

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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="2015"/>		225407.90
(b) Cash on Hand at Beginning of Reporting Period.....	211907.43	
(c) Total Receipts (from Line 19)	88851.24	486490.79
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	300758.67	711898.69
7. Total Disbursements (from Line 31).....	8160.73	419300.75
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	292597.94	292597.94
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

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).....	83942.74	381281.16
(ii) Unitemized	4908.50	104709.63
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	88851.24	485990.79
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	88851.24	485990.79
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.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	500.00
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))..... ▶	88851.24	486490.79
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	88851.24	486490.79

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	100.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	100.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	37950.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(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	1210.73	1750.75
(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)).....	1210.73	1750.75
29. Other Disbursements	6950.00	37950.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	8160.73	419300.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8160.73	419300.75

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	88851.24	485990.79
34. Total Contribution Refunds (from Line 28(d))	1210.73	1750.75
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	87640.51	484240.04
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	100.00
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	100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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. ELIZABETH CORBIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7985 LEA CIRCLE
 City BLOOMINGTON State MN Zip Code 55438-1286
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Hlth Care Initiv
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 912.86

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2015
Transaction ID : 38369375
 Amount of Each Receipt this Period
 52.80

B. DIANE FELDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 17406 LEDGEFIELD
 City CYPRESS State TX Zip Code 77433-2064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Behvrl Med Dir
 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
 07 / 31 / 2015
Transaction ID : 38469908
 Amount of Each Receipt this Period
 0.00
[MEMO ITEM]
 Refund(s) on Schedule B Totaling \$437.50 This changes the YTD Total to \$500.00

C. PAUL STORDAHL
 Full Name (Last, First, Middle Initial)
 Mailing Address 7001 W 175TH AVENUE
 City EDEN PRAIRIE State MN Zip Code 55346-2161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Actuary
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.31

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : 38469909
 Amount of Each Receipt this Period
 0.00
[MEMO ITEM]
 Refund(s) on Schedule B Totaling \$319.14 This changes the YTD Total to \$365.31

SUBTOTAL of Receipts This Page (optional)..... ▶ 52.80
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 7 OF 192
	<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

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

A. MARY JANE BEESON
 Full Name (Last, First, Middle Initial)
 Mailing Address 279 OAK COMMON AVENUE
 City SAINT AUGUSTINE State FL Zip Code 32095-6803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Dir Mktg Bus Dev
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt 07 / 31 / 2015
Transaction ID : 38469910
 Amount of Each Receipt this Period 0.00
[MEMO ITEM]
 Refund(s) on Schedule B Totaling \$134.95 This changes the YTD Total to \$365.00

B. JOLENE GARELLI
 Full Name (Last, First, Middle Initial)
 Mailing Address 9 PROSPECT VIEW DRIVE
 City DUMMERSTON State VT Zip Code 05301-8875
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation IT Proj Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.31

Date of Receipt 07 / 31 / 2015
Transaction ID : 38469911
 Amount of Each Receipt this Period 0.00
[MEMO ITEM]
 Refund(s) on Schedule B Totaling \$319.14 This changes the YTD Total to \$365.31

C. DEBORAH STREB
 Full Name (Last, First, Middle Initial)
 Mailing Address 2201 NORTH STAR ROAD
 City UPPER ARLINGTON State OH Zip Code 43221-3810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Dir Proj Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR1159794138431
 Amount of Each Receipt this Period 42.00
 P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	42.00
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 192
	<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	

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

A. ANTHONY Kazlauskas
 Full Name (Last, First, Middle Initial)
 Mailing Address 1356 BARRINGTON CIRCLE
 City ST AUGUSTINE State FL Zip Code 32092-3612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Sr Med Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR1159794638431
 Amount of Each Receipt this Period 40.00
 P/R Deduction (\$20.00 Bi-Weekly)

B. BRIAN BELLOWS
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 SHADOWOOD LANE
 City TRUMBULL State CT Zip Code 06611-4062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation E&I NA VP Sls Bus Dev
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR1159803838431
 Amount of Each Receipt this Period 45.00
 P/R Deduction (\$15.00 Bi-Weekly)

C. KEITH NOBLITT
 Full Name (Last, First, Middle Initial)
 Mailing Address 122 SOUTH OAK POINTE DR
 City SENECA State SC Zip Code 29672-6764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation SCE 3 NAs Ind Contr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR1159805538431
 Amount of Each Receipt this Period 60.00
 P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	145.00
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 9 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. JAMES WATSON

Mailing Address 6520 SHENANDOAH DR

City State Zip Code
 LINCOLN NE 68510-5159

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

Name of Employer Occupation
 United HealthCare Services Inc Assc Gen Counsel

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
07 / 31 / 2015

Transaction ID : PR1159806038431

Amount of Each Receipt this Period
75.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. WAYNE COOK

Mailing Address 1022 GLENDEVON DRIVE

City State Zip Code
 AMBLER PA 19002-1859

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

Name of Employer Occupation
 United HealthCare Services Inc SVP Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **960.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015

Transaction ID : PR1159812838431

Amount of Each Receipt this Period
180.00

P/R Deduction (\$60.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. DAVID WICHMANN

Mailing Address 7000 ANTRIM ROAD

City State Zip Code
 EDINA MN 55439-1708

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

Name of Employer Occupation
 United HealthCare Services Inc PRES & CFO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **3076.80**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015

Transaction ID : PR1159814738431

Amount of Each Receipt this Period
576.90

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ **831.90**

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 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. PATRICK ERLANDSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1000 OLD LONG LAKE ROAD
 City WAYZATA State MN Zip Code 55391-9690
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UHC International Services Inc Occupation SVP Bus Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3076.80

Date of Receipt 07 / 31 / 2015
Transaction ID : PR1159815938431
 Amount of Each Receipt this Period 576.90
 P/R Deduction (\$192.30 Bi-Weekly)

B. WILLIAM MUNSELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 2119 WINDSONG CIRCLE
 City WAYZATA State MN Zip Code 55391-2259
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Sr Advsr to Office of CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR1159816638431
 Amount of Each Receipt this Period 300.00
 P/R Deduction (\$100.00 Bi-Weekly)

