

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

UnitedHealth Group Incorporated PAC (United for Health)

ADDRESS (number and street) 9900 Bren Road East

Check if different than previously reported. (ACC) Minnetonka MN 55343

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00274431 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)

January 31 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	

Election on M M / D D / Y Y Y Y Y Y in the State of

(d) 30-Day POST-Election Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
--	---------------------------------------	--

Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period 07 / 01 / 2009 through 12 / 31 / 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Sherwood, Susan, , ,

Signature of Treasurer Sherwood, Susan, , , Date 12 / 06 / 2010

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

UnitedHealth Group Incorporated PAC (United for Health)

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2009"/>	<input type="text" value="224784.14"/>	<input type="text" value="224784.14"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="203536.48"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="212188.35"/>	<input type="text" value="414615.69"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="415724.83"/>	<input type="text" value="639399.83"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="238075.00"/>	<input type="text" value="461750.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="177649.83"/>	<input type="text" value="177649.83"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

UnitedHealth Group Incorporated PAC (United for Health)

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	193111.30	364130.31
(ii) Unitemized	15286.99	46695.32
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	208398.29	410825.63
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	190.06	190.06
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	208588.35	411015.69
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	3600.00	3600.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	212188.35	414615.69
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	212188.35	414615.69

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	158500.00	336500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	79575.00	125250.00
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
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	238075.00	461750.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	238075.00	461750.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	208588.35	411015.69
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	208588.35	411015.69
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

This amendment is to correct a clerical error regarding designation of election.

Form/Schedule:
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. Sommer, Judah, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 701 Pennsylvania Ave NW
 Suite 530/650
 City Washington State DC Zip Code 20004-2606
 FEC ID number of contributing federal political committee. **C** Public Affairs
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 17 / 2009
Transaction ID : 31055122
 Amount of Each Receipt this Period 5000.00
 Memo Item
 15

B. GROSS, MICHAEL R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Actuarial Director
 Name of Employer (for Individual) Occupation (for Individual) United HealthCare Corporation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1159789623217
 Amount of Each Receipt this Period 100.00
 Memo Item
 15

C. CHAPMAN, MOLLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Assoc Dir Network Contra
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1159790523217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	5230.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. HOVERMAN, KEN L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP Marketing
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1159790923217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

B. TULUMELLO, PAMELA A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir Claims Quality
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1159793123217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

C. STREB, DEBORAH S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir Project Management
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1159794123217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	390.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 174
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. KAZLAUSKAS, ANTHONY J, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2009
Mailing Address 9900 Bren Road East		Transaction ID : PR1159794623217
City Minnetonka	State MN	Zip Code 55343-9664
FEC ID number of contributing federal political committee. C Sr Medical Director		Amount of Each Receipt this Period 260.00
Name of Employer (for Individual)	Occupation (for Individual) UnitedHealth Group, Inc.	<input type="checkbox"/> Memo Item 15
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MUGGIO, CARLA M, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2009
Mailing Address 9900 Bren Road East		Transaction ID : PR1159798223217
City Minnetonka	State MN	Zip Code 55343-9664
FEC ID number of contributing federal political committee. C Network Contract Director		Amount of Each Receipt this Period 249.99
Name of Employer (for Individual)	Occupation (for Individual) UnitedHealth Group, Inc.	<input type="checkbox"/> Memo Item 15
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 519.21	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WHETSTINE, HERBERT L, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2009
Mailing Address 9900 Bren Road East		Transaction ID : PR1159803623217
City Minnetonka	State MN	Zip Code 55343-9664
FEC ID number of contributing federal political committee. C Dir Aviation & Corp Pilots		Amount of Each Receipt this Period 124.93
Name of Employer (for Individual)	Occupation (for Individual) UnitedHealth Group, Inc.	<input type="checkbox"/> Memo Item 15
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 259.47	

SUBTOTAL of Receipts This Page (optional).....▶	634.92
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 174
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. BELLOWS, BRIAN R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir Bus Dvlp
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1159803823217
 Amount of Each Receipt this Period 195.00
 Memo Item
 15

B. NOBLITT, KEITH W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Strategic Client Exec-Unip
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1159805523217
 Amount of Each Receipt this Period 260.00
 Memo Item
 15

C. ELLISTON, JAMES S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Assoc Dir Finance
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1159805923217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	585.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. WATSON III, JAMES S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Govt Rel Assoc Dir
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 634.61

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1159806023217
 Amount of Each Receipt this Period 325.00
 Memo Item
 15

B. NEVIN, MARILYN C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP Finance
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1159807423217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

C. ABELMANN, NANCY C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir Tax
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 346.14

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1159809123217
 Amount of Each Receipt this Period 174.98
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....▶	629.98
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. WHITELY, WILLIAM P, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Senior Vice President**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4999.80

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1159812623217
 Amount of Each Receipt this Period 2307.60
 Memo Item
 15

B. COOK, WAYNE F, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C President Insurance Solut**
 Name of Employer (for Individual) Occupation (for Individual) United HealthGroup
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1426.14

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1159812823217
 Amount of Each Receipt this Period 780.00
 Memo Item
 15

C. CAROLAN, WILLIAM J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Strategic Client Exec-Unip**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 207.63

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1159812923217
 Amount of Each Receipt this Period 99.97
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	3187.57
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 174
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. WICHMANN, DAVID S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** EVP & Pres UHG Operati
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4999.10

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1159814723217
 Amount of Each Receipt this Period 2307.60
 Memo Item
 15

B. ERLANDSON, PATRICK J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** SVP Business Operations
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4999.80

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1159815923217
 Amount of Each Receipt this Period 2307.60
 Memo Item
 15

C. SAURO, PATRICIA R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Business Segment CAO
 Name of Employer (for Individual) Occupation (for Individual) United HealthGroup, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1900.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1159816423217
 Amount of Each Receipt this Period 780.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional)..... ▶ 5395.20
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. MUNSELL, WILLIAM A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** EVP UnitedHealth Group
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1159816623217
 Amount of Each Receipt this Period 1300.00
 Memo Item
 15

B. PENSHORN, JOHN S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** SVP UnitedHealth Group
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1159816923217
 Amount of Each Receipt this Period 1300.00
 Memo Item
 15

C. KALLMEYER, PAUL D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Deputy General Counsel (
 Name of Employer (for Individual) Occupation (for Individual) United HealthGroup
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1170.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1159817423217
 Amount of Each Receipt this Period 650.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional)..... ▶ 3250.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. RYAN, TIMOTHY F, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Business Segment Gen C**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 513.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1159817923217
 Amount of Each Receipt this Period 247.00
 Memo Item
 15

B. QUIRK, THOMAS J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Health Plan CEO**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1038.42

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1159819123217
 Amount of Each Receipt this Period 499.98
 Memo Item
 15

C. ROSE, BRIAN H, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Sr Medical Director**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealthGroup
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 207.63

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1159819423217
 Amount of Each Receipt this Period 99.97
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	846.95
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. TUCKSON, REED V, , M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9900 Bren Road East

City Minnetonka	State MN	Zip Code 55343-9664
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** EVP Consumr Health & M

Name of Employer (for Individual) Occupation (for Individual)
UnitedHealth Group

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3115.26

Date of Receipt
12 / 31 / 2009
Transaction ID : PR1159819823217

Amount of Each Receipt this Period
1499.94

Memo Item
15

B. FALK, DAVID J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9900 Bren Road East

City Minnetonka	State MN	Zip Code 55343-9664
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
337.50

Date of Receipt
12 / 31 / 2009
Transaction ID : PR1159820223217

Amount of Each Receipt this Period
162.50

Memo Item
15

C. OBERMAN, DEBRA A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9900 Bren Road East

City Minnetonka	State MN	Zip Code 55343-9664
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** VP Gov't Relations

Name of Employer (for Individual) Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
519.21

Date of Receipt
12 / 31 / 2009
Transaction ID : PR1159820723217

Amount of Each Receipt this Period
249.99

Memo Item
15

SUBTOTAL of Receipts This Page (optional).....	1912.43
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. TRACY, WILLIAM C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Health Plan CEO
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1557.90

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1159821523217
 Amount of Each Receipt this Period 750.10
 Memo Item
 15

B. HAWKINS, MICHAEL M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Sr Medical Director
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 311.58

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1159822023217
 Amount of Each Receipt this Period 150.02
 Memo Item
 15

C. SCHNEEWEIS, CAROL M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir Medical & Clinical Ops
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 710.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1159823523217
 Amount of Each Receipt this Period 325.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional)..... ▶ 1225.12
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 174
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. MIGLIORI, RICHARD J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C SVP Bus Initiatives & Clin**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2076.84

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1159827423217
 Amount of Each Receipt this Period 999.96
 Memo Item
 15

B. BUENEMANN, BARBARA C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Dir Customer Service**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 311.58

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1159828723217
 Amount of Each Receipt this Period 150.02
 Memo Item
 15

C. RIVET, JEANNINE M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C EVP UnitedHealth Group**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4999.80

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1159830023217
 Amount of Each Receipt this Period 2307.60
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	3457.58
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 174
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SHUFF, JACK E, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2009
Mailing Address 9900 Bren Road East		Transaction ID : PR1159830523217
City Minnetonka	State MN	Zip Code 55343-9664
FEC ID number of contributing federal political committee. C SB RVP		Amount of Each Receipt this Period 249.99
Name of Employer (for Individual)	Occupation (for Individual) UnitedHealth Group, Inc.	<input type="checkbox"/> Memo Item 15
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 519.21	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. STEVENSON, JOHN F, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2009
Mailing Address 9900 Bren Road East		Transaction ID : PR1159839323217
City Minnetonka	State MN	Zip Code 55343-9664
FEC ID number of contributing federal political committee. C Sr Associate General Cou		Amount of Each Receipt this Period 127.40
Name of Employer (for Individual)	Occupation (for Individual) UnitedHealth Group, Inc.	<input type="checkbox"/> Memo Item 15
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 264.60	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WINTERS, JILL, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2009
Mailing Address 9900 Bren Road East		Transaction ID : PR1159840423217
City Minnetonka	State MN	Zip Code 55343-9664
FEC ID number of contributing federal political committee. C VP General Management		Amount of Each Receipt this Period 702.00
Name of Employer (for Individual)	Occupation (for Individual) UnitedHealth Group, Inc.	<input type="checkbox"/> Memo Item 15
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1458.00	

SUBTOTAL of Receipts This Page (optional).....▶	1079.39
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. BURTON, THOMAS E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP Actuary
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.91

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1159841623217
 Amount of Each Receipt this Period 108.29
 Memo Item
 15

B. WELTERS, ANTHONY, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** EVP UnitedHealth Group
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4999.80

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1332013223217
 Amount of Each Receipt this Period 2499.90
 Memo Item
 15

C. KIRCHNER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Executive Director
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1038.42

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1530190523217
 Amount of Each Receipt this Period 499.98
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	3108.17
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 174
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. DUGGIN, THELMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C SVP UnitedHealth Group**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4999.90

Date of Receipt 12 / 31 / 2009
Transaction ID : PR153079923217
 Amount of Each Receipt this Period 2307.72
 Memo Item
 15

B. BOHNENKAMP, ROBERT J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Business Segment CIO**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4999.80

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1551005623217
 Amount of Each Receipt this Period 2307.60
 Memo Item
 15

C. BRESOLIN, MICHAEL J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Dir Care Advocacy**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1551005723217
 Amount of Each Receipt this Period 260.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	4875.32
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. DONOVAN, RITA T, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Dir Network Contracting**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.63

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1551006623217
 Amount of Each Receipt this Period 99.97
 Memo Item
 15

B. HEADY, TIMOTHY J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C SVP Pharmacy Benefit M**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1080.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1551122523217
 Amount of Each Receipt this Period 520.00
 Memo Item
 15

C. HOCK, CHRISTOPHER R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Dir General Management**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 311.58

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1551128923217
 Amount of Each Receipt this Period 150.02
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	769.99
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. HOLUBEC, LISA G, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Assoc Dir Med & Clinical C
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 309.21

Date of Receipt 12 / 31 / 2009
Transaction ID : PR155112923217
 Amount of Each Receipt this Period 190.00
 Memo Item
 15

B. KAGAN, JEFFREY W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1551132323217
 Amount of Each Receipt this Period 260.00
 Memo Item
 15

C. KNUTSON, GERALD JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Business Segment CFO
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 706.14

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1551132523217
 Amount of Each Receipt this Period 260.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional)..... ▶ 710.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. MATTEO, MICHAEL C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** CEO National Accounts
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 519.21

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1551133423217
 Amount of Each Receipt this Period 249.99
 Memo Item
 15

B. MORAGA, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Assoc Dir General Manag
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.63

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1551134223217
 Amount of Each Receipt this Period 99.97
 Memo Item
 15

C. OWENS, DAWN M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Business Segment CEO
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 519.21

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1551160323217
 Amount of Each Receipt this Period 249.99
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	599.95
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. ROGERS, ERIKA A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Strategic Client Exec-Unip**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1551160723217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

B. VALERIUS, THOMAS J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C VP Recruitment Svcs**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2076.84

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1551161323217
 Amount of Each Receipt this Period 999.96
 Memo Item
 15

C. WEIHRAUCH, LOIS T, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C VP General Management**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1458.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1551161423217
 Amount of Each Receipt this Period 702.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	1831.96
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. ENDERLE, JOHN O, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Regional Executive
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1485.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1554323523217
 Amount of Each Receipt this Period 715.00
 Memo Item
 15

B. HARRIS, CHRISTINE MCCARTNEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir Claims
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1554323623217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

C. JELINEK, RICK M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Business Segment CEO
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4999.80

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1554323923217
 Amount of Each Receipt this Period 2307.60
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional)..... ▶ 3152.60
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. RADU, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP Operations
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 936.45

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1554324523217
 Amount of Each Receipt this Period 667.23
 Memo Item
 15

B. SPILLANE, CATHERINE E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir Business Process
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 519.21

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1554324623217
 Amount of Each Receipt this Period 249.99
 Memo Item
 15

C. STAPLETON, KIRK E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP Network Programs
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1554324723217
 Amount of Each Receipt this Period 650.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	1567.22
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. WEIMERSKIRCH, AMY E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Mgr Product Research**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.63

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1554324923217
 Amount of Each Receipt this Period 99.97
 Memo Item
 15

B. ERICKSON, KAREN L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C SVP Corporate Controller**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4999.80

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1575957623217
 Amount of Each Receipt this Period 2307.60
 Memo Item
 15

C. MONFILETTO, ERNEST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Plan President**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2076.84

