Category/ Type	Transaction ID : 42505372 Amount of Each Disbursement this Period 1000.00 Contribution Memo Item	
Full Name (Last, First, Middle Initial) C. Ina Minjarez Campaign					
Mailing Address P.O. Box 769413	07 30 2018				
City San Antonio Purpose of Disbursement Contribution Candidate Name Minjarez, Ina, , TX Rep.,	State TX	Zip Code 78245	011 Category/ Type	FEC Identification Number C Transaction ID : 42505378 Amount of Each Disbursement this Period	
	ment For: Primary General Other (specify) ▼			1000.00 Contribution Memo Item	
SUBTOTAL of Disbursements This Page (optional).				4000.00	
TOTAL This Period (last page this line number only	')		▶	, ,	

SCHEDULE B (FEC Form 3X)				INE NUMBER: PAGE 294 OF 295		
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page		only one) 21b 22 23 26 27 28a 28b 28c x 29 30b		
Any information copied from such Reports and State or for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (Ur	nitedHealth G	Group P	AC)		
Full Name (Last, First, Middle Initial) A. James Frank Campaign				Date of Disbursement		
Mailing Address 1206 Hatton Rd	Mailing Address 1206 Hatton Rd					
City Wichita Falls	State TX	Zip Code 76302		FEC Identification Number		
Contribution	UT UT					
Frank, James, , Mr.,	ement For:		Category Type	/ Amount of Each Disbursement this Period 1000.00		
Senate President State: District:	Primary Other (spe	General cify) ▼		Contribution Memo Item		
Full Name (Last, First, Middle Initial) B. Jessica Farrar Campaign	Date of Disbursement					
City	Mailing Address PO Box 30099					
Houston Purpose of Disbursement Contribution	011	FEC Identification Number				
Candidate Name Farrar, Jessica, , TX Rep., Office Sought: Senate President State: District:	ement For: Primary Other (spe	General cify)	Category Type			
Full Name (Last, First, Middle Initial) C. Lois Kolkhorst for Texas Senate			Date of Disbursement			
Mailing Address PO Box 2546	07 30 2018					
City Brenham Purpose of Disbursement	State TX	Zip Code 77834		FEC Identification Number		
Contribution Candidate Name Kolkhorst, Lois, , TX Sen.,	Transaction ID : 42505386 / Amount of Each Disbursement this Period					
Office Sought: House Disburs Senate President State: District:	ement For: Primary Other (spe	General ccify) ▼		Contribution Memo Item		
SUBTOTAL of Disbursements This Page (optional)				4000.00		
TOTAL This Period (last page this line number onl	y)			• • • • • • • • • • • • • • • • • • • •		

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 295 OF 295		
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a			
Any information copied from such Reports and State or for commercial purposes, other than using the nar						
NAME OF COMMITTEE (In Full)		itadUaalth (N N		
UnitedHealth Group Incorporated)		
Full Name (Last, First, Middle Initial) A. Texans for Dan Patrick	Date of Disbursement					
Mailing Address 1 E Greenway Plaza Ste 225	•					
City Houston	State TX	Zip Code 77046		FEC Identification Number		
Purpose of Disbursement Contribution	011			C		
Candidate Name			Category/	Transaction ID : 42505387 Amount of Each Disbursement this Period		
Patrick, Dan, , TX Sen., Office Sought: House Disburse Senate President	ment For: Primary Other (spec	General	Туре	10000.00 Contribution		
State: District:	Other (spec	Siry) 🔻		Memo Item		
Full Name (Last, First, Middle Initial) B. Texans for Joan Huffman Mailing Address 3375 WestPark Dr. Ste 135		Date of Disbursement 07 / D D / Y Y Y Y 2018				
Houston	State TX	Zip Code 77005		FEC Identification Number		
Purpose of Disbursement Contribution Candidate Name						
Huffman, Joan, , TX Sen.,						
Office Sought: House Disburse Senate President	ment For: Primary Other (spec	General Cify)		2000.00 Contribution		
State: District:				Memo Item		
Full Name (Last, First, Middle Initial)		Date of Disbursement				
Mailing Address	lailing Address					
City	State	Zip Code		FEC Identification Number		
Purpose of Disbursement	C					
Candidate Name	Amount of Each Disbursement this Period					
Office Sought: House Disburse Senate	Туре					
State: District:	Other (spec	cify) ▼		Memo Item		
SUBTOTAL of Disbursements This Page (optional)			····· >	12000.00		
TOTAL This Period (last page this line number only)			56000.00		