C. JOHN PENSHORN
 Full Name (Last, First, Middle Initial)
 Mailing Address 120 BLACK OAKS LANE
 City WAYZATA State MN Zip Code 55391-1363
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation SVP UnitedHlth Group
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3076.80

Date of Receipt 07 / 31 / 2015
Transaction ID : PR1159816938431
 Amount of Each Receipt this Period 576.90
 P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	1453.80
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 11 OF 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. PAUL KALLMEYER
 Full Name (Last, First, Middle Initial)
 Mailing Address 468 HERALD DR
 City AMBLER State PA Zip Code 19002-1530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Deputy Gen Counsel Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR1159817438431
 Amount of Each Receipt this Period 150.00
 P/R Deduction (\$50.00 Bi-Weekly)

B. THOMAS QUIRK
 Full Name (Last, First, Middle Initial)
 Mailing Address 4307 BEECHWOOD LANE
 City DALLAS State TX Zip Code 75220-1909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Hlth Plan CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR1159819138431
 Amount of Each Receipt this Period 150.00
 P/R Deduction (\$50.00 Bi-Weekly)

C. DAVID FALK
 Full Name (Last, First, Middle Initial)
 Mailing Address 323 LAWRENCE AVE
 City HIGHLAND PARK State NJ Zip Code 08904-1851
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Med Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR1159820238431
 Amount of Each Receipt this Period 42.00
 P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	342.00
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 12 OF 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. RICHARD MIGLIORI
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 72

City WAYZATA	State MN	Zip Code 55391-0072
-----------------	-------------	------------------------

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

Name of Employer United HealthCare Services Inc	Occupation EVP Consumr Hlth Med Care
----------------------------------------------------	-----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR1159827438431

Amount of Each Receipt this Period
300.00

P/R Deduction (\$100.00 Bi-Weekly)

B. JEANNINE RIVET
 Full Name (Last, First, Middle Initial)
 Mailing Address 4305 TRILLIUM WAY

City MINNETRISTA	State MN	Zip Code 55364-7708
---------------------	-------------	------------------------

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

Name of Employer United HealthCare Services Inc	Occupation EVP UnitedHlth Grp
----------------------------------------------------	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3076.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR1159830038431

Amount of Each Receipt this Period
576.90

P/R Deduction (\$192.30 Bi-Weekly)

C. Mr. ANTHONY WELTERS
 Full Name (Last, First, Middle Initial)
 Mailing Address 919 SAIGON ROAD

City MCLEAN	State VA	Zip Code 22102-2116
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FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc	Occupation Sr Advsr to Office of CEO
----------------------------------------------------	-----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3076.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR1332013238431

Amount of Each Receipt this Period
576.90

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	1453.80
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:	PAGE 13 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. MICHAEL BRESOLIN		Date of Receipt MM / DD / YYYY 07 / 31 / 2015
Mailing Address 121 W VIEW STREET		Transaction ID : PR1551005738431
City LOMBARD	State IL	Zip Code 60148-1659
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer Optum Services, Inc	Occupation Dir Care Advo	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) B. MICHAEL MATTEO		Date of Receipt MM / DD / YYYY 07 / 31 / 2015
Mailing Address 25 JEREMIAHS WAY		Transaction ID : PR1551133438431
City SOUTH GLASTONBURY	State CT	Zip Code 06073-3621
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 346.14
Name of Employer Optum Services, Inc	Occupation Chief Growth Off	P/R Deduction (\$115.38 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1846.08	

Full Name (Last, First, Middle Initial) C. JOHN ENDERLE		Date of Receipt MM / DD / YYYY 07 / 31 / 2015
Mailing Address 31 ANDREIS TRAIL		Transaction ID : PR1554323538431
City SOUTH WINDSOR	State CT	Zip Code 06074-2142
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 165.00
Name of Employer Optum Services, Inc	Occupation Regn Exec Dir	P/R Deduction (\$55.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 880.00	

SUBTOTAL of Receipts This Page (optional).....▶	571.14
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 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. CATHERINE SPILLANE
 Full Name (Last, First, Middle Initial)
 Mailing Address 3807 PLEASANT VALLEY DRIVE
 City MISSOURI CITY State TX Zip Code 77459-4111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Dir Bus Process
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.68

Date of Receipt 07 / 31 / 2015
Transaction ID : PR1554324638431
 Amount of Each Receipt this Period 57.69
 P/R Deduction (\$19.23 Bi-Weekly)

B. KAREN ERICKSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 15348 RED OAKS ROAD SE
 City PRIOR LAKE State MN Zip Code 55372-1834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Optum Exec
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3076.80

Date of Receipt 07 / 31 / 2015
Transaction ID : PR1575957638431
 Amount of Each Receipt this Period 576.90
 P/R Deduction (\$192.30 Bi-Weekly)

C. ERNEST MONFILETTO
 Full Name (Last, First, Middle Initial)
 Mailing Address 3062 COMFORT ROAD
 City NEW HOPE State PA Zip Code 18938-5622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Ntwk Prgms
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1230.72

Date of Receipt 07 / 31 / 2015
Transaction ID : PR1575958138431
 Amount of Each Receipt this Period 230.76
 P/R Deduction (\$76.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	865.35
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 15 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. LEE VALENTA
Full Name (Last, First, Middle Initial)
Mailing Address 4701 GOLF TERRACE
City EDINA State MN Zip Code 55424-1514
FEC ID number of contributing federal political committee. **C**
Name of Employer Optum Services, Inc Occupation Pres Lif Scis
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3076.80

Date of Receipt 07 / 31 / 2015
Transaction ID : PR1575958538431
Amount of Each Receipt this Period 576.90
P/R Deduction (\$192.30 Bi-Weekly)

B. LAURA A CAHILL
Full Name (Last, First, Middle Initial)
Mailing Address 24 LAKE SIDE ROAD
City MOUNT KISCO State NY Zip Code 10549-4204
FEC ID number of contributing federal political committee. **C**
Name of Employer Optum Services, Inc Occupation Sr Sols Sls Exec Optuml
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR1580863638431
Amount of Each Receipt this Period 42.12
P/R Deduction (\$14.04 Bi-Weekly)