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1575958123217
 Amount of Each Receipt this Period 999.96
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional)..... ▶ 3407.53
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. VALENTA, LEE D, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2009
Mailing Address 9900 Bren Road East		Transaction ID : PR1575958523217
City Minnetonka	State MN	Zip Code 55343-9664
FEC ID number of contributing federal political committee. C Business Segment COO		Amount of Each Receipt this Period 2307.60
Name of Employer (for Individual)	Occupation (for Individual) UnitedHealth Group, Inc.	<input type="checkbox"/> Memo Item 15
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4999.80	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. OSTLER, DAVID B, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2009
Mailing Address 9900 Bren Road East		Transaction ID : PR1580864623217
City Minnetonka	State MN	Zip Code 55343-9664
FEC ID number of contributing federal political committee. C SVP IBS		Amount of Each Receipt this Period 130.00
Name of Employer (for Individual)	Occupation (for Individual) UnitedHealth Group, Inc.	<input type="checkbox"/> Memo Item 15
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. PAUL, THOMAS S, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2009
Mailing Address 9900 Bren Road East		Transaction ID : PR1580864723217
City Minnetonka	State MN	Zip Code 55343-9664
FEC ID number of contributing federal political committee. C Business Segment COO		Amount of Each Receipt this Period 499.98
Name of Employer (for Individual)	Occupation (for Individual) UnitedHealth Group, Inc.	<input type="checkbox"/> Memo Item 15
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1038.42	

SUBTOTAL of Receipts This Page (optional).....▶	2937.58
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 30 OF 174
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. WEBB, ROBERT THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** CEO Care Solutions
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4999.80

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1580865323217
 Amount of Each Receipt this Period 2307.60
 Memo Item
 15

B. HUGHES, RICHARD J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP Human Capital Dvlpmt
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596304123217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

C. JOHNSON, THAD C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Sr Deputy General Couns
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596304323217
 Amount of Each Receipt this Period 195.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....▶ 2632.60
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. KING, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP Sales - Uniprise
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596304423217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

B. MASSEY, GAYE ADAMS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Sr Deputy General Couns
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3115.26

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596304523217
 Amount of Each Receipt this Period 1499.94
 Memo Item
 15

C. MATUSHAK, JAY S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP Healthcare Econ
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 311.58

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596304623217
 Amount of Each Receipt this Period 150.02
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional)..... ▶ 1779.96
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. MIKAN III, GEORGE L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** EVP CFO
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4999.80

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596304823217
 Amount of Each Receipt this Period 2307.60
 Memo Item
 15

B. MORNESS, CAROL B, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir Underwriting
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1038.42

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596304923217
 Amount of Each Receipt this Period 499.98
 Memo Item
 15

C. SCHUMACHER, DANIEL J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Market Group CFO
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 207.63

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596305423217
 Amount of Each Receipt this Period 99.97
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....▶ 2907.55
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. SPARKMAN, DAVID LYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Market Group CAO
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.63

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596305523217
 Amount of Each Receipt this Period 99.97
 Memo Item
 15

B. THEISEN, SCOTT E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** SVP Product Developmen
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 519.21

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596305623217
 Amount of Each Receipt this Period 249.99
 Memo Item
 15

C. LEWIS, THOMAS D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Health Plan CEO
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1038.42

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596306923217
 Amount of Each Receipt this Period 499.98
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional)..... ▶ 849.94
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. OBERRENDER, ROBERT W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** SVP Treasurer
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596307023217
 Amount of Each Receipt this Period 419.00
 Memo Item
 15

B. ANDERSON, KENNETH J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Business Development Di
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.63

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596309223217
 Amount of Each Receipt this Period 99.97
 Memo Item
 15

C. FLYNN, DIANE BEDNAR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 640.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596309723217
 Amount of Each Receipt this Period 325.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....▶	843.97
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. COOK, JEFFREY S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Health Plan CEO
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.42

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596311323217
 Amount of Each Receipt this Period 103.86
 Memo Item
 15

B. COTO, RAMON E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP General Management
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 519.21

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596311523217
 Amount of Each Receipt this Period 249.99
 Memo Item
 15

C. DAVIDSON, TRACY L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir Network Contracting
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.63

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596311623217
 Amount of Each Receipt this Period 99.97
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional)..... ▶ 453.82
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 36 OF 174
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. DOOLEY, JEFFREY P, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** KA VP Sales and Account
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 311.58

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596312123217
 Amount of Each Receipt this Period 150.02
 Memo Item
 15

B. DUNLOP, RICHARD G, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Chief of Staff
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596312323217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

C. FOUCRE, JILLIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** COO
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596312723217
 Amount of Each Receipt this Period 325.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....▶	605.02
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. GARCIA, STEVAN D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP General Management
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 519.21

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596312923217
 Amount of Each Receipt this Period 249.99
 Memo Item
 15

B. HAWLEY, EDWARD J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** SB SVP National Sls & AM
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1038.42

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596313623217
 Amount of Each Receipt this Period 499.98
 Memo Item
 15

C. HEUMANN, KURT A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir Finance
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596313723217
 Amount of Each Receipt this Period 260.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....▶ 1009.97
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. HIGGINS, MARY M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.63

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596313823217
 Amount of Each Receipt this Period 99.97
 Memo Item
 15

B. KAJA, TIMOTHY T, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** SVP
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.63

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596314523217
 Amount of Each Receipt this Period 99.97
 Memo Item
 15

C. NORRIS, JASON A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Sr Underwriting Consultar
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 207.63

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596316423217
 Amount of Each Receipt this Period 99.97
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	299.91
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. RENNICK JR, JOHN H, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Medical Director
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 519.21

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596316823217
 Amount of Each Receipt this Period 249.99
 Memo Item
 15

B. RODGERS, STEPHAN S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** SVP Healthcare Strategie:
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4999.80

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596317123217
 Amount of Each Receipt this Period 2307.60
 Memo Item
 15

C. ROSENTHAL, DANIEL I, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Health Plan CEO
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 519.21

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596317323217
 Amount of Each Receipt this Period 249.99
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional)..... ▶ 2807.58
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 40 OF 174
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. RUTH, KEVIN J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C SVP Enterprise Clinical AI**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2025.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596317423217
 Amount of Each Receipt this Period 975.00
 Memo Item
 15

B. SELVA, MANUEL A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Medical Director**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 519.21

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596317723217
 Amount of Each Receipt this Period 249.99
 Memo Item
 15

C. THOMAS, ROXANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Product Director**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 311.58

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596318923217
 Amount of Each Receipt this Period 150.02
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	1375.01
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. TURNAU, CHRIS B, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Dir Tax**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596319123217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

B. VIERLING, FRANK M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Dir General Management**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596319423217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

C. WASSERSTEIN, M LAURIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C PS National VP Account M**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 519.21

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1596319523217
 Amount of Each Receipt this Period 249.99
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	509.99
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WERLEY, MYRON R, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2009
Mailing Address 9900 Bren Road East		Transaction ID : PR1596319623217
City Minnetonka	State MN	Zip Code 55343-9664
FEC ID number of contributing federal political committee. C Dir Underwriting		Amount of Each Receipt this Period 162.50
Name of Employer (for Individual)	Occupation (for Individual) UnitedHealth Group, Inc.	<input type="checkbox"/> Memo Item 15
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 337.50	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WILSON, WILLIAM R, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2009
Mailing Address 9900 Bren Road East		Transaction ID : PR1596320023217
City Minnetonka	State MN	Zip Code 55343-9664
FEC ID number of contributing federal political committee. C Dir Underwriting		Amount of Each Receipt this Period 130.00
Name of Employer (for Individual)	Occupation (for Individual) UnitedHealth Group, Inc.	<input type="checkbox"/> Memo Item 15
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WRIGHT, JANET P, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2009
Mailing Address 9900 Bren Road East		Transaction ID : PR1596320123217
City Minnetonka	State MN	Zip Code 55343-9664
FEC ID number of contributing federal political committee. C Mgr IT		Amount of Each Receipt this Period 130.00
Name of Employer (for Individual)	Occupation (for Individual) UnitedHealth Group, Inc.	<input type="checkbox"/> Memo Item 15
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 270.00	

SUBTOTAL of Receipts This Page (optional).....	422.50
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 43 OF 174
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. DODDY, JOHN P, , ,

Mailing Address 9900 Bren Road East

City Minnetonka	State MN	Zip Code 55343-9664
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** VP Information Technolog

Name of Employer (for Individual) Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
540.00

Date of Receipt
12 / 31 / 2009
Transaction ID : PR1600597323217

Amount of Each Receipt this Period
260.00

Memo Item
15

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MICHAUX, MICHAEL D, , ,

Mailing Address 9900 Bren Road East

City Minnetonka	State MN	Zip Code 55343-9664
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** VP Acquisitions & Integrati

Name of Employer (for Individual) Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
311.58

Date of Receipt
12 / 31 / 2009
Transaction ID : PR1600598523217

Amount of Each Receipt this Period
150.02

Memo Item
15

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SANDY, LEWIS G, , ,

Mailing Address 9900 Bren Road East

City Minnetonka	State MN	Zip Code 55343-9664
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** SVP Clinical Advancemen

Name of Employer (for Individual) Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1755.00

Date of Receipt
12 / 31 / 2009
Transaction ID : PR1600598723217

Amount of Each Receipt this Period
845.00

Memo Item
15

SUBTOTAL of Receipts This Page (optional).....▶	1255.02
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. CAUTIN, MICHAEL P, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Business Segment CIO**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 519.21

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1602667523217
 Amount of Each Receipt this Period 249.99
 Memo Item
 15

B. PETERSON, MATTHEW W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Market Group CAO**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1080.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1602669923217
 Amount of Each Receipt this Period 520.00
 Memo Item
 15

C. MALONEY, JEFFREY W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C VP Operations - Evercare**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2596.05

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1613243523217
 Amount of Each Receipt this Period 1249.95
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	2019.94
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 45 OF 174
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. CELLI, PAT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Plan President
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.63

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1613243723217
 Amount of Each Receipt this Period 99.97
 Memo Item
 15

B. FINKELSTEIN, ALLEN LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Sr Medical Director
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1038.42

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1620989023217
 Amount of Each Receipt this Period 499.98
 Memo Item
 15

C. CULLEN, LINDA L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Assoc Dir Regulatory Affa
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1632359723217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....▶	729.95
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. WALLER, DANIEL S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Dir Finance**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1632360023217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

B. KENNEDY, WILLIAM F, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Dir IT Project Mgmt**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 498.51

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1653443123217
 Amount of Each Receipt this Period 260.00
 Memo Item
 15

C. KOOREN, STEVE R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Business Segment CFO**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1557.63

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1653443223217
 Amount of Each Receipt this Period 749.97
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	1139.97
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. BELLAMY, THOMAS J, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9900 Bren Road East

City Minnetonka	State MN	Zip Code 55343-9664
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C SB VP Sales and Account**

Name of Employer (for Individual) Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1557.90

Date of Receipt
12 / 31 / 2009
Transaction ID : PR1653444323217

Amount of Each Receipt this Period
750.10

Memo Item
15

B. HOLMAN, ROBERT L, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9900 Bren Road East

City Minnetonka	State MN	Zip Code 55343-9664
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C Dir Provider Reimb**

Name of Employer (for Individual) Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
12 / 31 / 2009
Transaction ID : PR1653445023217

Amount of Each Receipt this Period
130.00

Memo Item
15

C. SULLIVAN, DANIEL T, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9900 Bren Road East

City Minnetonka	State MN	Zip Code 55343-9664
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C Dir IT Project Mgmt**

Name of Employer (for Individual) Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
311.58

Date of Receipt
12 / 31 / 2009
Transaction ID : PR1653445823217

Amount of Each Receipt this Period
150.02

Memo Item
15

SUBTOTAL of Receipts This Page (optional).....	1030.12
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. LARKIN, JOYCE A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Govt Rel Dir
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2076.84

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1677771623217
 Amount of Each Receipt this Period 999.96
 Memo Item
 15

B. BELLIS, JOSEPH K, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Sr Business Process Anal
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.63

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1711240223217
 Amount of Each Receipt this Period 99.97
 Memo Item
 15

C. SNOWDEN, MILES S, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** SVP Health Advancement
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4999.80

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1746717823217
 Amount of Each Receipt this Period 2307.60
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....▶ 3407.53
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. KOUTSOUMPAS JR, JOHN T, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP Public Policy
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4999.80

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1748514523217
 Amount of Each Receipt this Period 2307.60
 Memo Item
 15

B. DESTWOLINSKI, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Assoc Dir Utilization Mgm
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 297.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1806441623217
 Amount of Each Receipt this Period 143.00
 Memo Item
 15

C. DUDASH, JASON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Mgr Applications Dvlpmnt
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1806441923217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	2580.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. LEVINE, JEFF L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C PS Mgr Acct Mgmt (FEHB)**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1806443223217
 Amount of Each Receipt this Period 260.00
 Memo Item
 15

B. TALAMANTES, WILLIAM, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Six Sigma Consultant**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.20

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1806444723217
 Amount of Each Receipt this Period 228.80
 Memo Item
 15

C. ARCHER, LORI A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Dir Provider Svc**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 311.58

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1806750123217
 Amount of Each Receipt this Period 150.02
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	638.82
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. BAYER, GREGORY A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** CEO Behavioral Solutions
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1120.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1806750223217
 Amount of Each Receipt this Period 455.00
 Memo Item
 15

B. EMERSON, PAUL M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Business Segment CFO
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1038.42

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1806750323217
 Amount of Each Receipt this Period 499.98
 Memo Item
 15

C. PINOTTI, SHERRI C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir IT
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 391.95

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1832039823217
 Amount of Each Receipt this Period 123.50
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....▶ 1078.48
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. LEDELL, MICHELLE D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Human Capital Partner**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1080.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1882850623217
 Amount of Each Receipt this Period 520.00
 Memo Item
 15

B. ANDERSON, CATHERINE K, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Dir Marketing Bus Dev**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1557.90

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1903550723217
 Amount of Each Receipt this Period 750.10
 Memo Item
 15

C. BATTAGLINI, KAREN T, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Dir Finance**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 207.63

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1903554823217
 Amount of Each Receipt this Period 99.97
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional)..... ▶ 1370.07
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. BISHOP, KATHLEEN L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir Finance
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1903560823217
 Amount of Each Receipt this Period 260.00
 Memo Item
 15

B. BOURASSA, ERNEST R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir Network Programs
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.63

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1903562423217
 Amount of Each Receipt this Period 99.97
 Memo Item
 15

C. DUFEK, ROBERT J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1903577123217
 Amount of Each Receipt this Period 325.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	684.97
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. EDBERG, SUSAN B, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP Customer Service
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1903578123217
 Amount of Each Receipt this Period 1300.00
 Memo Item
 15

B. JOHNSON, CHRISTOPHER T, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir General Management
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1903591123217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

C. PRYGOCKI, BRIAN K, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir IT
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 207.63

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1903615123217
 Amount of Each Receipt this Period 99.97
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....▶	1529.97
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. SANTELLI, JOHN C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C SVP & CIO**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 413.10

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1903622023217
 Amount of Each Receipt this Period 251.54
 Memo Item
 15

B. WEYMOUTH, PAUL D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Dir Finance**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 519.21

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1903636923217
 Amount of Each Receipt this Period 249.99
 Memo Item
 15

C. JAMIAN, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Dir Customer Service**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 311.58

Date of Receipt 12 / 31 / 2009
Transaction ID : PR1910417423217
 Amount of Each Receipt this Period 150.02
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	651.55
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 174
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. ALLEN, BRADLEY E, , ,		Date of Receipt 12 / 31 / 2009 Transaction ID : PR2119466823217
Mailing Address 9900 Bren Road East		Amount of Each Receipt this Period 260.00
City Minnetonka	State MN	Zip Code 55343-9664
FEC ID number of contributing federal political committee. C Sr Associate General Cou		<input type="checkbox"/> Memo Item 15
Name of Employer (for Individual)	Occupation (for Individual) UnitedHealth Group, Inc.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BEATY, JON D, D, ,		Date of Receipt 12 / 31 / 2009 Transaction ID : PR2119467823217
Mailing Address 9900 Bren Road East		Amount of Each Receipt this Period 130.00
City Minnetonka	State MN	Zip Code 55343-9664
FEC ID number of contributing federal political committee. C Dir Clinical Quality		<input type="checkbox"/> Memo Item 15
Name of Employer (for Individual)	Occupation (for Individual) UnitedHealth Group, Inc.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BENNETT, RUSSELL A, , ,		Date of Receipt 12 / 31 / 2009 Transaction ID : PR2119468023217
Mailing Address 9900 Bren Road East		Amount of Each Receipt this Period 260.00
City Minnetonka	State MN	Zip Code 55343-9664
FEC ID number of contributing federal political committee. C Dir Marketing Bus Dev		<input type="checkbox"/> Memo Item 15
Name of Employer (for Individual)	Occupation (for Individual) UnitedHealth Group, Inc.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 540.00	

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. BERKEL, SUSAN LYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C SVP Operations**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4992.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119468123217
 Amount of Each Receipt this Period 2304.00
 Memo Item
 15

B. BOOHER, DAVID N, N, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Mgr Pharmacy Ops**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119468623217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

C. BRYAN, KATHIE L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Assoc Dir Mrkting Comm**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119469423217
 Amount of Each Receipt this Period 325.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	2759.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. CADRIEL, DANIEL P, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C PS Dir. Strategic Accts**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119469823217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

B. CAMPBELL, COLLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Assoc Dir Clinical Quality**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119469923217
 Amount of Each Receipt this Period 195.00
 Memo Item
 15

C. CARDER, ROBIN L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Sr Network Pricing Consu**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119470123217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional)..... ▶ 455.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. CARLSON, DAVID S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Dir Marketing Research**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119470223217
 Amount of Each Receipt this Period 260.00
 Memo Item
 15

B. CARTER, LESLIE J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Dir Network Contracting**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2592.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119470323217
 Amount of Each Receipt this Period 1248.00
 Memo Item
 15

C. COATS, HAROLD, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Natl Medical Director/CMC**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119471023217
 Amount of Each Receipt this Period 100.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....▶ 1608.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. CORREIA, RANDELL J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP Pharmacy Operations
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 810.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119471323217
 Amount of Each Receipt this Period 390.00
 Memo Item
 15

B. CROSS, RICHARD A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Deputy General Counsel (
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119471823217
 Amount of Each Receipt this Period 325.00
 Memo Item
 15

C. DAVIS, KENNETH R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Medical Director
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119472523217
 Amount of Each Receipt this Period 260.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional)..... ▶ 975.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 61 OF 174
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. DAYAN, LINDA M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Chief of Staff
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 513.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119472623217
 Amount of Each Receipt this Period 247.00
 Memo Item
 15

B. DEMBROSKI, TODD J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Assoc Dir Actuarial Serv
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119472823217
 Amount of Each Receipt this Period 195.00
 Memo Item
 15

C. DILWEG, ANDREA E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Govt Rel Dir
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 999.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119472923217
 Amount of Each Receipt this Period 481.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	923.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. DUNGAN, TARA M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Mgr Medical & Clinical Op
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119473223217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

B. FLUITT, BRADLEY M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119474123217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

C. GIAMBRONE, ANGELO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP Network Contracting
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1620.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119475123217
 Amount of Each Receipt this Period 780.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....▶ 1040.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 174
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. GILDERNICK, AMY J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Assoc Dir Claims
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119475223217
 Amount of Each Receipt this Period 260.00
 Memo Item
 15

B. GLICKMAN, SANDRA R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir Case Mgmt
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119475323217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

C. GONZALES, MARIA C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Mgr Case Mgmt
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119475423217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	520.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. HANSEN, DAVID M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Health Plan CEO
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3645.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119476723217
 Amount of Each Receipt this Period 1755.00
 Memo Item
 15

B. HARVEY, ANNE P, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Assoc Dir Provider Svc
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119477223217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

C. HAYES, PAULINE M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Assoc Dir Finance
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119477423217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....▶ 2015.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. HO, SAMUEL W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Market Grp Chief Clinical
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119477923217
 Amount of Each Receipt this Period 1300.00
 Memo Item
 15

B. HOSKINS, KEVIN C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Mgr Reporting
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119478123217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

C. HOST, KEVIN D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir Pharmacy Operations
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119478223217
 Amount of Each Receipt this Period 260.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	1690.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 66 OF 174
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. HUSER, DONNA L, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2009
Mailing Address 9900 Bren Road East		Transaction ID : PR2119478623217
City Minnetonka	State MN	Zip Code 55343-9664
FEC ID number of contributing federal political committee. C Spvsr Claims		Amount of Each Receipt this Period 130.00
Name of Employer (for Individual)	Occupation (for Individual) UnitedHealth Group, Inc.	<input type="checkbox"/> Memo Item 15
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. JEFFREY, BRIAN, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2009
Mailing Address 9900 Bren Road East		Transaction ID : PR2119479123217
City Minnetonka	State MN	Zip Code 55343-9664
FEC ID number of contributing federal political committee. C VP Network Contracting		Amount of Each Receipt this Period 325.00
Name of Employer (for Individual)	Occupation (for Individual) UnitedHealth Group, Inc.	<input type="checkbox"/> Memo Item 15
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. JONES, JOHN D, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2009
Mailing Address 9900 Bren Road East		Transaction ID : PR2119479223217
City Minnetonka	State MN	Zip Code 55343-9664
FEC ID number of contributing federal political committee. C VP Govt Rel		Amount of Each Receipt this Period 1248.00
Name of Employer (for Individual)	Occupation (for Individual) UnitedHealth Group, Inc.	<input type="checkbox"/> Memo Item 15
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 2592.00	

SUBTOTAL of Receipts This Page (optional).....	1703.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 67 OF 174
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. JORDAN, RONALD W, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2009
Mailing Address 9900 Bren Road East		Transaction ID : PR2119479323217
City Minnetonka	State MN	Zip Code 55343-9664
FEC ID number of contributing federal political committee. C Dir Customer Service		Amount of Each Receipt this Period 65.00
Name of Employer (for Individual)	Occupation (for Individual) UnitedHealth Group, Inc.	<input type="checkbox"/> Memo Item 15
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. KNUTSON, MARK C, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2009
Mailing Address 9900 Bren Road East		Transaction ID : PR2119480223217
City Minnetonka	State MN	Zip Code 55343-9664
FEC ID number of contributing federal political committee. C Dir Customer Service		Amount of Each Receipt this Period 195.00
Name of Employer (for Individual)	Occupation (for Individual) UnitedHealth Group, Inc.	<input type="checkbox"/> Memo Item 15
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 405.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. LEAL, PAMELA S, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2009
Mailing Address 9900 Bren Road East		Transaction ID : PR2119481023217
City Minnetonka	State MN	Zip Code 55343-9664
FEC ID number of contributing federal political committee. C Dir Network Contracting		Amount of Each Receipt this Period 130.00
Name of Employer (for Individual)	Occupation (for Individual) UnitedHealth Group, Inc.	<input type="checkbox"/> Memo Item 15
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 270.00	

SUBTOTAL of Receipts This Page (optional).....▶	390.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. LEWIS, CHARLES E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Sales Market Leader - Me**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119481523217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

B. LINDE, SUSAN A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Mgr Regulatory Affairs**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119481823217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

C. LOURTIE, KATHRYN H, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Assoc Project Manager**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119482123217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....▶	390.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. LUEDKE, SANDY M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** IT Database Cnsltnt
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR211948223217
 Amount of Each Receipt this Period 195.00
 Memo Item
 15

B. LUKER, TIMOTHY A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir Actuarial Services
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119482323217
 Amount of Each Receipt this Period 104.00
 Memo Item
 15

C. MACE-MEADOR, HEATHER M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir Healthcare Econ
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119482523217
 Amount of Each Receipt this Period 260.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	559.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 70 OF 174
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. MASON, JEFFREY S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Medical Director
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119483023217
 Amount of Each Receipt this Period 195.00
 Memo Item
 15

B. MILBURN, CHARLEEN M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Govt Rel Dir
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1755.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119483923217
 Amount of Each Receipt this Period 845.00
 Memo Item
 15

C. MIRANDA, BENITO M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Community Developer - S
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 324.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119484223217
 Amount of Each Receipt this Period 156.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	1196.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. MONK, NANCY J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP Govt Affairs & Compl
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119484323217
 Amount of Each Receipt this Period 650.00
 Memo Item
 15

B. MURRAY, CAROLYN L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Acq Mgr Account Mgmt
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119484823217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

C. NEURURER, SCOTT A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP General Management
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 578.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119484923217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	910.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 72 OF 174
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. NYGARD, KEITH E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Assoc Dir Compliance
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119485023217
 Amount of Each Receipt this Period 260.00
 Memo Item
 15

B. OLLMANN-WAGNER, TRACY L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Mgr Traffic/Workforce
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119485223217
 Amount of Each Receipt this Period 195.00
 Memo Item
 15

C. OLSON, WILLIAM H, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Medical Director
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119485323217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	585.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. OTTO, CYNTHIA ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Assoc Dir Case Mgmt
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119485423217
 Amount of Each Receipt this Period 195.00
 Memo Item
 15

B. PAXSON, LYNDA A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Service Account Manager
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119485823217
 Amount of Each Receipt this Period 325.00
 Memo Item
 15

C. PETE, DIANA S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Assoc Dir Utilization Mgmt
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 324.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119486323217
 Amount of Each Receipt this Period 156.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....▶	676.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. PETERS, MICHELLE LYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Assoc Dir Actuarial Servic
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119486423217
 Amount of Each Receipt this Period 195.00
 Memo Item
 15

B. PITTMAN, AUSTIN T, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Chief Growth Officer
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3645.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119486723217
 Amount of Each Receipt this Period 1755.00
 Memo Item
 15

C. POLICH, CYNTHIA L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Chief Strategy Officer
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119486823217
 Amount of Each Receipt this Period 1300.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	3250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. RICCIUTI, SHARON A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir Clinical Quality
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119487923217
 Amount of Each Receipt this Period 260.00
 Memo Item
 15

B. ROGERS, DEBBIE E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Sr Project Manager I
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119488623217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

C. SCACCIA, CAROL A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** KA New Bus Coord - PAC
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119489323217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	520.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. SING, MARTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir Customer Service
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119490123217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

B. STETTLER, RONALD R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir Healthcare Econ
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119490423217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

C. STYERS, MARILYNN D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119490723217
 Amount of Each Receipt this Period 260.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional)..... ▶ 520.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. TANIGAWA, CHERYL, , MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Natl Medical Director/CMC
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119491123217
 Amount of Each Receipt this Period 650.00
 Memo Item
 15

B. TEYLAN, MARY R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Sr Accounting Consultant
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119491423217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

C. THOMSON, CHERYL A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Assoc Dir Compliance
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119491623217
 Amount of Each Receipt this Period 195.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	975.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. TUCKER, STEVEN M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP Regulatory Affairs
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2592.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119492023217
 Amount of Each Receipt this Period 1248.00
 Memo Item
 15

B. VANASTEN, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Site Dir Medicare Inside S
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1080.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119492623217
 Amount of Each Receipt this Period 520.00
 Memo Item
 15

C. WESTPHAL, SCOTT B, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir Actuarial Services
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 311.58

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119493223217
 Amount of Each Receipt this Period 150.02
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	1918.02
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. DAUGHERTY, LINDA D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Associate General Counsr**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119493523217
 Amount of Each Receipt this Period 260.00
 Memo Item
 15

B. WOLFE, LORI S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Mgr Claims**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119493723217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

C. WRIGHT, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Dir General Management**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119494123217
 Amount of Each Receipt this Period 325.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....▶	715.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 80 OF 174
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. YOUNG, GEORGE M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Executive Director
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119494423217
 Amount of Each Receipt this Period 195.00
 Memo Item
 15

B. YOUNG, STEVEN C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** SB GA Account Exec
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2119494523217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

C. BURKE, FORREST G, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** President PS Labor & Tru:
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2133132423217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	455.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 81 OF 174
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. COLEMAN, WILLIAM R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Assoc Dir Network A&R
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2133132523217
 Amount of Each Receipt this Period 156.00
 Memo Item
 15

B. CUMMINGS, DANIEL M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir Finance
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2133132623217
 Amount of Each Receipt this Period 195.00
 Memo Item
 15

C. HANSON, CHARLES W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP Underwriting
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1393.74

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2133133123217
 Amount of Each Receipt this Period 671.06
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....▶ 1022.06
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 82 OF 174
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. HULTGREN, BROR O, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Regional Executive
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1038.42

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2133133223217
 Amount of Each Receipt this Period 499.98
 Memo Item
 15

B. MAGILL HANSON, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir Product
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 519.21

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2133133523217
 Amount of Each Receipt this Period 249.99
 Memo Item
 15

C. MILLER, ALLEN D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Regional Executive
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 945.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2133133623217
 Amount of Each Receipt this Period 455.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	1204.97
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. MORISATO, SUSAN C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP Federal Prog-UHG Alli
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4050.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2133133823217
 Amount of Each Receipt this Period 1950.00
 Memo Item
 15

B. NETTLETON, KIMBERLY ALLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir General Management
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2133133923217
 Amount of Each Receipt this Period 195.00
 Memo Item
 15

C. PUTNAM, T JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** SVP Financial Plng & Ana
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4999.80

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2133134223217
 Amount of Each Receipt this Period 2307.60
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional)..... ▶ 4452.60
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 84 OF 174
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. SCHIMMELBUSCH, DIANE M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Dir Medical & Clinical Ops**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2133134623217
 Amount of Each Receipt this Period 325.00
 Memo Item
 15

B. SHIELS, ANITA W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Dir General Management**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2133134723217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

C. TRIVEDI, AMIT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Dir Underwriting**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 519.21

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2133134823217
 Amount of Each Receipt this Period 249.99
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....▶	704.99
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. BARNOWSKI, CYNTHIA A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 601.95

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2145728123217
 Amount of Each Receipt this Period 260.00
 Memo Item
 15

B. COLE, DANIEL M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Chief of Staff
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2145728323217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

C. FALKENBERG, ROBERT C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Health Plan CEO
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1038.42

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2145728423217
 Amount of Each Receipt this Period 499.98
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	889.98
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. FARAHANI, ROB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir IT
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1038.42

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2009
Transaction ID : PR2145728523217
 Amount of Each Receipt this Period
 499.98
 Memo Item
 15

B. HARR, JEFFREY A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir Sales Ops
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.63

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2009
Transaction ID : PR2145728623217
 Amount of Each Receipt this Period
 99.97
 Memo Item
 15

C. KIDD, CARL T, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir Client Svc Acct Mgt
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 778.95

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2009
Transaction ID : PR2145728823217
 Amount of Each Receipt this Period
 375.05
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....▶	975.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 87 OF 174
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. LINDIMORE, NANCY E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** KA Dir Acct Mgmt
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2145728923217
 Amount of Each Receipt this Period 260.00
 Memo Item
 15