C. THOMAS Paul
Full Name (Last, First, Middle Initial)
Mailing Address 2006 QUEEN AVENUE SOUTH
City MINNEAPOLIS State MN Zip Code 55405-2350
FEC ID number of contributing federal political committee. **C**
Name of Employer United HealthCare Services Inc Occupation UHC Chief Cnsmr Off
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR1580864738431
Amount of Each Receipt this Period 200.00
P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	819.02
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 16 OF 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial)
A. ROBERT WEBB

Mailing Address 4516 DREXEL AVENUE

City EDINA State MN Zip Code 55424-1130

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

Name of Employer United HealthCare Services Inc Occupation SVP UnitedHlth Grp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3076.80**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015

Transaction ID : PR1580865338431

Amount of Each Receipt this Period
576.90

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. RICHARD HUGHES

Mailing Address 735 SAINT MORITZ

City VICTORIA State MN Zip Code 55386-3706

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

Name of Employer United HealthCare Services Inc Occupation SVP COO of Human Capital

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015

Transaction ID : PR1596304138431

Amount of Each Receipt this Period
300.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. THAD JOHNSON

Mailing Address 9741 GLACIER BAY

City EDEN PRAIRIE State MN Zip Code 55347-2615

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

Name of Employer United HealthCare Services Inc Occupation Mkt Group Gen Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015

Transaction ID : PR1596304338431

Amount of Each Receipt this Period
300.00

P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	1176.90
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 192
	<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

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

A. DANIEL SCHUMACHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 5401 LARADA LANE
 City EDINA State MN Zip Code 55436-1024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Mkt Group COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3076.80

Date of Receipt 07 / 31 / 2015
Transaction ID : PR1596305438431
 Amount of Each Receipt this Period 576.90
 P/R Deduction (\$192.30 Bi-Weekly)

B. SCOTT THEISEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1950 MEADOWWOODS TRAIL
 City LONG LAKE State MN Zip Code 55356-9312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Bus Segment CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.68

Date of Receipt 07 / 31 / 2015
Transaction ID : PR1596305638431
 Amount of Each Receipt this Period 57.69
 P/R Deduction (\$19.23 Bi-Weekly)

C. THOMAS LEWIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 306 CHIPPEWA AVENUE
 City TAMPA State FL Zip Code 33606-3614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Hlth Plan CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1442.25

Date of Receipt 07 / 31 / 2015
Transaction ID : PR1596306938431
 Amount of Each Receipt this Period 288.45
 P/R Deduction (\$96.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 923.04
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 18 OF 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ROBERT OBERRENDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 4505 MOORLAND AVENUE
 City EDINA State MN Zip Code 55424-1158
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation SVP Treasurer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1760.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR1596307038431
 Amount of Each Receipt this Period 330.00
 P/R Deduction (\$110.00 Bi-Weekly)

B. MICHAEL ANDERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 17907 INVERNESS CURVE
 City EDEN PRAIRIE State MN Zip Code 55347-2155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Med Clin Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR1596309338431
 Amount of Each Receipt this Period 42.00
 P/R Deduction (\$14.00 Bi-Weekly)

C. DIANE FLYNN
 Full Name (Last, First, Middle Initial)
 Mailing Address 3318 FOXRIDGE CIRCLE
 City TAMPA State FL Zip Code 33618-2149
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Regn Exec Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 624.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR1596309738431
 Amount of Each Receipt this Period 117.00
 P/R Deduction (\$39.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	489.00
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 19 OF 192
	<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

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

A. KURT HEUMANN
Full Name (Last, First, Middle Initial)

Mailing Address 9825 GERALD DR

City SAINT LOUIS State MO Zip Code 63128-1767

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

Name of Employer United HealthCare Services Inc Occupation Hlth Plan CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR1596313738431

Amount of Each Receipt this Period **60.00**

P/R Deduction (\$20.00 Bi-Weekly)

B. KATHLEEN MALLATT
Full Name (Last, First, Middle Initial)

Mailing Address 4304 SOUTH 167 AVENUE

City OMAHA State NE Zip Code 68135-1353

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

Name of Employer United HealthCare Services Inc Occupation Hlth Plan CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **615.36**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR1596315438431

Amount of Each Receipt this Period **115.38**

P/R Deduction (\$38.46 Bi-Weekly)

C. JOHN RENNICK
Full Name (Last, First, Middle Initial)

Mailing Address 3220 LAKEWOOD EDGE DRIVE

City CHARLOTTE State NC Zip Code 28269-7705

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

Name of Employer United HealthCare Services Inc Occupation Med Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **307.68**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR1596316838431

Amount of Each Receipt this Period **57.69**

P/R Deduction (\$19.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **233.07**

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: PAGE 20 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. DANIEL ROSENTHAL
 Full Name (Last, First, Middle Initial)
 Mailing Address 109 SLEEPY HOLLOW LANE
 City ORINDA State CA Zip Code 94563-1340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Pres Ntwk
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1538.40

Date of Receipt 07 / 31 / 2015
Transaction ID : PR1596317338431
 Amount of Each Receipt this Period 288.45
 P/R Deduction (\$96.15 Bi-Weekly)

B. KEVIN RUTH
 Full Name (Last, First, Middle Initial)
 Mailing Address 16621 ALEXANDER MANOR DRIVE
 City SILVER SPRING State MD Zip Code 20905-5028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation SVP, Hlth Advancement
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1538.40

Date of Receipt 07 / 31 / 2015
Transaction ID : PR1596317438431
 Amount of Each Receipt this Period 288.45
 P/R Deduction (\$96.15 Bi-Weekly)