B. LUBY, DAVID S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** KA VP Sales and Account
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.63

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2145729023217
 Amount of Each Receipt this Period 99.97
 Memo Item
 15

C. MICKLE, WILLIAM Y, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP General Management
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 343.84

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2145729123217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	489.97
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. MILLER, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP Client Svc Acct Mgt
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 645.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR214572923217
 Amount of Each Receipt this Period 260.00
 Memo Item
 15

B. RUMMEL, LEAH C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir Govt Rel
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2145729523217
 Amount of Each Receipt this Period 195.00
 Memo Item
 15

C. SCHWARZ, MICHAEL P, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir IT
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 945.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2145729723217
 Amount of Each Receipt this Period 455.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	910.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. SMITH, DANNETTE L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Sr Deputy General Couns
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3115.26

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2145729923217
 Amount of Each Receipt this Period 1499.94
 Memo Item
 15

B. SMITH, RANDALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Plan President
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 311.58

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2145730023217
 Amount of Each Receipt this Period 150.02
 Memo Item
 15

C. WEAR, MARGARET W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP Actuarial Services
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2145730223217
 Amount of Each Receipt this Period 650.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional)..... ▶ 2299.96
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. DAVIDSON, ARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Dir Marketing Bus Dev**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 384.60

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2162867023217
 Amount of Each Receipt this Period 249.99
 Memo Item
 15

B. SPIVACK, DAVID A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Business Segment CFO**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3269.10

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2162867623217
 Amount of Each Receipt this Period 2499.90
 Memo Item
 15

C. LEWIS, KURT C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C KA VP Sales and Account**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 311.58

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2203967523217
 Amount of Each Receipt this Period 150.02
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	2899.91
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 91 OF 174
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. GIBSON, CHRISTINE W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Market Grp Chief Mktg Off
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3115.26

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2225166723217
 Amount of Each Receipt this Period 1499.94
 Memo Item
 15

B. SLAVITT, ANDREW M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Business Segment CEO
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4986.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2225167423217
 Amount of Each Receipt this Period 3601.00
 Memo Item
 15

C. BEAULE, JEAN-FRANCOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP Actuarial Services
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1557.90

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2225813623217
 Amount of Each Receipt this Period 750.10
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional)..... ▶ 5851.04
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. HARRIS, DANIEL M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir Actuarial Services
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 519.21

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2225817523217
 Amount of Each Receipt this Period 249.99
 Memo Item
 15

B. MACK, NANCY S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir IT Project Mgmt
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 394.50

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2225818423217
 Amount of Each Receipt this Period 195.00
 Memo Item
 15

C. MARTEL, CHARLES W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir IT
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2225818623217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....▶	574.99
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. MCGUIRE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Health Plan CEO
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 917.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2225818823217
 Amount of Each Receipt this Period 260.00
 Memo Item
 15

B. RANGEN, ERIC S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** SVP Chief Accounting Off
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4999.80

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2225819323217
 Amount of Each Receipt this Period 2307.60
 Memo Item
 15

C. RYAN, JOHN D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** RVP Client Mgmt & Svc
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1038.42

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2225819623217
 Amount of Each Receipt this Period 499.98
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	3067.58
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. SAILOR, ROY T, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Dir General Management**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2076.84

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2225819723217
 Amount of Each Receipt this Period 999.96
 Memo Item
 15

B. DIPALMO, KAREN A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Dir Network Programs**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 810.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2231347223217
 Amount of Each Receipt this Period 390.00
 Memo Item
 15

C. DROZDA, JEFFERY A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Govt Rel Assoc Dir**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2231347423217
 Amount of Each Receipt this Period 520.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	1909.96
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. FOWLER, SUSAN A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP UHO Sales
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2231349723217
 Amount of Each Receipt this Period 195.00
 Memo Item
 15

B. HAMPTON, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Govt Rel Dir
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 217.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2231350523217
 Amount of Each Receipt this Period 50.05
 Memo Item
 15

C. HANNA, KASIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Sr IT Project Cnsltnt
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2231350623217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	375.05
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 96 OF 174
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. HAYS, MARGARET C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Dir Claims**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2231350723217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

B. METHENY, KIP J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Spvsr Claims**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2231351423217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

C. MOORE, PAMELA ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Mgr Facilities**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 267.30

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2231351723217
 Amount of Each Receipt this Period 128.70
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	388.70
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. MUDGETT, DONALD M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Assoc Dir General Manag
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2231351923217
 Amount of Each Receipt this Period 260.00
 Memo Item
 15

B. PEARSON, ANDREW L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Mgr IT
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2231352023217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

C. PHELPS, JILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Sr IT Business Analyst
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2231352123217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	520.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
RICHEY, DARRELL S, , ,

Mailing Address **9900 Bren Road East**

City Minnetonka	State MN	Zip Code 55343-9664
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C Deputy General Counsel (**

Name of Employer (for Individual) Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2160.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2009

Transaction ID : PR2231352323217

Amount of Each Receipt this Period

1040.00

Memo Item
15

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SELF, JANET SUE, , ,

Mailing Address **9900 Bren Road East**

City Minnetonka	State MN	Zip Code 55343-9664
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C Dir Actuarial Services**

Name of Employer (for Individual) Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **405.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2009

Transaction ID : PR2231352423217

Amount of Each Receipt this Period

195.00

Memo Item
15

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SNIVELY, AMANDA JANE, , ,

Mailing Address **9900 Bren Road East**

City Minnetonka	State MN	Zip Code 55343-9664
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2009

Transaction ID : PR2231352523217

Amount of Each Receipt this Period

130.00

Memo Item
15

SUBTOTAL of Receipts This Page (optional).....	1365.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 99 OF 174
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. CONNLY, MICHAEL R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Chief Technology Officer
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1080.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2247625823217
 Amount of Each Receipt this Period 520.00
 Memo Item
 15

B. COTHRAN, TERRY J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Mgr Pharmacy Ops
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.63

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2247625923217
 Amount of Each Receipt this Period 99.97
 Memo Item
 15

C. GREENE, ANDREA M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir General Management
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2247626023217
 Amount of Each Receipt this Period 195.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	814.97
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. KERR, CAROLYN B, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Govt Rel Dir
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 594.61

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2247626223217
 Amount of Each Receipt this Period 299.00
 Memo Item
 15

B. RAO, SHANKAR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir IT
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 259.47

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2247626323217
 Amount of Each Receipt this Period 124.93
 Memo Item
 15

C. RUDDOCK, JOYCE M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2247626423217
 Amount of Each Receipt this Period 650.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....▶ 1073.93
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. CARCIONE JR, JOSEPH R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Medical Director
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1557.90

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2247626823217
 Amount of Each Receipt this Period 750.10
 Memo Item
 15

B. KANTOLA, KEVIN DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir IT Project Mgmt
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2247627023217
 Amount of Each Receipt this Period 325.00
 Memo Item
 15

C. O'BRIEN, DENNIS P, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** RVP Network Mgmt
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1557.90

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2247627323217
 Amount of Each Receipt this Period 750.10
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....▶	1825.20
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 102 OF 174
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. VERNEY, JEFFERY RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP General Management
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1557.90

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2247627423217
 Amount of Each Receipt this Period 750.10
 Memo Item
 15

B. BROOKS, DARRELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP Information Technolog
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1557.90

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2247627623217
 Amount of Each Receipt this Period 750.10
 Memo Item
 15

C. GARODIA, SANJAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** COO
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 999.96

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2247627823217
 Amount of Each Receipt this Period 461.52
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	1961.72
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. KOSECOFF, JACQUELINE B, , ,

Mailing Address 9900 Bren Road East

City Minnetonka	State MN	Zip Code 55343-9664
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** Business Segment CEO

Name of Employer (for Individual) Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4999.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2009

Transaction ID : PR2247627923217

Amount of Each Receipt this Period
2307.60

Memo Item
15

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. OHMAN, DANIEL L, , ,

Mailing Address 9900 Bren Road East

City Minnetonka	State MN	Zip Code 55343-9664
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
726.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2009

Transaction ID : PR2247628023217

Amount of Each Receipt this Period
349.96

Memo Item
15

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CRUMBAUGH, JEFFREY J, , ,

Mailing Address 9900 Bren Road East

City Minnetonka	State MN	Zip Code 55343-9664
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** Mgr Medicare Sales

Name of Employer (for Individual) Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
207.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2009

Transaction ID : PR2259635223217

Amount of Each Receipt this Period
99.97

Memo Item
15

SUBTOTAL of Receipts This Page (optional).....▶	2757.53
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. PRINCE, JOHN M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Business Segment COO
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1080.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2259738423217
 Amount of Each Receipt this Period 520.00
 Memo Item
 15

B. SIGGETT, DAWN M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Govt Rel Dir
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2270335123217
 Amount of Each Receipt this Period 260.00
 Memo Item
 15

C. CRONN, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Govt Rel Dir
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1038.42

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2270522923217
 Amount of Each Receipt this Period 499.98
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	1279.98
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. FINNERTY, KAREN R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir Sales Ops
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2270546623217
 Amount of Each Receipt this Period 130.00
 Memo Item
 15

B. LAVERDIERE, JILL E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** SB Dir Account Mgmt
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2270546723217
 Amount of Each Receipt this Period 90.00
 Memo Item
 15

C. MYERS, WILLIAM F, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Govt Rel Dir
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1080.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2359784123217
 Amount of Each Receipt this Period 520.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	740.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 106 OF 174
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. STEVENS, SIMON L, , ,

Mailing Address 9900 Bren Road East

City Minnetonka State MN Zip Code 55343-9664

FEC ID number of contributing federal political committee. **C** EVP UnitedHealth Group

Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4999.80

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2364863223217

Amount of Each Receipt this Period 2307.60

Memo Item
15

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. THOMPSON, THELMA L, , ,

Mailing Address 9900 Bren Road East

City Minnetonka State MN Zip Code 55343-9664

FEC ID number of contributing federal political committee. **C** Govt Rel Assoc Dir

Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2364863323217

Amount of Each Receipt this Period 130.00

Memo Item
15

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. ALTER, JEFFREY D, , ,

Mailing Address 9900 Bren Road East

City Minnetonka State MN Zip Code 55343-9664

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

Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ 295.80

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2402315223217

Amount of Each Receipt this Period 192.27

Memo Item
15

SUBTOTAL of Receipts This Page (optional).....▶ 2629.87

TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. DANIEL, JANI H, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Assoc Dir General Manag
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2402315823217
 Amount of Each Receipt this Period 325.00
 Memo Item
 15

B. DE SA, JEANNE M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Govt Rel Dir
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2402315923217
 Amount of Each Receipt this Period 650.00
 Memo Item
 15

C. GROENE, CYNTHIA J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Govt Rel Assoc Dir
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2402316723217
 Amount of Each Receipt this Period 325.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....▶ 1300.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. HARRELL, LISA M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2009
Transaction ID : PR2402316923217
 Amount of Each Receipt this Period
 325.00
 Memo Item
 15

B. HENDERSON, SCOTT E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Govt Rel Dir
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2009
Transaction ID : PR2402317023217
 Amount of Each Receipt this Period
 455.00
 Memo Item
 15

C. HUMPHREY, INGRID K, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir Marketing
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2009
Transaction ID : PR2402317223217
 Amount of Each Receipt this Period
 325.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....▶	1105.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. KEPLEY CARRIER, ANGELA DAWN, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2009
Mailing Address 9900 Bren Road East		Transaction ID : PR2402317723217
City Minnetonka	State MN	Zip Code 55343-9664
FEC ID number of contributing federal political committee. C Assoc Dir Case Mgmt		Amount of Each Receipt this Period 260.00
Name of Employer (for Individual)	Occupation (for Individual) UnitedHealth Group, Inc.	<input type="checkbox"/> Memo Item 15
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. LEVI-BAUMGARTEN, MARILYN, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2009
Mailing Address 9900 Bren Road East		Transaction ID : PR2402317923217
City Minnetonka	State MN	Zip Code 55343-9664
FEC ID number of contributing federal political committee. C Dir Network Programs		Amount of Each Receipt this Period 260.00
Name of Employer (for Individual)	Occupation (for Individual) UnitedHealth Group, Inc.	<input type="checkbox"/> Memo Item 15
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. LOGAN, JAKE, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2009
Mailing Address 9900 Bren Road East		Transaction ID : PR2402318223217
City Minnetonka	State MN	Zip Code 55343-9664
FEC ID number of contributing federal political committee. C Govt Rel Dir		Amount of Each Receipt this Period 325.00
Name of Employer (for Individual)	Occupation (for Individual) UnitedHealth Group, Inc.	<input type="checkbox"/> Memo Item 15
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....	845.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. MCCAULEY, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Sr Project Manager II
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2009
Transaction ID : PR2402318423217
 Amount of Each Receipt this Period 260.00
 Memo Item
 15

B. RIVERS, JILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Managing Dir HHS Consu
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2009
Transaction ID : PR2402319523217
 Amount of Each Receipt this Period 325.00
 Memo Item
 15

C. SOUZA, DIANE D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** CEO Specialty Benefits
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4999.90

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2009
Transaction ID : PR2402320023217
 Amount of Each Receipt this Period 0.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	585.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. SWEERE, LORI K, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** EVP Human Capital
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2009
Transaction ID : PR2402320223217
 Amount of Each Receipt this Period 455.00
 Memo Item
 15

B. TUFTE, MYLYNN K, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir Medical & Clinical Ops
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2009
Transaction ID : PR2402320323217
 Amount of Each Receipt this Period 520.00
 Memo Item
 15

C. WARREN, KELLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Dir Bus Dvlp
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2009
Transaction ID : PR2402320523217
 Amount of Each Receipt this Period 325.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. CRANLEY, SHELLEY WIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Director Regulatory Affairs
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1900.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR240244423217
 Amount of Each Receipt this Period 1300.00
 Memo Item
 15

B. ANLIKER, JAY M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** CEO TPA
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2402445023217
 Amount of Each Receipt this Period 260.00
 Memo Item
 15

C. COLEMAN, JAMES C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP Employee Relations
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2402445223217
 Amount of Each Receipt this Period 260.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional)..... ▶ 1820.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 113 OF 174
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. DONOVAN, JAMES D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C SVP Bus Dev and Marketi**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1170.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2402445323217
 Amount of Each Receipt this Period 845.00
 Memo Item
 15

B. LARSEN, JOHN L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C President Evercare**
 Name of Employer (for Individual) Occupation (for Individual) AmeriChoice
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2402445623217
 Amount of Each Receipt this Period 325.00
 Memo Item
 15

C. RIOS, KARA J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C Business Segment CFO**
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4986.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2402445723217
 Amount of Each Receipt this Period 3601.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....▶	4771.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. HIGA, JOY O, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Govt Rel Dir
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2402446223217
 Amount of Each Receipt this Period 390.00
 Memo Item
 15

B. JINDAL, SOHINI G, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Govt Rel Dir
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2402446323217
 Amount of Each Receipt this Period 764.68
 Memo Item
 15

C. PETRELLA, RUSSELL C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** President Americhoice
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1445.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2402446423217
 Amount of Each Receipt this Period 1105.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional)..... ▶ 2259.68
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. THORNHILL, JOELLE OISHI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Govt Rel Dir
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2402446523217
 Amount of Each Receipt this Period 764.68
 Memo Item
 15

B. ALEXANDER, CORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP Gov't Relations
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3076.80

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2405428823217
 Amount of Each Receipt this Period 2499.90
 Memo Item
 15

C. STEVENS, JOSEPH R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Govt Rel Dir
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2405429123217
 Amount of Each Receipt this Period 799.99
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	4064.57
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 116 OF 174
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. ARMSTEAD, RODNEY CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** VP Operations
 Name of Employer (for Individual) Occupation (for Individual) AmeriChoice
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2405430223217
 Amount of Each Receipt this Period 520.00
 Memo Item
 15

B. BRACH, KAREN E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2408544523217
 Amount of Each Receipt this Period 250.00
 Memo Item
 15

C. ELLISON, NANCY M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Manager
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2408544623217
 Amount of Each Receipt this Period 500.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	1270.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 117 OF 174
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SAELENS, KAREN ANN, , ,

Mailing Address 9900 Bren Road East

City Minnetonka	State MN	Zip Code 55343-9664
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2009

Transaction ID : PR2408544823217

Amount of Each Receipt this Period
240.00

Memo Item
15

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. WALSH, CHRISTOPHER J, , ,

Mailing Address 9900 Bren Road East

City Minnetonka	State MN	Zip Code 55343-9664
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2009

Transaction ID : PR2408544923217

Amount of Each Receipt this Period
500.00

Memo Item
15

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. WEE, KATHLYN G, , ,

Mailing Address 9900 Bren Road East

City Minnetonka	State MN	Zip Code 55343-9664
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2009

Transaction ID : PR2408545023217

Amount of Each Receipt this Period
240.00

Memo Item
15

SUBTOTAL of Receipts This Page (optional).....	980.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. KOZIARA BOUDREAU, GAIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Manager
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4999.90

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2437119523217
 Amount of Each Receipt this Period 4999.90
 Memo Item
 15

B. HAGAN, WILLIAM A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Manager
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4999.90

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2437120023217
 Amount of Each Receipt this Period 4999.90
 Memo Item
 15

C. YALE, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Manager
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2437120623217
 Amount of Each Receipt this Period 280.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	10279.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. BALTHAZOR, PAUL JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Manager
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2009
Transaction ID : PR2437120723217
 Amount of Each Receipt this Period
 1500.00
 Memo Item
 15

B. ZAMOFF, MITCHELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Manager
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2009
Transaction ID : PR2437121123217
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 15

C. PRESTON, ROBERT S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Manager
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2009
Transaction ID : PR2437121423217
 Amount of Each Receipt this Period
 500.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	4500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 174
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. COSGRIFF, JOHN W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C** Manager
 Name of Employer (for Individual) Occupation (for Individual) UnitedHealth Group, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2437121623217
 Amount of Each Receipt this Period 250.00
 Memo Item
 15

B. BLANK, JOHN P, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2437126923217
 Amount of Each Receipt this Period 1000.00
 Memo Item
 15

C. RAINEY, PETER W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 31 / 2009
Transaction ID : PR2437127523217
 Amount of Each Receipt this Period 1000.00
 Memo Item
 15

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	193111.30

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

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

FOR LINE NUMBER: PAGE 121 OF 174
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. United for Health PAC of Illinois
 Mailing Address 9900 Bren Road East
 City Minnetonka State MN Zip Code 55343-9664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 190.06

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2009
Transaction ID : 31060220
 Amount of Each Receipt this Period
 190.06
 Memo Item
 18U

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B.
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C.
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	190.06
TOTAL This Period (last page this line number only).....▶	190.06

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 122 OF 174
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. Friends of Roger Kahn for Senate

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9900 Bren Road East

City Minnetonka	State MN	Zip Code 55343-9664
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2009

Transaction ID : 31060219

Amount of Each Receipt this Period

600.00

Memo Item
17U

B. Salazar For Senate

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9900 Bren Road East

City Minnetonka	State MN	Zip Code 55343-9664
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** Salazar For Senate

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2009

Transaction ID : 31060223

Amount of Each Receipt this Period

3000.00

Memo Item
17Z

C.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

--

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	3600.00
TOTAL This Period (last page this line number only).....▶	3600.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Friends of Blanche Lincoln

Mailing Address P.O. Box 77572

City
Washington

State
DC

Zip Code
20013

Purpose of Disbursement

Re-elec

Candidate Name

, Lincoln, Blanche Lambert, ,

Office Sought: House
 Senate
 President

Disbursement For: 2010

Primary General
 Other (specify) ▼

State: S District: AR

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	0	9

FEC Identification Number

C 011

Transaction ID : 30182475

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Mike Crapo For Us Senate

Mailing Address P.O. Box 1948

City
Boise

State
ID

Zip Code
83701

Purpose of Disbursement

Re-elec

Candidate Name

S8ID00027, Crapo, Mike, , Sen.

Office Sought: House
 Senate
 President

Disbursement For: 2010

Primary General
 Other (specify)

State: S District: ID

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	0	9

FEC Identification Number

C 011

Transaction ID : 30182476

Amount of Each Disbursement this Period

3500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Alamo PAC

Mailing Address 919 Congress Ave
Suite 1400

City
Austin

State
TX

Zip Code
78701

Purpose of Disbursement

Political

Candidate Name

C00387464

Office Sought: House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	0	9

FEC Identification Number

C 011

Transaction ID : 30182478

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

5500.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. New Democrat Coalition Political Action Committee

Mailing Address 607 14th Street NW Suite 800

City
Washington

State
DC

Zip Code
20005

Purpose of Disbursement

Political

Candidate Name

C00409730

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 08 / 2009

FEC Identification Number

C 011

Transaction ID : 30182985

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Friends Of John Barrow

Mailing Address PO Box 8166

City
Savannah

State
GA

Zip Code
31412

Purpose of Disbursement

Category/
Type

Candidate Name

H4GA12010, Barrow, John, , Rep.

Office Sought:

House
 Senate
 President

Disbursement For: 2010

Primary General
 Other (specify)

State: H

District: GA

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 17 / 2009

FEC Identification Number

C 011

Transaction ID : 30264435

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Charles Boustany Jr. Md For Congress, Inc.

Mailing Address PO Box 80126

City
Lafayette

State
LA

Zip Code
70598

Purpose of Disbursement

Re-elct

Candidate Name

H4LA07029, Boustany, Charles, W., Rep.

Office Sought:

House
 Senate
 President

Disbursement For: 2010

Primary General
 Other (specify) ▼

State: H

District: LA

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 22 / 2009

FEC Identification Number

C 011

Transaction ID : 30302976

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

8500.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Senate Majority Fund

Mailing Address P.O. Box 32025

City
Phoenix

State
AZ

Zip Code
85064

Purpose of Disbursement

Leaders

Candidate Name

C00368431

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	2			2	0	0	9		

FEC Identification Number

C 011

Transaction ID : 30302980

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Hoyer For Congress

Mailing Address 607 14th Street, Nw
Suite 800

City
Washington

State
DC

Zip Code
20005

Purpose of Disbursement

Re-elec

Candidate Name

H2MD05155, Hoyer, Steny, H., Rep.

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For: 2010

 Primary General
 Other (specify) ▼

State: H

District: MD

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	2			2	0	0	9		

FEC Identification Number

C 011

Transaction ID : 30302984

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Hoyer For Congress

Mailing Address 607 14th Street, Nw
Suite 800

City
Washington

State
DC

Zip Code
20005

Purpose of Disbursement

Re-elec

Candidate Name

H2MD05155, Hoyer, Steny, H., Rep.

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For: 2010

 Primary General
 Other (specify) ▼

State: H

District: MD

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	2			2	0	0	9		

FEC Identification Number

C 011

Transaction ID : 30302990

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

4500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Griffith For Congress

Mailing Address Post Office Box 2916

City
Huntsville

State
AL

Zip Code
35804

Purpose of Disbursement

Re-elec

Candidate Name

H8AL05109, Griffith, Parker, , Rep.

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For: 2010

Primary General
 Other (specify) ▼

State: H

District: AL

Date of Disbursement

MM / DD / YYYY
07 / 22 / 2009

FEC Identification Number

C 011

Transaction ID : 30303008

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Earl Pomeroy for Congress

Mailing Address P.O. Box 75214

City
Washington

State
DC

Zip Code
20013-5214

Purpose of Disbursement

Re-elec

Candidate Name

, Pomeroy, Earl, ,

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For: 2010

Primary General
 Other (specify)

State: H

District: ND

Date of Disbursement

MM / DD / YYYY
07 / 22 / 2009

FEC Identification Number

C 011

Transaction ID : 30303031

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Feinstein For Senate

Mailing Address 1212 S Victory Blvd

City
Burbank

State
CA

Zip Code
91502

Purpose of Disbursement

Re-elec

Candidate Name

S0CA00199, Feinstein, Dianne, , Sen.

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For: 2012

Primary General
 Other (specify) ▼

State: S

District: CA

Date of Disbursement

MM / DD / YYYY
07 / 22 / 2009

FEC Identification Number

C 011

Transaction ID : 30303057

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Narragansett Bay PAC

Mailing Address PO Box 8628

City
Cranston

State
RI

Zip Code
02920

Purpose of Disbursement

Leaders

Candidate Name

C00403592

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 22 / 2009

FEC Identification Number

C 011

Transaction ID : 30303162

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Hatch Election Committee

Mailing Address 555 13th Street NW
Suite 600 East

City
Washington

State
DC

Zip Code
20004-1109

Purpose of Disbursement

Re-elec

Candidate Name

, Hatch, Orrin G., ,

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For: 2012

Primary General
 Other (specify) ▼

State: S

District: UT

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 28 / 2009

FEC Identification Number

C 011

Transaction ID : 30329612

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. The Grassley Committee, Inc.

Mailing Address P.O. Box 6193

City
Alexandria

State
VA

Zip Code
22306-0193

Purpose of Disbursement

Re-elec

Candidate Name

, Grassley, Charles E., ,

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For: 2010

Primary General
 Other (specify) ▼

State: S

District: IA

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 28 / 2009

FEC Identification Number

C 011

Transaction ID : 30329613

Amount of Each Disbursement this Period

2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

5000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Friends Of Byron Dorgan

Mailing Address PO Box 871

City
Bismarck

State
ND

Zip Code
58502

Purpose of Disbursement

Re-Elec

Candidate Name

S2ND00040, Dorgan, Byron, L., Sen.

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2010

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: S

District: ND

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	28	/	2009

FEC Identification Number

C 011

Transaction ID : 30329614

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Pat Roberts Victory Committee

Mailing Address 610 S. Boulevard St

City
Tampa

State
FL

Zip Code
33606

Purpose of Disbursement

Joint Fl

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	28	/	2009

FEC Identification Number

C 011

Transaction ID : 30329615

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Klobuchar For Minnesota 2012

Mailing Address PO Box 4146

City
St Paul

State
MN

Zip Code
55104

Purpose of Disbursement

Re-elec

Candidate Name

S6MN00267, Klobuchar, Amy, , Sen.

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2012

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: S

District: MN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	29	/	2009

FEC Identification Number

C 011

Transaction ID : 30329624

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

6500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Richard Burr Committee

Mailing Address P.O. Box 5928

City
Winston-Salem

State
NC

Zip Code
27113

Purpose of Disbursement

Re-elec

Candidate Name

, Burr, Richard M., ,

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For: 2010

 Primary General
 Other (specify) ▼

State: H

District: NC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	0	9

FEC Identification Number

C 011

Transaction ID : 30329625

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. JAZZ PAC

Mailing Address 10 G Street, NE
Suite 470

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement

Leaders

Candidate Name

C00405290

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	0	9

FEC Identification Number

C 011

Transaction ID : 30329627

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Friends Of Roger Wicker

Mailing Address P.O. Box 874

City
Tupelo

State
MS

Zip Code
38802

Purpose of Disbursement

Re-elec

Candidate Name

H4MS01078, Wicker, Roger, F., Rep.

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For: 2014

 Primary General
 Other (specify) ▼

State: H

District: MS

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	0	9

FEC Identification Number

C 011

Transaction ID : 30329629

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Senate Majority Fund

Mailing Address P.O. Box 32025

City
Phoenix

State
AZ

Zip Code
85064

Purpose of Disbursement

Leaders

Candidate Name

C00368431

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 29 / 2009

FEC Identification Number

C 011

Transaction ID : 30329630

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Impact

Mailing Address 509 Madison Ave.
Suite 1902

City
New York

State
NY

Zip Code
10022

Purpose of Disbursement

Leaders

Candidate Name

C00348607

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 29 / 2009

FEC Identification Number

C 011

Transaction ID : 30329631

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Georgians for Isakson

Mailing Address Post Office Box 71955

City
Marietta

State
GA

Zip Code
30007

Purpose of Disbursement

Re-elec

Candidate Name

, Isakson, Johnny, ,

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For: 2010

Primary General
 Other (specify) ▼

State: S

District: GA

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 29 / 2009

FEC Identification Number

C 011

Transaction ID : 30329638

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

7000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Frank Kratovil For Congress

Mailing Address 222 Main Sail Drive
PO Box 518

City
Stevensville

State
MD

Zip Code
21666

Purpose of Disbursement

Re-elec

Candidate Name

H8MD01086, Kratovil, Frank, M., Rep.

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For: 2010

Primary General
 Other (specify) ▼

State: H District: MD

Date of Disbursement

MM / DD / YYYY
07 / 29 / 2009

FEC Identification Number

C 011

Transaction ID : 30329651

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. All America PAC

Mailing Address 607 14th Street NW
Suite 800

City
Washington

State
DC

Zip Code
20005

Purpose of Disbursement

Leaders

Candidate Name

C00344788

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 29 / 2009

FEC Identification Number

C 011

Transaction ID : 30329652

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Wyoming Values PAC

Mailing Address 406 Virginia Avenue

City
Alexandria

State
VA

Zip Code
22302

Purpose of Disbursement

Leaders

Candidate Name

C00442368

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 29 / 2009

FEC Identification Number

C 011

Transaction ID : 30329657

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

7000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Glacier PAC

Mailing Address 818 Connecticut Ave. NW
Suite 1100

City
Washington

State
DC

Zip Code
20006

Purpose of Disbursement

Void - C

Candidate Name
C00353953

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	0	9

FEC Identification Number

C 011

Transaction ID : 30335958

Amount of Each Disbursement this Period

- 500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Georgians for Isakson

Mailing Address Post Office Box 71955

City
Marietta

State
GA

Zip Code
30007

Purpose of Disbursement

Re-elec

Candidate Name
, Isakson, Johnny, ,

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify)

State: S District: GA

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	6		2	0	0	9

FEC Identification Number

C 011

Transaction ID : 30347118

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Clarke For Congress

Mailing Address 111-36 200th. Street

City
Hollis

State
NY

Zip Code
11412

Purpose of Disbursement

Re-elec

Candidate Name
H4NY11138, Clarke, Yvette, D., Rep.