C. DAVID STURKEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1625 CONE FLOWER WAY
 City SUWANEE State GA Zip Code 30024-8576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation KA VP SIs Acct Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 624.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR1596318438431
 Amount of Each Receipt this Period 117.00
 P/R Deduction (\$39.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 693.90
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 21 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. JEFFREY TODD		Date of Receipt MM / DD / YYYY 07 / 31 / 2015
Mailing Address 467 PRAIRIE WAY SOUTH		Transaction ID : PR1596319038431
City BAYPORT	State MN	Zip Code 55003-1607
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer United HealthCare Services Inc	Occupation VP Underwriting	P/R Deduction (\$25.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. M LAURIE WASSERSTEIN		Date of Receipt MM / DD / YYYY 07 / 31 / 2015
Mailing Address 92 GOODWIN CIRCLE		Transaction ID : PR1596319538431
City HARTFORD	State CT	Zip Code 06105-5205
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer United HealthCare Services Inc	Occupation Dir Ntwk Prgms	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68	

Full Name (Last, First, Middle Initial) C. MYRON WERLEY		Date of Receipt MM / DD / YYYY 07 / 31 / 2015
Mailing Address 4260 FOXBERRY COURT		Transaction ID : PR1596319638431
City MEDINA	State MN	Zip Code 55340-9390
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer United HealthCare Services Inc	Occupation Dir Underwriting	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

SUBTOTAL of Receipts This Page (optional).....▶	192.69
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 192
	<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

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

A. JOHN DODDY
Full Name (Last, First, Middle Initial)

Mailing Address 1 ROXITICUS VIEW

City CHESTER State NJ Zip Code 07930-3020

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

Name of Employer Optum Services, Inc Occupation VP Info Tech

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **624.00**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR1600597338431

Amount of Each Receipt this Period **117.00**

P/R Deduction (\$39.00 Bi-Weekly)

B. MICHAEL MICHAUX
Full Name (Last, First, Middle Initial)

Mailing Address 742 GOODRICH AVE

City SAINT PAUL State MN Zip Code 55105-3343

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

Name of Employer Optum Services, Inc Occupation VP GM PCM

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1600.00**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR1600598538431

Amount of Each Receipt this Period **300.00**

P/R Deduction (\$100.00 Bi-Weekly)

C. LEWIS SANDY
Full Name (Last, First, Middle Initial)

Mailing Address 4800 SUNNYSLOPE ROAD E

City EDINA State MN Zip Code 55424-1163

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

Name of Employer United HealthCare Services Inc Occupation SVP Clin Advancement

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1600.00**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR1600598738431

Amount of Each Receipt this Period **300.00**

P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	717.00
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 23 OF 192
	<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

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

A. MATTHEW PETERSON
Full Name (Last, First, Middle Initial)
Mailing Address 2260 FOX STREET
City ORONO State MN Zip Code 55356-8316
FEC ID number of contributing federal political committee. **C**
Name of Employer United HealthCare Services Inc Occupation CEO Ancillary & Ind/Sgt CAO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR1602669938431
Amount of Each Receipt this Period 300.00
P/R Deduction (\$100.00 Bi-Weekly)

B. JEFFREY MALONEY
Full Name (Last, First, Middle Initial)
Mailing Address 6327 PASADENA POINT BLVD S
City GULFPORT State FL Zip Code 33707-3867
FEC ID number of contributing federal political committee. **C**
Name of Employer Optum Services, Inc Occupation VP Gen Mgmt
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1538.40

Date of Receipt 07 / 31 / 2015
Transaction ID : PR1613243538431
Amount of Each Receipt this Period 288.45
P/R Deduction (\$96.15 Bi-Weekly)

C. WILLIAM KENNEDY
Full Name (Last, First, Middle Initial)
Mailing Address 14 MYRA LN
City BURLINGTON State CT Zip Code 06013-1327
FEC ID number of contributing federal political committee. **C**
Name of Employer Optum Services, Inc Occupation VP IT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR1653443138431
Amount of Each Receipt this Period 60.00
P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	648.45
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 24 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. THOMAS BELLAMY

Mailing Address 2743 THOMAS AVENUE SOUTH

City	State	Zip Code
MINNEAPOLIS	MN	55416-4346

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

Name of Employer	Occupation
United HealthCare Services Inc	VP Sls Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **923.20**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR1653444338431

Amount of Each Receipt this Period

173.10

P/R Deduction (\$57.70 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. DANIEL SULLIVAN

Mailing Address 57 QUORN HUNT ROAD

City	State	Zip Code
WEST SIMSBURY	CT	06092-2524

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

Name of Employer	Occupation
United HealthCare Services Inc	VP IT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **615.36**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR1653445838431

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. ELIZABETH CORBIN

Mailing Address 7985 LEA CIRCLE

City	State	Zip Code
BLOOMINGTON	MN	55438-1286

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

Name of Employer	Occupation
United HealthCare Services Inc	VP Hlth Care Initiv

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1112.86**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR1669432238431

Amount of Each Receipt this Period

200.00

P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	488.48
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 25 OF 192
	<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	

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

A. WILLIAM TALAMANTES
Full Name (Last, First, Middle Initial)

Mailing Address 11618 ROLLING MEADOW DR

City State Zip Code
GREAT FALLS VA 22066-1342

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

Name of Employer Occupation
United HealthCare Services Inc Six Sigma Cnslt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **640.00**

Date of Receipt
07 / 31 / 2015

Transaction ID : PR1806444738431

Amount of Each Receipt this Period
120.00

P/R Deduction (\$40.00 Bi-Weekly)

B. PAUL EMERSON
Full Name (Last, First, Middle Initial)

Mailing Address 18855 MEADOW VIEW BLVD

City State Zip Code
PRIOR LAKE MN 55372-3133

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

Name of Employer Occupation
Optum360 Services Inc COO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **615.36**

Date of Receipt
07 / 31 / 2015

Transaction ID : PR1806750338431

Amount of Each Receipt this Period
115.38

P/R Deduction (\$38.46 Bi-Weekly)

C. CATHERINE ANDERSON
Full Name (Last, First, Middle Initial)

Mailing Address 57 SIMMONS LANE

City State Zip Code
SEVERNA PARK MD 21146-1921

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

Name of Employer Occupation
United HealthCare Services Inc VP Bus Dev

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1552.00**

Date of Receipt
07 / 31 / 2015

Transaction ID : PR1903550738431

Amount of Each Receipt this Period
291.00

P/R Deduction (\$97.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **526.38**