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: H District: NY

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	5		2	0	0	9

FEC Identification Number

C 011

Transaction ID : 30453279

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

- 3500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Gillibrand For Senate

Mailing Address 313 C Street Ne

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement

Re-elec

Candidate Name

SONY00410, Gillibrand, Kirsten, , Rep.

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For: 2010

 Primary General
 Other (specify) ▼

State: H

District: NY

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	5		2	0	0	9

FEC Identification Number

C 011

Transaction ID : 30453379

Amount of Each Disbursement this Period

3500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Leadership in the New Century (LINCPAC)

Mailing Address 124 West Capitol Avenue
Suite 630

City
Little Rock

State
AR

Zip Code
72201

Purpose of Disbursement

Category/
Type

Candidate Name

C00366179

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	5		2	0	0	9

FEC Identification Number

C 011

Transaction ID : 30453707

Amount of Each Disbursement this Period

4500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Mike Ross for Congress

Mailing Address 227 Massachusetts Ave N.E.
Ste 101

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement

Re-elec

Candidate Name

, Ross, Michael Avery, ,

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For: 2010

 Primary General
 Other (specify) ▼

State: H

District: AR

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	1		2	0	0	9

FEC Identification Number

C 011

Transaction ID : 30470211

Amount of Each Disbursement this Period

1500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

9500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Boyd For Congress

Mailing Address P.O. Box 15703

City
Tallahassee

State
FL

Zip Code
32317

Purpose of Disbursement

Re-elec

Candidate Name

H6FL00046, Boyd, Allen, , Rep.

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For: 2010

Primary General
 Other (specify) ▼

State: H District: FL

Date of Disbursement

MM / DD / YYYY
09 / 01 / 2009

FEC Identification Number

C 011

Transaction ID : 30470225

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Friends For Gregory Meeks

Mailing Address 153-01 Jamaica Ave. Suite 535

City
Jamaica

State
NY

Zip Code
11432

Purpose of Disbursement

Re-elec

Candidate Name

H8NY06048, Meeks, Gregory, W., Rep.

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For: 2010

Primary General
 Other (specify)

State: H District: NY

Date of Disbursement

MM / DD / YYYY
09 / 01 / 2009

FEC Identification Number

C 011

Transaction ID : 30470342

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Earl Pomeroy for Congress

Mailing Address P.O. Box 75214

City
Washington

State
DC

Zip Code
20013-5214

Purpose of Disbursement

Re-elec

Candidate Name

, Pomeroy, Earl, ,

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For: 2010

Primary General
 Other (specify) ▼

State: H District: ND

Date of Disbursement

MM / DD / YYYY
09 / 17 / 2009

FEC Identification Number

C 011

Transaction ID : 30582902

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

4500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Ike Skelton For Congress Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		17		2009

Mailing Address P.O. Box A

City Harrisonville State MO Zip Code 64701

FEC Identification Number

C	011
---	-----

Transaction ID : 30584081

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

Re-elec

Category/
Type

Candidate Name

H6MO04141, Skelton, Ike, , Rep.

Office Sought: House Senate President

Disbursement For: 2010

Primary General Other (specify) ▼

State: H District: MO

Memo Item

Full Name (Last, First, Middle Initial)

B. Bennet For Colorado

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		17		2009

Mailing Address PO Box 3078

City Denver State CO Zip Code 80201

FEC Identification Number

C	011
---	-----

Transaction ID : 30585866

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

Re-elec

Category/
Type

Candidate Name

SOCO00211, Bennet, Michael, , Mr.

Office Sought: House Senate President

Disbursement For: 2010

Primary General Other (specify) ▼

State: S District: CO

Memo Item

Full Name (Last, First, Middle Initial)

C. Wally Herger For Congress Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		17		2009

Mailing Address PO Box 1007

City Willows State CA Zip Code 95988

FEC Identification Number

C	011
---	-----

Transaction ID : 30586732

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

Re-elec

Category/
Type

Candidate Name

H6CA02010, Herger, Wally, , Rep.

Office Sought: House Senate President

Disbursement For: 2010

Primary General Other (specify) ▼

State: H District: CA

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3000.00

--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. The Freedom Project

Mailing Address 111 C Street SE

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement

PAC

Category/
Type

Candidate Name

C00305805

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY
09 / 17 / 2009

FEC Identification Number

C 011

Transaction ID : 30586860

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Chris Lee For Congress

Mailing Address PO Box 15395

City
Rochester

State
NY

Zip Code
14615

Purpose of Disbursement

Re-elec

Category/
Type

Candidate Name

H8NY26095, Lee, Christopher, , Mr.

Office Sought:

House
 Senate
 President

Disbursement For: 2010

Primary General
 Other (specify)

State: H

District: NY

Date of Disbursement

MM / DD / YYYY
09 / 17 / 2009

FEC Identification Number

C 011

Transaction ID : 30586971

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Charles Boustany Jr. Md For Congress, Inc.

Mailing Address PO Box 80126

City
Lafayette

State
LA

Zip Code
70598

Purpose of Disbursement

Re-elec

Category/
Type

Candidate Name

H4LA07029, Boustany, Charles, W., Rep.

Office Sought:

House
 Senate
 President

Disbursement For: 2010

Primary General
 Other (specify) ▼

State: H

District: LA

Date of Disbursement

MM / DD / YYYY
09 / 17 / 2009

FEC Identification Number

C 011

Transaction ID : 30587076

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Leadership in the New Century (LINCPAC)

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	0	9

Mailing Address 124 West Capitol Avenue
Suite 630

City Little Rock State AR Zip Code 72201

Purpose of Disbursement

Leaders
Category/ Type

FEC Identification Number

C 011

Transaction ID : 30587243

Amount of Each Disbursement this Period

500.00

Memo Item

Candidate Name

C00366179

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Committee To Elect Chris Murphy

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	0	9

Mailing Address P.O. Box 127

City Cheshire State CT Zip Code 06410

Purpose of Disbursement

Re-elec
Category/ Type

FEC Identification Number

C 011

Transaction ID : 30599331

Amount of Each Disbursement this Period

1000.00

Memo Item

Candidate Name

H6CT05124, Murphy, Christopher, Scott, Rep.

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: H District: CT

Full Name (Last, First, Middle Initial)

C. Georgians for Isakson

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	9		2	0	0	9

Mailing Address Post Office Box 71955

City Marietta State GA Zip Code 30007

Purpose of Disbursement

Void - C
Category/ Type

FEC Identification Number

C 011

Transaction ID : 30608655

Amount of Each Disbursement this Period

- 500.00

Memo Item

Candidate Name

, Isakson, Johnny, ,

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: S District: GA

SUBTOTAL of Disbursements This Page (optional)..... ▶

1000.00

TOTAL This Period (last page this line number only)..... ▶

--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Georgians for Isakson

Mailing Address Post Office Box 71955

City Marierta State GA Zip Code 30007

Purpose of Disbursement

Candidate Name

, Isakson, Johnny, ,

Office Sought: House Senate President
State: S District: GA

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 29 / 2009

FEC Identification Number

C 011

Transaction ID : 30608656

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Gillibrand For Senate

Mailing Address 313 C Street Ne

City Washington State DC Zip Code 20002

Purpose of Disbursement

Candidate Name

SONY00410, Gillibrand, Kirsten, , Rep.

Office Sought: House Senate President
State: H District: NY

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Re-elec
Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 07 / 2009

FEC Identification Number

C 011

Transaction ID : 30636792

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Building Relationships in Diverse Geographic Environments PAC (Bridge PAC)

Mailing Address 499 South Capitol Street, SW
Suite 422

City Washington State DC Zip Code 20003

Purpose of Disbursement

Candidate Name

C00399196

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Leaders
Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 07 / 2009

FEC Identification Number

C 011

Transaction ID : 30636892

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

2500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Ryan For Congress

Mailing Address P. O. Box 1919

City
Janesville

State
WI

Zip Code
53547

Purpose of Disbursement

Re-elec

Candidate Name

H8WI01024, Ryan, Paul, D., Rep.

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For: 2010

Primary General
 Other (specify) ▼

State: H District: WI

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2009

FEC Identification Number

C 011

Transaction ID : 30636909

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Friends Of Trey Grayson

Mailing Address PO Box 175726

City
Ft Mitchell

State
KY

Zip Code
41017

Purpose of Disbursement

Elect to

Candidate Name

S0KY00131, Grayson, Trey, .

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For: 2010

Primary General
 Other (specify)

State: S District: KY

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2009

FEC Identification Number

C 011

Transaction ID : 30640490

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Bachus For Congress Committee

Mailing Address P.O. Box 131134

City
Birmingham

State
AL

Zip Code
35213

Purpose of Disbursement

Re-elec

Candidate Name

H2AL06035, Bachus, Spencer, Thomas, Rep.

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For: 2010

Primary General
 Other (specify) ▼

State: H District: AL

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2009

FEC Identification Number

C 011

Transaction ID : 30640493

Amount of Each Disbursement this Period

1500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

5500.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Michael Burgess For Congress

Mailing Address PO Box 2334

City
Denton

State
TX

Zip Code
76202

Purpose of Disbursement

Re-elec

Candidate Name

H2TX26093, Burgess, Michael C., , Mr.

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For: 2010

Primary General
 Other (specify) ▼

State: H District: TX

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2009

FEC Identification Number

C 011

Transaction ID : 30640495

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Dave Camp For Congress 2010

Mailing Address 5915 Eastman Avenue
Suite 100

City
Midland

State
MI

Zip Code
48640

Purpose of Disbursement

Re-elec

Candidate Name

H0M110071, Camp, David, Lee, Rep.

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For: 2010

Primary General
 Other (specify)

State: H District: MI

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2009

FEC Identification Number

C 011

Transaction ID : 30640497

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Nelson 2012

Mailing Address PO Box 8666

City
Omaha

State
NE

Zip Code
68108

Purpose of Disbursement

Re-elec

Candidate Name

S6NE00095, Nelson, Ben., , Sen.

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For: 2010

Primary General
 Other (specify) ▼

State: S District: NE

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2009

FEC Identification Number

C 011

Transaction ID : 30640502

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

5000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. Bob Corker for Senate

Full Name (Last, First, Middle Initial)
Date of Disbursement: 10 / 09 / 2009

Mailing Address PO Box 848

City Chattanooga State TN Zip Code 37401

Purpose of Disbursement: Re-Elec

Candidate Name: S6TN00216, Corker, Robert, P.

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: S District: TN

FEC Identification Number: C 011
Transaction ID : 30640514
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. Roskam for Congress Committee

Full Name (Last, First, Middle Initial)
Date of Disbursement: 10 / 09 / 2009

Mailing Address 5006 Washington Ave.

City Downers Grove State IL Zip Code 60515

Purpose of Disbursement: Re-Elec

Candidate Name: , Roskam, Peter, ,

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: H District: IL

FEC Identification Number: C 011
Transaction ID : 30640515
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. Majority Initiative to Keep Electing Republicans Fund A.K.A. Mike R Fund

Full Name (Last, First, Middle Initial)
Date of Disbursement: 10 / 10 / 2009

Mailing Address PO Box 2485

City Springfield State VA Zip Code 22152

Purpose of Disbursement: Void - I

Candidate Name: C00370791

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C 011
Transaction ID : 30723459
Amount of Each Disbursement this Period: - 1500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Moderate Democrats Political Action Committee

Mailing Address 426 C Street, N.E.

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement

Candidate Name
C00436022

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			04			2009			

FEC Identification Number

C 011

Transaction ID : 30788396

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Frank Kratovil For Congress

Mailing Address 222 Main Sail Drive
PO Box 518

City
Stevensville

State
MD

Zip Code
21666

Purpose of Disbursement

Candidate Name
H8MD01086, Kratovil, Frank, M., Rep.

Office Sought: House
 Senate
 President
State: H District: MD

Disbursement For: 2010
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			04			2009			

FEC Identification Number

C 011

Transaction ID : 30788410

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Welch For Congress

Mailing Address PO Box 1682

City
Burlington

State
VT

Zip Code
05402

Purpose of Disbursement

Candidate Name
H6VT00160, Welch, Peter, , Rep.

Office Sought: House
 Senate
 President
State: H District: VT

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2009			

FEC Identification Number

C 011

Transaction ID : 30790895

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Friends Of Dennis Cardoza

Mailing Address PO Box 2749

City
Merced

State
CA

Zip Code
95340

Purpose of Disbursement

Candidate Name

H2CA18056, Cardoza, Dennis, A., Rep.

Office Sought:

House
 Senate
 President

Disbursement For: 2010

Primary General
 Other (specify) ▼

State: H District: CA

Date of Disbursement

MM / DD / YYYY
11 / 05 / 2009

FEC Identification Number

C 011

Transaction ID : 30790962

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Arcuri For Congress

Mailing Address P.O. Box 8508

City
Utica

State
NY

Zip Code
13505

Purpose of Disbursement

Candidate Name

H6NY24128, Arcuri, Michael, A., Rep.

Office Sought:

House
 Senate
 President

Disbursement For: 2010

Primary General
 Other (specify) ▼

State: H District: NY

Date of Disbursement

MM / DD / YYYY
11 / 05 / 2009

FEC Identification Number

C 011

Transaction ID : 30790965

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Kind for Congress

Mailing Address P.O. Box 184

City
La Crosse

State
WI

Zip Code
54603

Purpose of Disbursement

Candidate Name

, Kind, Ron, , Rep

Office Sought:

House
 Senate
 President

Disbursement For: 2010

Primary General
 Other (specify) ▼

State: H District: WI

Date of Disbursement

MM / DD / YYYY
11 / 05 / 2009

FEC Identification Number

C 011

Transaction ID : 30790968

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. Friends of Sam Johnson			Date of Disbursement MM / DD / YYYY 11 / 05 / 2009	
Mailing Address PO Box 860096			FEC Identification Number C 011 Transaction ID : 30790970 Amount of Each Disbursement this Period 1000.00	
City PLANO	State TX	Zip Code 75086	Memo Item <input type="checkbox"/>	
Purpose of Disbursement			Category/Type	
Candidate Name , Johnson, Sam, ,				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: H	District: TX			

B. Tiberi For Congress			Date of Disbursement MM / DD / YYYY 11 / 05 / 2009	
Mailing Address 2931 E Dublin Granville Road Suite 190			FEC Identification Number C 011 Transaction ID : 30790977 Amount of Each Disbursement this Period 1000.00	
City Columbus	State OH	Zip Code 43231	Memo Item <input type="checkbox"/>	
Purpose of Disbursement			Category/Type	
Candidate Name HOOH12062, Tiberi, Patrick, J., Rep.				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: H	District: OH			

C. Congressman Joe Barton Committee			Date of Disbursement MM / DD / YYYY 11 / 05 / 2009	
Mailing Address 701 Williamsburg			FEC Identification Number C 011 Transaction ID : 30790979 Amount of Each Disbursement this Period 1500.00	
City Ennis	State TX	Zip Code 75120	Memo Item <input type="checkbox"/>	
Purpose of Disbursement			Category/Type	
Candidate Name , Barton, Joe L., ,				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: H	District: TX			

SUBTOTAL of Disbursements This Page (optional).....▶	3500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. AMERIPAC: The Fund for a Greater America

Mailing Address 607 14th Street, NW
Suite 800

City
Washington

State
DC

Zip Code
20005

Purpose of Disbursement

Candidate Name
C00271338

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			10			2009			

FEC Identification Number

C 011

Transaction ID : 30811622

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Ryan For Congress

Mailing Address P. O. Box 1919

City
Janesville

State
WI

Zip Code
53547

Purpose of Disbursement

Candidate Name
H8WI01024, Ryan, Paul, D., Rep.

Office Sought: House
 Senate
 President
State: H District: WI

Disbursement For: 2010
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			10			2009			

FEC Identification Number

C 011

Transaction ID : 30811704

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Citizens For Altmire

Mailing Address P.O. Box 1776

City
Freedom

State
PA

Zip Code
15042

Purpose of Disbursement

Candidate Name
H6PA04110, Altmire, Jason, , Mr.

Office Sought: House
 Senate
 President
State: H District: PA

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			10			2009			

FEC Identification Number

C 011

Transaction ID : 30811712

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Davis For Congress/Friends Of Davis

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			10			2009			

Mailing Address 5956 W. Race Avenue

FEC Identification Number

C	011
---	-----

Transaction ID : 30811725

Amount of Each Disbursement this Period

1000.00

Memo Item

City Chicago State IL Zip Code 60644

Purpose of Disbursement

Category/Type

Candidate Name

H4IL07037, Davis, Danny, K., Rep.

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify) ▼

State: H District: IL

Full Name (Last, First, Middle Initial)

B. Friends of Mary Landrieu

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			10			2009			

Mailing Address 58156 Court Street

FEC Identification Number

C	011
---	-----

Transaction ID : 30811734

Amount of Each Disbursement this Period

1000.00

Memo Item

City Plaquemine State LA Zip Code 70764

Purpose of Disbursement

Category/Type

Candidate Name

, Landrieu, Mary L., ,

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify) ▼

State: S District: LA

Full Name (Last, First, Middle Initial)

C. Georgians for Isakson

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			10			2009			

Mailing Address Post Office Box 71955

FEC Identification Number

C	011
---	-----

Transaction ID : 30811746

Amount of Each Disbursement this Period

1000.00

Memo Item

City Marietta State GA Zip Code 30007

Purpose of Disbursement

Category/Type

Candidate Name

, Isakson, Johnny, ,

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify) ▼

State: S District: GA

SUBTOTAL of Disbursements This Page (optional).....▶

3000.00

TOTAL This Period (last page this line number only).....▶

--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Michael Burgess For Congress

Mailing Address PO Box 2334

City
Denton

State
TX

Zip Code
76202

Purpose of Disbursement

Candidate Name

H2TX26093, Burgess, Michael C., , Mr.

Office Sought:

 House
 Senate
 President

Disbursement For: 2010

 Primary General
 Other (specify) ▼

State: H

District: TX

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			10			2009			

FEC Identification Number

C 011

Transaction ID : 30811752

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Senate Majority Fund

Mailing Address P.O. Box 32025

City
Phoenix

State
AZ

Zip Code
85064

Purpose of Disbursement

Candidate Name

C00368431

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			10			2009			

FEC Identification Number

C 011

Transaction ID : 30811763

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. OrrinPAC

Mailing Address 175 S West Temple
Suite 650

City
Salt Lake City

State
UT

Zip Code
84101

Purpose of Disbursement

Candidate Name

C00235572

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			10			2009			

FEC Identification Number

C 011

Transaction ID : 30811766

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. ERICPAC

Mailing Address 25 East Main Street, Suite 200

City Richmond State VA Zip Code 23219

Purpose of Disbursement

Candidate Name
C00384701

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		10		2009

FEC Identification Number

C	011
---	-----

Transaction ID : 30811767

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Friends Of Ginny Brown-Waite

Mailing Address PO Box 865

City Brooksville State FL Zip Code 34605

Purpose of Disbursement

Candidate Name
H2FL05127, Brown-Waite, Virginia, , Rep.

Office Sought: House Senate President
State: H District: FL

Disbursement For: 2010 Primary General Other (specify)

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		10		2009

FEC Identification Number

C	011
---	-----

Transaction ID : 30811768

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Richard Burr Committee

Mailing Address P.O. Box 5928

City Winston-Salem State NC Zip Code 27113

Purpose of Disbursement

Candidate Name
, Burr, Richard M., ,

Office Sought: House Senate President
State: H District: NC

Disbursement For: 2010 Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		10		2009

FEC Identification Number

C	011
---	-----

Transaction ID : 30811771

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3000.00

--

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Grid for line numbers: 21b, 22, 23 (checked), 24, 25, 26, 27, 28a, 28b, 28c, 29, 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC (United for Health)

Form A: People For Patty Murray. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form B: Re-Elect Brian Bilbray For Congress. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form C: McConnell Senate Committee '14. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

SUBTOTAL of Disbursements This Page (optional) 4000.00
TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Issa for Congress

Mailing Address P. O. Box 760

City
Vista

State
CA

Zip Code
92085-0760

Purpose of Disbursement

Candidate Name

, Issa, Darrell, ,

Office Sought:

 House
 Senate
 President

Disbursement For: 2010

 Primary General
 Other (specify) ▼

State: H District: CA

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	0		2	0	0	9

FEC Identification Number

C 011

Transaction ID : 30811778

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Demint For Senate Committee Inc

Mailing Address PO Box 12425

City
Columbia

State
SC

Zip Code
29211

Purpose of Disbursement

Candidate Name

S4SC00083, DeMint, James, W., Sen.

Office Sought:

 House
 Senate
 President

Disbursement For: 2010

 Primary General
 Other (specify) ▼

State: S District: SC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	0		2	0	0	9

FEC Identification Number

C 011

Transaction ID : 30811780

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Friends Of John Thune

Mailing Address 200 North Phillips Avenue Ste L101

City
Sioux Falls

State
SD

Zip Code
57104

Purpose of Disbursement

Candidate Name

S2SD00068, Thune, John, R., Sen.

Office Sought:

 House
 Senate
 President

Disbursement For: 2010

 Primary General
 Other (specify) ▼

State: S District: SD

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	0		2	0	0	9

FEC Identification Number

C 011

Transaction ID : 30811783

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. The Freedom Project

Mailing Address 111 C Street SE

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement

Candidate Name
C00305805

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			10			2009			

FEC Identification Number

C	011
---	-----

Transaction ID : 30811785

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Brady For Congress

Mailing Address P.O. Box 8277

City
The Woodlands

State
TX

Zip Code
77387

Purpose of Disbursement

Candidate Name
H6TX08100, Brady, Kevin, Patrick, Rep.

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify)

State: H District: TX

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			10			2009			

FEC Identification Number

C	011
---	-----

Transaction ID : 30811788

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Price For Congress

Mailing Address P.O. Box 425

City
Roswell

State
GA

Zip Code
30077

Purpose of Disbursement

Candidate Name
H4GA06087, Price, Thomas, Edmunds, Rep.

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: H District: GA

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			10			2009			

FEC Identification Number

C	011
---	-----

Transaction ID : 30811790

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

3000.00

TOTAL This Period (last page this line number only).....▶

--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. Lisa Murkowski For Us Senate

Full Name (Last, First, Middle Initial)
Date of Disbursement: 11 / 10 / 2009

Mailing Address PO Box 100847

City Anchorage State AK Zip Code 99510

Purpose of Disbursement

Candidate Name S4AK00099, Murkowski, Lisa, , Sen.

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: S District: AK

FEC Identification Number: C 011
Transaction ID : 30811984
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. Linder For Congress

Full Name (Last, First, Middle Initial)
Date of Disbursement: 11 / 19 / 2009

Mailing Address 2821 Greystone Cove South

City Atlanta State GA Zip Code 30341

Purpose of Disbursement

Candidate Name , Linder, John, ,

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: H District: GA

FEC Identification Number: C 011
Transaction ID : 30878934
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. Mike Ross for Congress

Full Name (Last, First, Middle Initial)
Date of Disbursement: 11 / 19 / 2009

Mailing Address 227 Massachusetts Ave N.E.
Ste 101

City Washington State DC Zip Code 20002

Purpose of Disbursement

Candidate Name , Ross, Michael Avery, ,

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: H District: AR

FEC Identification Number: C 011
Transaction ID : 30878935
Amount of Each Disbursement this Period: 2000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Mchenry For Congress

Mailing Address PO Box 1406

City
Hickory

State
NC

Zip Code
28603

Purpose of Disbursement

Candidate Name

H4NC10047, McHenry, Patrick, Timothy, Rep.

Office Sought:

House
 Senate
 President

Disbursement For: 2010

Primary General
 Other (specify) ▼

State: H District: NC

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 19 / 2009

FEC Identification Number

C 011

Transaction ID : 30878938

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Freedom Fund

Mailing Address 701 8th Street, N.W.
Suite 500

City
Washington

State
DC

Zip Code
20001

Purpose of Disbursement

Candidate Name

C00390674

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 23 / 2009

FEC Identification Number

C 011

Transaction ID : 30885451

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Bob Casey For Senate Inc

Mailing Address 607 14th Street Nw Suite 800

City
Washington

State
DC

Zip Code
20005

Purpose of Disbursement

Candidate Name

S6PA00217, Casey, Robert, , Sen.

Office Sought:

House
 Senate
 President

Disbursement For: 2012

Primary General
 Other (specify) ▼

State: S District: PA

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2009

FEC Identification Number

C 011

Transaction ID : 30932760

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Sue Myrick For Congress

Mailing Address P.O. Box 37091

City
Charlotte

State
NC

Zip Code
28237

Purpose of Disbursement

Candidate Name

H4NC09106, Myrick, Sue, Wilkins, Rep.

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2010

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: H District: NC

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			02			2009			

FEC Identification Number

C 011

Transaction ID : 30935358

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Priority PAC

Mailing Address 2821 Kavanaugh Blvd
Suite 3G

City
Little Rock

State
AR

Zip Code
72205

Purpose of Disbursement

Candidate Name

C00388694

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			02			2009			

FEC Identification Number

C 011

Transaction ID : 30935920

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Stephanie Herseth Sandlin For South Dakota

Mailing Address PO Box 2009

City
Sioux Falls

State
SD

Zip Code
57101

Purpose of Disbursement

Candidate Name

, M, Herseth, ,

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2010

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: H District: SD

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			02			2009			

FEC Identification Number

C 011

Transaction ID : 30935923

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

4500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Feinstein For Senate

Mailing Address 1212 S Victory Blvd

City Burbank State CA Zip Code 91502

Purpose of Disbursement

Candidate Name
S0CA00199, Feinstein, Dianne, , Sen.

Office Sought: House Senate President
State: S District: CA

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			02			2009			

FEC Identification Number

C 011

Transaction ID : 30935924

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Georgians for Isakson

Mailing Address Post Office Box 71955

City Marietta State GA Zip Code 30007

Purpose of Disbursement

Candidate Name
, Isakson, Johnny, ,

Office Sought: House Senate President
State: S District: GA

Disbursement For: 2010
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			04			2009			

FEC Identification Number

C 011

Transaction ID : 30939623

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. TENNPAC

Mailing Address 228 South Washington Street
Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

Candidate Name
C00388421

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			04			2009			

FEC Identification Number

C 011

Transaction ID : 30939644

Amount of Each Disbursement this Period

1500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

3500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. Forward Together PAC

Full Name (Last, First, Middle Initial)

Mailing Address 10 G Street, NE
Suite 570

City Washington State DC Zip Code 20002

Purpose of Disbursement

Candidate Name C00412791

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 04 / 2009

FEC Identification Number: C 011
Transaction ID : 30940119

Amount of Each Disbursement this Period: 1000.00

Memo Item

B. Hagan For Us Senate Inc

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 29103

City Greensboro State NC Zip Code 27429

Purpose of Disbursement

Candidate Name S8NC00239, Hagan, Kay, ,

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: S District: NC

Date of Disbursement: 12 / 08 / 2009

FEC Identification Number: C 011
Transaction ID : 30945009

Amount of Each Disbursement this Period: 1000.00

Memo Item

C. Senate Majority Fund

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 32025

City Phoenix State AZ Zip Code 85064

Purpose of Disbursement

Candidate Name C00368431

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 14 / 2009

FEC Identification Number: C 011
Transaction ID : 31002918

Amount of Each Disbursement this Period: 2000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. The Grassley Committee, Inc.

Mailing Address P.O. Box 6193

City
Alexandria

State
VA

Zip Code
22306-0193

Purpose of Disbursement

Candidate Name

, Grassley, Charles E., ,

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: S District: IA

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			14			2009			

FEC Identification Number

C 011

Transaction ID : 31002932

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Bennett Election Committee Inc

Mailing Address 175 South West Temple Suite 650

City
Salt Lake City

State
UT

Zip Code
84101

Purpose of Disbursement

Candidate Name

S2UT00104, Bennett, Robert, F., Sen.

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify)

State: S District: UT

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			14			2009			

FEC Identification Number

C 011

Transaction ID : 31002939

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Rogers For Congress

Mailing Address PO Box 581
Post Office Box 581

City
Brighton

State
MI

Zip Code
48116

Purpose of Disbursement

Candidate Name

H0MI08042, Rogers, Michael, J., Rep.

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: H District: MI

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			14			2009			

FEC Identification Number

C 011

Transaction ID : 31002940

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

5000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Citizens For Altmire

Mailing Address P.O. Box 1776

City
Freedom

State
PA

Zip Code
15042

Purpose of Disbursement

Candidate Name

H6PA04110, Altmire, Jason, , Mr.

Office Sought: House
 Senate
 President

State: H District: PA

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	4		2	0	0	9

FEC Identification Number

C 011

Transaction ID : 31002941

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Childers For Congress

Mailing Address PO Box 177

City
Booneville

State
MS

Zip Code
38829

Purpose of Disbursement

Candidate Name

H8MS01061, Childers, Travis, Wayne, Rep.

Office Sought: House
 Senate
 President

State: H District: MS

Disbursement For: 2010
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	5		2	0	0	9

FEC Identification Number

C 011

Transaction ID : 31043467

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Richard Burr Committee

Mailing Address P.O. Box 5928

City
Winston-Salem

State
NC

Zip Code
27113

Purpose of Disbursement

Candidate Name

, Burr, Richard M., ,

Office Sought: House
 Senate
 President

State: H District: NC

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	5		2	0	0	9

FEC Identification Number

C 011

Transaction ID : 31043481

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

2500.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Bennet For Colorado

Mailing Address PO Box 3078

City
Denver

State
CO

Zip Code
80201

Purpose of Disbursement

Candidate Name

S0CO00211, Bennet, Michael, , Mr.

Office Sought:

 House
 Senate
 President

Disbursement For: 2010

 Primary General
 Other (specify) ▼

State: S District: CO

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			15			2009			

FEC Identification Number

C 011

Transaction ID : 31043538

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Pat Roberts For U S Senate Inc

Mailing Address PO Box 433

City
Great Bend

State
KS

Zip Code
67530

Purpose of Disbursement

Candidate Name

S6KS00080, Roberts, Pat, , Sen.