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 192
	<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

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

A. KATHLEEN BISHOP-HEROUX
 Full Name (Last, First, Middle Initial)
 Mailing Address 145 COTTAGE RD
 City ENFIELD State CT Zip Code 06082-2208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Dir Gen Mgmt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **320.00**

Date of Receipt **07 / 31 / 2015**
Transaction ID : PR1903560838431
 Amount of Each Receipt this Period **60.00**
 P/R Deduction (\$20.00 Bi-Weekly)

B. ROBERT DUFEK
 Full Name (Last, First, Middle Initial)
 Mailing Address 816 PROMONTORY PLACE
 City EAGAN State MN Zip Code 55123-2297
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Dir IT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt **07 / 31 / 2015**
Transaction ID : PR1903577138431
 Amount of Each Receipt this Period **75.00**
 P/R Deduction (\$25.00 Bi-Weekly)

C. SUSAN EDBERG
 Full Name (Last, First, Middle Initial)
 Mailing Address 9727 WELLINGTON RIDGE
 City WOODBURY State MN Zip Code 55125-9592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation VP Ops
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1600.00**

Date of Receipt **07 / 31 / 2015**
Transaction ID : PR1903578138431
 Amount of Each Receipt this Period **300.00**
 P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	435.00
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 27 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. CHRISTOPHER JOHNSON
Full Name (Last, First, Middle Initial)

Mailing Address 12880 53RD STREET NORTH

City State Zip Code
STILLWATER MN 55082-1063

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

Name of Employer Occupation
Optum Services, Inc VP Gen Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **624.00**

Date of Receipt
07 / 31 / 2015
Transaction ID : PR1903591138431

Amount of Each Receipt this Period
117.00

P/R Deduction (\$39.00 Bi-Weekly)

B. STEVEN PENN
Full Name (Last, First, Middle Initial)

Mailing Address 6766 IDLEWOOD WAY

City State Zip Code
EDEN PRAIRIE MN 55346-3506

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

Name of Employer Occupation
Optum Services, Inc VP Fin

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **224.00**

Date of Receipt
07 / 31 / 2015
Transaction ID : PR1903612938431

Amount of Each Receipt this Period
42.00

P/R Deduction (\$14.00 Bi-Weekly)

C. JOHN SANTELLI
Full Name (Last, First, Middle Initial)

Mailing Address 20030 EXCELSIOR BLVD

City State Zip Code
EXCELSIOR MN 55331-8727

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

Name of Employer Occupation
Optum Services, Inc SVP CIO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1600.00**

Date of Receipt
07 / 31 / 2015
Transaction ID : PR1903622038431

Amount of Each Receipt this Period
300.00

P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **459.00**

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 28 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. LORI STEERUP		Date of Receipt MM / DD / YYYY 07 / 31 / 2015
Mailing Address 7019 DONLEA LANE		Transaction ID : PR1903628638431
City EDEN PRAIRIE	State MN	Zip Code 55346-3164
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.00
Name of Employer United HealthCare Services Inc	Occupation Human Capital Partner Mgr	P/R Deduction (\$14.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 224.00	

Full Name (Last, First, Middle Initial) B. PAUL WEYMOUTH		Date of Receipt MM / DD / YYYY 07 / 31 / 2015
Mailing Address 317 WRIGHTS MILL RD		Transaction ID : PR1903636938431
City COVENTRY	State CT	Zip Code 06238-1559
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer Optum Services, Inc	Occupation VP IT	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68	

Full Name (Last, First, Middle Initial) C. BRADLEY ALLEN		Date of Receipt MM / DD / YYYY 07 / 31 / 2015
Mailing Address 1046 THORNBERRY CREEK DR		Transaction ID : PR2119466838431
City ONEIDA	State WI	Zip Code 54155-8632
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer United HealthCare Services Inc	Occupation Sr Assc Gen Counsel	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

SUBTOTAL of Receipts This Page (optional).....▶	159.69
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 29 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. RUSSELL BENNETT
Full Name (Last, First, Middle Initial)
Mailing Address 4 HALSEY AVE

City LAGUNA NIGUEL	State CA	Zip Code 92677-5327
-----------------------	-------------	------------------------

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

Name of Employer United HealthCare Services Inc	Occupation Dir Mktg Bus Dev
----------------------------------------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2119468038431

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Bi-Weekly)

B. KATHIE BRYAN
Full Name (Last, First, Middle Initial)
Mailing Address 912 JOSHUA PLACE

City SAN DIEGO	State CA	Zip Code 92154-2537
-------------------	-------------	------------------------

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

Name of Employer United HealthCare Services Inc	Occupation Assc Dir Mktg Comm
----------------------------------------------------	----------------------------------

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
07	/	31	/	2015

Transaction ID : PR2119469438431

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Bi-Weekly)

C. COLLEEN CAMPBELL
Full Name (Last, First, Middle Initial)
Mailing Address 4936 LONGMEADOW PARK ST

City ORLANDO	State FL	Zip Code 32811-7485
-----------------	-------------	------------------------

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

Name of Employer United HealthCare Services Inc	Occupation Assc Dir Clin Qlty
----------------------------------------------------	----------------------------------

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
07	/	31	/	2015

Transaction ID : PR2119469938431

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	180.00
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 30 OF 192
	<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

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

A. RICHARD CROSS
Full Name (Last, First, Middle Initial)

Mailing Address 11361 DONOVAN ROAD

City ROSSMOOR State CA Zip Code 90720-2931

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

Name of Employer Optum Services, Inc Occupation Deputy Gen Counsel Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2119471838431

Amount of Each Receipt this Period 75.00

P/R Deduction (\$25.00 Bi-Weekly)

B. KENNETH DAVIS
Full Name (Last, First, Middle Initial)

Mailing Address 315 N 71ST ST

City SEATTLE State WA Zip Code 98103-5019

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

Name of Employer United HealthCare Services Inc Occupation Med Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2119472538431

Amount of Each Receipt this Period 60.00

P/R Deduction (\$20.00 Bi-Weekly)

C. LINDA DAYAN
Full Name (Last, First, Middle Initial)

Mailing Address 5364 E ABBEYFIELD ST

City LONG BEACH State CA Zip Code 90815-3023

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

Name of Employer Optum Services, Inc Occupation Chief of Staff

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 304.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2119472638431

Amount of Each Receipt this Period 57.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 192.00

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 31 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. TODD DEMBROSKI
Full Name (Last, First, Middle Initial)

Mailing Address 1390 FINCH LN

City GREEN BAY State WI Zip Code 54313-6400

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

Name of Employer United HealthCare Services Inc Occupation Dir Act Svs

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
07 / 31 / 2015

Transaction ID : PR2119472838431

Amount of Each Receipt this Period
45.00

P/R Deduction (\$15.00 Bi-Weekly)

B. AMY GILDERNICK
Full Name (Last, First, Middle Initial)

Mailing Address 2709 WILLIAMS GRANT

City DE PERE State WI Zip Code 54115-9456

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

Name of Employer United HealthCare Services Inc Occupation Assc Dir Clms

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015

Transaction ID : PR2119475238431

Amount of Each Receipt this Period
60.00

P/R Deduction (\$20.00 Bi-Weekly)

C. DAVID HANSEN
Full Name (Last, First, Middle Initial)

Mailing Address 33 VIA CONOCIDO

City SAN CLEMENTE State CA Zip Code 92673-7044

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

Name of Employer United HealthCare Services Inc Occupation Regn Pres Ntwk Mgmt

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
07 / 31 / 2015

Transaction ID : PR2119476738431

Amount of Each Receipt this Period
405.00

P/R Deduction (\$135.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	510.00
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 32 OF 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial)
A. MADELINE HARLAN

Mailing Address 3444 CORTES PLACE

City ROUND ROCK State TX Zip Code 78665-5666

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

Name of Employer United HealthCare Services Inc Occupation Dir Regl Affs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.60**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR2119476938431

Amount of Each Receipt this Period **43.35**

P/R Deduction (\$14.45 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. SAMUEL HO

Mailing Address 4220 OCEAN DR

City MANHATTAN BEACH State CA Zip Code 90266-3059

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

Name of Employer United HealthCare Services Inc Occupation Mkt Grp Chief Clin Off

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2460.80**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR2119477938431

Amount of Each Receipt this Period **461.40**

P/R Deduction (\$153.80 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. BRIAN JEFFREY

Mailing Address 9 RIMROCK

City IRVINE State CA Zip Code 92603-3604

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

Name of Employer United HealthCare Services Inc Occupation Regn Pres Ntwk Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR2119479138431

Amount of Each Receipt this Period **75.00**

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	579.75
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 192
	<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

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

A. JOHN JONES
Full Name (Last, First, Middle Initial)

Mailing Address 725 N RANCHO SANTIAGO BLVD

City	State	Zip Code
ORANGE	CA	92869-1951

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

Name of Employer	Occupation
Optum Services, Inc	VP Govt Affs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1536.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015

Transaction ID : PR2119479238431

Amount of Each Receipt this Period
288.00

P/R Deduction (\$96.00 Bi-Weekly)

B. MARK KNUTSON
Full Name (Last, First, Middle Initial)

Mailing Address 19312 FAIRHAVEN EXT

City	State	Zip Code
SANTA ANA	CA	92705-6310

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

Name of Employer	Occupation
Optum Services, Inc	VP Cust Service

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
 07 / 31 / 2015

Transaction ID : PR2119480238431

Amount of Each Receipt this Period
45.00

P/R Deduction (\$15.00 Bi-Weekly)

C. SANDY M LUEDKE
Full Name (Last, First, Middle Initial)

Mailing Address 1208 COPRINUS DR

City	State	Zip Code
GREEN BAY	WI	54313-7286

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

Name of Employer	Occupation
United HealthCare Services Inc	IT Database Cnslt

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
 07 / 31 / 2015

Transaction ID : PR2119482238431

Amount of Each Receipt this Period
45.00

P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	378.00
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 34 OF 192
	<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
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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. HEATHER MACE-MEADOR
 Full Name (Last, First, Middle Initial)
 Mailing Address 13531 CARLTON OAKS
 City SAN ANTONIO State TX Zip Code 78232-4902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Dir Med Clin Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2119482538431
 Amount of Each Receipt this Period 60.00
 P/R Deduction (\$20.00 Bi-Weekly)

B. JEFFREY MASON
 Full Name (Last, First, Middle Initial)
 Mailing Address 6318 DWANE AVENUE
 City SAN DIEGO State CA Zip Code 92120-3836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Sr Med Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2119483038431
 Amount of Each Receipt this Period 45.00
 P/R Deduction (\$15.00 Bi-Weekly)

C. SCOTT NEURURER
 Full Name (Last, First, Middle Initial)
 Mailing Address 23822 VIA MONTE
 City COTO DE CAZA State CA Zip Code 92679-4001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation VP Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2119484938431
 Amount of Each Receipt this Period 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	147.12
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:	PAGE 35 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. KEITH E NYGARD
Full Name (Last, First, Middle Initial)

Mailing Address 1139 E OCEAN BOULEVARD #106

City LONG BEACH State CA Zip Code 90802-6521

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

Name of Employer United HealthCare Services Inc Occupation Compli Cnslt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR2119485038431

Amount of Each Receipt this Period **60.00**

P/R Deduction (\$20.00 Bi-Weekly)

B. TRACY L OLLMANN-WAGNER
Full Name (Last, First, Middle Initial)

Mailing Address 2839 TIMBER LANE

City GREEN BAY State WI Zip Code 54313-5841

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

Name of Employer United HealthCare Services Inc Occupation Mgr Sls Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR2119485238431

Amount of Each Receipt this Period **45.00**

P/R Deduction (\$15.00 Bi-Weekly)