Office Sought:

 House
 Senate
 President

Disbursement For: 2014

 Primary General
 Other (specify) ▼

State: S District: KS

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			15			2009			

FEC Identification Number

C 011

Transaction ID : 31043544

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Coburn For Senate 2010

Mailing Address Post Office Box 977

City
Muskogee

State
OK

Zip Code
74402

Purpose of Disbursement

Candidate Name

S4OK00174, Coburn, Thomas, Allen, Sen.

Office Sought:

 House
 Senate
 President

Disbursement For: 2010

 Primary General
 Other (specify) ▼

State: S District: OK

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			15			2009			

FEC Identification Number

C 011

Transaction ID : 31043550

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

3000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. SKI PAC

Mailing Address P.O. Box 83142

City
Gaithersburg

State
MD

Zip Code
20883

Purpose of Disbursement

Candidate Name

C00470666

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2009

FEC Identification Number

C 011

Transaction ID : 31043551

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Making Business Excel Political Action Committee

Mailing Address PO Box 3241

City
Cheyenne

State
WY

Zip Code
82001

Purpose of Disbursement

Candidate Name

C00392134

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY
12 / 16 / 2009

FEC Identification Number

C 011

Transaction ID : 31053906

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Mike McMahon For Congress

Mailing Address 66 Arnold Street

City
Staten Island

State
NY

Zip Code
10301

Purpose of Disbursement

Candidate Name

H8NY13077, McMahon, Michael, , Mr.

Office Sought:

House
 Senate
 President

Disbursement For: 2010

Primary General
 Other (specify) ▼

State: H

District: NY

Date of Disbursement

MM / DD / YYYY
12 / 16 / 2009

FEC Identification Number

C 011

Transaction ID : 31053963

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

6000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Hagan For Us Senate Inc

Mailing Address PO Box 29103

City Greensboro

State NC

Zip Code 27429

Purpose of Disbursement

Category/Type

Candidate Name

S8NC00239, Hagan, Kay, .

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: S District: NC

Date of Disbursement

MM / DD / YYYY
12 / 17 / 2009

FEC Identification Number

C 011

Transaction ID : 31055047

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. People For Patty Murray

Mailing Address PO Box 3662

City Seattle

State WA

Zip Code 98124

Purpose of Disbursement

Category/Type

Candidate Name

S2WA00189, Murray, Patty, . Sen.

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: S District: WA

Date of Disbursement

MM / DD / YYYY
12 / 23 / 2009

FEC Identification Number

C 011

Transaction ID : 31065529

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

2000.00

TOTAL This Period (last page this line number only)..... ▶

158500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Committee to Elect Niehaus

Mailing Address 1131 Little Indian Creek Road

City
New Richmond

State
OH

Zip Code
45157-9602

Purpose of Disbursement

Tom Ni

Candidate Name

, Niehaus, Tom, , OH Sen.

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For: 2010

Primary General
 Other (specify) ▼

State: S

District: OH

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 08 / 2009

FEC Identification Number

C 011

Transaction ID : 30182988

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Committee to Elect Bill Harris

Mailing Address 1238 TWP Road 1506

City
Ashland

State
OH

Zip Code
44805

Purpose of Disbursement

Bill Har

Candidate Name

, Harris, Bill, , Senator

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For: 2010

Primary General
 Other (specify)

State: S

District: OH

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 08 / 2009

FEC Identification Number

C 011

Transaction ID : 30182992

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Friends of Faber

Mailing Address 7706 St. Rt 703

City
Celina

State
OH

Zip Code
45822

Purpose of Disbursement

Keith Fa

Candidate Name

, Faber, Keith, , OH Sen.

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For: 2010

Primary General
 Other (specify) ▼

State: S

District: OH

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 08 / 2009

FEC Identification Number

C 011

Transaction ID : 30182994

Amount of Each Disbursement this Period

2000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Citizens for Buehrer

Mailing Address 704 Greenview Drive

City
Delta

State
OH

Zip Code
43515

Purpose of Disbursement

Steve E

Candidate Name

, Buehrer, Steve, , OH Sen.

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For: 2010

 Primary General
 Other (specify) ▼

State: S

District: OH

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	0	9

FEC Identification Number

C 011

Transaction ID : 30182995

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Citizens for Wagoner

Mailing Address 7445 Airport Highway

City
Holland

State
OH

Zip Code
43528

Purpose of Disbursement

Mark W

Candidate Name

, Wagoner, Mark, , OH Sen.

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For: 2010

 Primary General
 Other (specify) ▼

State: S

District: OH

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	0	9

FEC Identification Number

C 011

Transaction ID : 30182996

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Citizens for Kevin Bacon

Mailing Address 5325 Ponderosa Drive

City
Columbus

State
OH

Zip Code
43231

Purpose of Disbursement

Kevin B

Candidate Name

, Bacon, Kevin, , OH Rep.

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For: 2010

 Primary General
 Other (specify) ▼

State: S

District: OH

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		7	0	9	9

FEC Identification Number

C 011

Transaction ID : 30264421

Amount of Each Disbursement this Period

250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

3250.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. UnitedHealth Group Inc Political Action Committee of Iowa

Mailing Address 9900 Bren Road East

City Minnetonka State MN Zip Code 55343

Purpose of Disbursement

Funding
Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 22 / 2009

FEC Identification Number

C 011

Transaction ID : 30302965

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Paula Brooks Committee

Mailing Address PO Box 1446

City Columbus State OH Zip Code 43216

Purpose of Disbursement

Paula B
Category/Type

Candidate Name

, Brooks, Paula, ,

Office Sought: House Senate President
 Disbursement For: 2010 Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 22 / 2009

FEC Identification Number

C 011

Transaction ID : 30303187

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Citizens to Elect John Patrick Carney

Mailing Address 357 E Torrence Road

City Columbus State OH Zip Code 43214

Purpose of Disbursement

John C:
Category/Type

Candidate Name

, Carney, John, , OH Rep.

Office Sought: House Senate President
 Disbursement For: 2010 Primary General Other (specify) ▼
 State: H District: OH

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 22 / 2009

FEC Identification Number

C 011

Transaction ID : 30303287

Amount of Each Disbursement this Period

500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. UnitedHealth Group Inc, PAC of Georgia

Full Name (Last, First, Middle Initial)

Mailing Address 9900 Bren Road East

City Minnetonka State MN Zip Code 55343

Purpose of Disbursement Funding

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 21 / 2009

FEC Identification Number: C 011
Transaction ID : 30443985
 Amount of Each Disbursement this Period: 250.00

Memo Item

B. United for Health PAC of Illinois

Full Name (Last, First, Middle Initial)

Mailing Address 9900 Bren Road East

City Minnetonka State MN Zip Code 55343

Purpose of Disbursement Funding

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 18 / 2009

FEC Identification Number: C 011
Transaction ID : 30590476
 Amount of Each Disbursement this Period: 250.00

Memo Item

C. Republican House Victory Committee

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 11494

City Tempe State AZ Zip Code 85284

Purpose of Disbursement State P

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 07 / 2009

FEC Identification Number: C 011
Transaction ID : 30636828
 Amount of Each Disbursement this Period: 2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Republican Senate Victory Committee

Mailing Address PO Box 11494

City
Tempe

State
AZ

Zip Code
85284

Purpose of Disbursement

State P

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2009

FEC Identification Number

C 011

Transaction ID : 30636877

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Mentel for Council Committee

Mailing Address 3886 N High St

City
Columbus

State
OH

Zip Code
43214

Purpose of Disbursement

Mike M

Candidate Name

, Mentel, Mike, ,

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2009

FEC Identification Number

C 011

Transaction ID : 30636947

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Paley for Columbus

Mailing Address 668 Bellamy Place

City
Columbus

State
OH

Zip Code
43213

Purpose of Disbursement

Eileen F

Candidate Name

, Paley, Eileen, Y.,

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2009

FEC Identification Number

C 011

Transaction ID : 30636952

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

6000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Paula Brooks Committee

Mailing Address PO Box 1446

City
Columbus

State
OH

Zip Code
43216

Purpose of Disbursement

Paula B

Category/
Type

Candidate Name

, Brooks, Paula, ,

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2010

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	07	/	2009

FEC Identification Number

C 011

Transaction ID : 30636960

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. A. Troy Miller for Columbus

Mailing Address 1029 Northfield Place North

City
Reynoldsburg

State
OH

Zip Code
43068

Purpose of Disbursement

A. Mille

Category/
Type

Candidate Name

, Miller, A., Troy,

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2010

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	07	/	2009

FEC Identification Number

C 011

Transaction ID : 30636969

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Berding for Cincinnati Committee

Mailing Address 5001 Shatuc Ave.

City
Cincinnati

State
OH

Zip Code
45208

Purpose of Disbursement

Jeff Ber

Category/
Type

Candidate Name

, Berding, Jeff, ,

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2010

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	07	/	2009

FEC Identification Number

C 011

Transaction ID : 30636972

Amount of Each Disbursement this Period

500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Citizens for Tavares

Mailing Address 1257 Medford Road

City Columbus State OH Zip Code 43209

Purpose of Disbursement

Charlet
Category/
Type

Candidate Name
, Tavares, Charleta, B,

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2009

FEC Identification Number

C 011

Transaction ID : 30636975

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Citizens for Priscilla Tyson

Mailing Address 1465 E Broad St

City Colombus State OH Zip Code 43205

Purpose of Disbursement

Priscilla
Category/
Type

Candidate Name
, Tyson, Priscilla, ,

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify)

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2009

FEC Identification Number

C 011

Transaction ID : 30636978

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Friends of John O'Grady

Mailing Address PO Box 1355

City Columbus State OH Zip Code 43216

Purpose of Disbursement

John O'
Category/
Type

Candidate Name
, O'Grady, John, ,

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2009

FEC Identification Number

C 011

Transaction ID : 30636985

Amount of Each Disbursement this Period

750.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

2250.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Hearcel Craig for Council

Mailing Address 550 E Walnut St

City
Columbus

State
OH

Zip Code
43214

Purpose of Disbursement

Hearcel

Category/
Type

Candidate Name

, Craig, Hearcel, F,

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2010

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	07	/	2009

FEC Identification Number

C 011

Transaction ID : 30636996

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Mallory for Citizens

Mailing Address 907 Dayton Street

City
Cincinnati

State
OH

Zip Code
45214

Purpose of Disbursement

Mark M

Category/
Type

Candidate Name

, Mallory, Mark, ,

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2010

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	07	/	2009

FEC Identification Number

C 011

Transaction ID : 30637006

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Keep State Representative Jeff Greer

Mailing Address 2125 Hwy 79

City
Brandenburg

State
KY

Zip Code
40108

Purpose of Disbursement

Jeff Gre

Category/
Type

Candidate Name

, Greer, Jeff, , KY Rep.

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2010

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: H

District: KY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	09	/	2009

FEC Identification Number

C 011

Transaction ID : 30640479

Amount of Each Disbursement this Period

500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Kentucky Senate Republican Caucus

Mailing Address PO Box 1068

City
Frankfort

State
KY

Zip Code
40602

Purpose of Disbursement

Senate

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			09			2009			

FEC Identification Number

C 011

Transaction ID : 30640480

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Committee to Elect Kathy Angerer

Mailing Address PO Box 157

City
Dundee

State
MI

Zip Code
48131

Purpose of Disbursement

Kathy A

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify)

State: H District: MI

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			09			2009			

FEC Identification Number

C 011

Transaction ID : 30640489

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. UnitedHealth Group Inc PAC of PA

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343

Purpose of Disbursement

Funding

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			09			2009			

FEC Identification Number

C 011

Transaction ID : 30640549

Amount of Each Disbursement this Period

3000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

6000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. United for Health of Texas (UnitedHealth Group Inc, PAC of Texas)

Mailing Address 9900 Bren Road East

City Minnetonka State MN Zip Code 55343

Purpose of Disbursement

State P.
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
10 / 19 / 2009

FEC Identification Number

C 011

Transaction ID : 30722932

Amount of Each Disbursement this Period

15000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of John McComish

Mailing Address 4463 East Desert View Drive

City Phoenix State AZ Zip Code 85044

Purpose of Disbursement

John M.
Category/
Type

Candidate Name
, McComish, John, , AZ Rep.

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify)
State: H District: AZ

Date of Disbursement

MM / DD / YYYY
11 / 23 / 2009

FEC Identification Number

C 011

Transaction ID : 30885455

Amount of Each Disbursement this Period

200.00

Memo Item

Full Name (Last, First, Middle Initial)

C. United for Health PAC of Tennessee

Mailing Address 9900 Bren Road East

City Minnetonka State MN Zip Code 55343

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 07 / 2009

FEC Identification Number

C 011

Transaction ID : 30942929

Amount of Each Disbursement this Period

18700.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

33900.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. UnitedHealth Group Inc PAC of PA

Mailing Address 9900 Bren Road East

City Minnetonka State MN Zip Code 55343

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

MM / DD / YYYY
12 / 14 / 2009

FEC Identification Number

C 011

Transaction ID : 31002935

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. United for Health PAC of Tennessee

Mailing Address 9900 Bren Road East

City Minnetonka State MN Zip Code 55343

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

MM / DD / YYYY
12 / 14 / 2009

FEC Identification Number

C 011

Transaction ID : 31002936

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Alan Sanborn for Senate

Mailing Address 27140 Irwin Road

City Richmond State MI Zip Code 48062

Purpose of Disbursement

Candidate Name
 , Sanborn, Alan, , MI Sen.

Office Sought: House Senate President
 Disbursement For: 2010 Primary General Other (specify) ▼
 State: S District: MI

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2009

FEC Identification Number

C 011

Transaction ID : 31035139

Amount of Each Disbursement this Period

250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2750.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Senate Republican Campaign Committee

Mailing Address P.O. Box 12023

City
Lansing

State
MI

Zip Code
48901

Purpose of Disbursement

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 15 / 2009

FEC Identification Number

C 011

Transaction ID : 31035979

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Republican Senate Victory Committee

Mailing Address PO Box 11494

City
Tempe

State
AZ

Zip Code
85284

Purpose of Disbursement

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 15 / 2009

FEC Identification Number

C 011

Transaction ID : 31036450

Amount of Each Disbursement this Period

1250.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Republican House Victory Committee

Mailing Address PO Box 11494

City
Tempe

State
AZ

Zip Code
85284

Purpose of Disbursement

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 15 / 2009

FEC Identification Number

C 011

Transaction ID : 31037879

Amount of Each Disbursement this Period

1250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

7500.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Friends of Roger Kahn for Senate

Mailing Address P.O. Box 1627

City Saginaw State MI Zip Code 48605

Purpose of Disbursement

Roger k
Category/
Type

Candidate Name
, Kahn, Roger, , MI Sen.

Office Sought: House Senate President
State: S District: MI

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 16 / 2009

FEC Identification Number

C 011

Transaction ID : 31054482

Amount of Each Disbursement this Period

400.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of Roger Kahn for Senate

Mailing Address P.O. Box 1627

City Saginaw State MI Zip Code 48605

Purpose of Disbursement

Roger k
Category/
Type

Candidate Name
, Kahn, Roger, , MI Sen.

Office Sought: House Senate President
State: S District: MI

Disbursement For: 2010
 Primary General
 Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 22 / 2009

FEC Identification Number

C 011

Transaction ID : 31064681

Amount of Each Disbursement this Period

200.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

600.00

TOTAL This Period (last page this line number only)..... ▶

79250.00