C. LYND A PAXSON
Full Name (Last, First, Middle Initial)

Mailing Address 3924 E GARNET PL

City HIGHLANDS RANCH State CO Zip Code 80126-5044

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

Name of Employer United HealthCare Services Inc Occupation Sr Field Acct Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR2119485838431

Amount of Each Receipt this Period **75.00**

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **180.00**

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 36 OF 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. MICHELLE PETERS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1128 COUNTRYSIDE DR
 City DE PERE State WI Zip Code 54115-1040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Dir Act Svs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2119486438431
 Amount of Each Receipt this Period 45.00
 P/R Deduction (\$15.00 Bi-Weekly)

B. AUSTIN PITTMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 LOCH RIDGE DRIVE
 City GREENSBORO State NC Zip Code 27408-3868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Bus Segment CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2160.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2119486738431
 Amount of Each Receipt this Period 405.00
 P/R Deduction (\$135.00 Bi-Weekly)

C. CYNTHIA POLICH
 Full Name (Last, First, Middle Initial)
 Mailing Address 3401 E VIA PALOMITA
 City TUCSON State AZ Zip Code 85718-3371
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation SVP Strat Initiv
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2119486838431
 Amount of Each Receipt this Period 300.00
 P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	750.00
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 37 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. JAMES PROCHNOW

Mailing Address 143 RUSTIC OAK DRIVE

City State Zip Code
 LUXEMBURG WI 54217-7320

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

Name of Employer Occupation
 United HealthCare Services Inc Dir Fin

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 224.00

Date of Receipt
 07 / 31 / 2015
Transaction ID : PR2119487238431

Amount of Each Receipt this Period
 42.00

P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. SHARON RICCIUTI

Mailing Address 55 PERENNIAL

City State Zip Code
 IRVINE CA 92603-0621

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

Name of Employer Occupation
 United HealthCare Services Inc Sr Bus Anlys Cnslt

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 224.64

Date of Receipt
 07 / 31 / 2015
Transaction ID : PR2119487938431

Amount of Each Receipt this Period
 42.12

P/R Deduction (\$14.04 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. MARILYNN STYERS

Mailing Address 8027 LAKERIDGE DR SE

City State Zip Code
 LACEY WA 98503-4129

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

Name of Employer Occupation
 United HealthCare Services Inc VP Med Clin Ops

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 320.00

Date of Receipt
 07 / 31 / 2015
Transaction ID : PR2119490738431

Amount of Each Receipt this Period
 60.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 144.12

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 38 OF 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. CHERYL TANIGAWA MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 5598 NAPLES CANAL
 City State Zip Code
 LONG BEACH CA 90803-4018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc SVP Entrprs Hlth Svs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 1249.95

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2119491138431
 Amount of Each Receipt this Period
 288.45
 P/R Deduction (\$96.15 Bi-Weekly)

B. CHERYL THOMSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 222 FOREST DR
 City State Zip Code
 SOBIESKI WI 54171-9748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Dir Compli
 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
 07 / 31 / 2015
Transaction ID : PR2119491638431
 Amount of Each Receipt this Period
 45.00
 P/R Deduction (\$15.00 Bi-Weekly)

C. STEVEN TUCKER
 Full Name (Last, First, Middle Initial)
 Mailing Address 12331 COUNTRY LANE
 City State Zip Code
 SANTA ANA CA 92705-3330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Optum Services, Inc VP Regl Affs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 1536.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2119492038431
 Amount of Each Receipt this Period
 288.00
 P/R Deduction (\$96.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	621.45
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 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. SUSAN VANASTEN
 Full Name (Last, First, Middle Initial)
 Mailing Address N2249 NICOLE COURT
 City KAUKAUNA State WI Zip Code 54130-9462
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Site Dir Medicr Ins Sls
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 640.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2119492638431
 Amount of Each Receipt this Period 120.00
 P/R Deduction (\$40.00 Bi-Weekly)

B. LINDA DAUGHERTY
 Full Name (Last, First, Middle Initial)
 Mailing Address 15442 NORTH 19TH WAY
 City PHOENIX State AZ Zip Code 85022-3329
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Assc Gen Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2119493538431
 Amount of Each Receipt this Period 60.00
 P/R Deduction (\$20.00 Bi-Weekly)

C. GREGORY WRIGHT
 Full Name (Last, First, Middle Initial)
 Mailing Address 13901 MAUVE DRIVE
 City SANTA ANA State CA Zip Code 92705-2649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Regn CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2119494138431
 Amount of Each Receipt this Period 75.00
 P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 255.00
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 40 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. GEORGE YOUNG
 Full Name (Last, First, Middle Initial)
 Mailing Address 36296 N 98TH WAY
 City State Zip Code
 SCOTTSDALE AZ 85262-3138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Hlth Plan CEO
 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
 07 / 31 / 2015
Transaction ID : PR2119494438431
 Amount of Each Receipt this Period
 45.00
 P/R Deduction (\$15.00 Bi-Weekly)

B. JOHN J MASON
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 2083
 City State Zip Code
 CYPRESS CA 90630-1583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc VP Comm
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3076.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2126373838431
 Amount of Each Receipt this Period
 576.90
 P/R Deduction (\$192.30 Bi-Weekly)

C. FORREST BURKE
 Full Name (Last, First, Middle Initial)
 Mailing Address 380 LEAF STREET
 City State Zip Code
 ORONO MN 55356-9733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Pres PS Labor Trust
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2133132438431
 Amount of Each Receipt this Period
 300.00
 P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 921.90
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 41 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. DANIEL CUMMINGS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1929 FAIRMOUNT AVE
 City SAINT PAUL State MN Zip Code 55105-1539
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Dir Fin
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2133132638431
 Amount of Each Receipt this Period 45.00
 P/R Deduction (\$15.00 Bi-Weekly)

B. BROR HULTGREN
 Full Name (Last, First, Middle Initial)
 Mailing Address 408 22ND ST
 City GOLDEN State CO Zip Code 80401-2452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Regn CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1538.40

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2133133238431
 Amount of Each Receipt this Period 288.45
 P/R Deduction (\$96.15 Bi-Weekly)

C. ALLEN MILLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 6209 CRESCENT DRIVE
 City EDINA State MN Zip Code 55436-2530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Regn Exec Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2133133638431
 Amount of Each Receipt this Period 105.00
 P/R Deduction (\$35.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 438.45
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 192
	<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

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

A. SUSAN MORISATO
Full Name (Last, First, Middle Initial)

Mailing Address 238 ARDMORE ROAD

City DES PLAINES State IL Zip Code 60016-2119

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

Name of Employer United HealthCare Services Inc Occupation Pres Insurance Sols

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3088.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2133133838431

Amount of Each Receipt this Period 579.00

P/R Deduction (\$193.00 Bi-Weekly)

B. KIMBERLY NETTLETON
Full Name (Last, First, Middle Initial)

Mailing Address 5003 DARNELL

City HOUSTON State TX Zip Code 77096-1510

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

Name of Employer United HealthCare Services Inc Occupation Dir Prod

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2133133938431

Amount of Each Receipt this Period 45.00

P/R Deduction (\$15.00 Bi-Weekly)

C. T JEFFREY PUTNAM
Full Name (Last, First, Middle Initial)

Mailing Address 303 ELMWOOD PLACE WEST

City MINNEAPOLIS State MN Zip Code 55419-1349

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

Name of Employer United HealthCare Services Inc Occupation SVP Fin Plng Anlys

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3076.80

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2133134238431

Amount of Each Receipt this Period 576.90

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.90

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 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. DIANE SCHIMMELBUSCH
Full Name (Last, First, Middle Initial)

Mailing Address 2203 RIVER FALLS DRIVE

City KINGWOOD State TX Zip Code 77339-3124

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

Name of Employer Optum Services, Inc Occupation VP Gen Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2133134638431

Amount of Each Receipt this Period 75.00

P/R Deduction (\$25.00 Bi-Weekly)

B. ROBERT FALKENBERG
Full Name (Last, First, Middle Initial)

Mailing Address 6069 WEATHERED OAK CT

City WESTERVILLE State OH Zip Code 43082-8304

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

Name of Employer United HealthCare Services Inc Occupation Hlth Plan CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 615.36

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2145728438431

Amount of Each Receipt this Period 115.38

P/R Deduction (\$38.46 Bi-Weekly)

C. LEAH RUMMEL
Full Name (Last, First, Middle Initial)

Mailing Address 12100 TRAUTWEIN ROAD

City AUSTIN State TX Zip Code 78737-9358

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

Name of Employer United HealthCare Services Inc Occupation Dir Govt Affs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2145729538431

Amount of Each Receipt this Period 45.00

P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.38

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 44 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. DANNETTE SMITH
Full Name (Last, First, Middle Initial)
Mailing Address 4200 ALDEN DRIVE

City EDINA	State MN	Zip Code 55416-5010
---------------	-------------	------------------------

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

Name of Employer United HealthCare Services Inc	Occupation Sr Deputy Gen Counsel
----------------------------------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3088.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2145729938431

Amount of Each Receipt this Period
579.00

P/R Deduction (\$193.00 Bi-Weekly)

B. MARGARET SPARKS
Full Name (Last, First, Middle Initial)
Mailing Address 26091 RED CORRAL ROAD

City LAGUNA HILLS	State CA	Zip Code 92653-6310
----------------------	-------------	------------------------

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

Name of Employer Optum Services, Inc	Occupation VP Actuary
-----------------------------------------	--------------------------

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
07	/	31	/	2015

Transaction ID : PR2145730238431

Amount of Each Receipt this Period
150.00

P/R Deduction (\$50.00 Bi-Weekly)

C. DAVID SPIVACK
Full Name (Last, First, Middle Initial)
Mailing Address 37 HIDDEN TRAIL

City IRVINE	State CA	Zip Code 92603-0212
----------------	-------------	------------------------

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

Name of Employer Optum Services, Inc	Occupation SVP Bus Ops
-----------------------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2884.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2162867638431

Amount of Each Receipt this Period
576.90

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	1305.90
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 192
	<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

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

Full Name (Last, First, Middle Initial) A. CHRISTINE GIBSON		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 31 / 2015 Transaction ID : PR2225166738431
Mailing Address 8516 29TH AVE N		Amount of Each Receipt this Period 346.14
City NEW HOPE	State MN	Zip Code 55427-2622
FEC ID number of contributing federal political committee. C	P/R Deduction (\$115.38 Bi-Weekly)	
Name of Employer Optum Services, Inc	Occupation VP Strat Initiv	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1846.08	

Full Name (Last, First, Middle Initial) B. JEAN-FRANCOIS BEAULE		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 31 / 2015 Transaction ID : PR2225813638431
Mailing Address 7 STRATFORD RD		Amount of Each Receipt this Period 173.10
City FARMINGTON	State CT	Zip Code 06032-1444
FEC ID number of contributing federal political committee. C	P/R Deduction (\$57.70 Bi-Weekly)	
Name of Employer United HealthCare Services Inc	Occupation SVP Hlth Advancement	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 923.20	

Full Name (Last, First, Middle Initial) C. NANCY CARRUTH		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 31 / 2015 Transaction ID : PR2225818438431
Mailing Address 753 WOOD HILL DRIVE		Amount of Each Receipt this Period 45.00
City CHANHASSEN	State MN	Zip Code 55317-9561
FEC ID number of contributing federal political committee. C	P/R Deduction (\$15.00 Bi-Weekly)	
Name of Employer Optum Services, Inc	Occupation Dir IT Proj Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional).....▶	564.24
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 46 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. MICHAEL MCGUIRE

Mailing Address 437 DRURY LANE

City State Zip Code
 WYCKOFF NJ 07481-2204

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

Name of Employer Occupation
 United HealthCare Services Inc Hlth Plan CEO

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **615.36**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015

Transaction ID : PR2225818838431

Amount of Each Receipt this Period
115.38

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. ERIC RANGEN

Mailing Address 15348 RED OAKS ROAD SE

City State Zip Code
 PRIOR LAKE MN 55372-1834

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

Name of Employer Occupation
 United HealthCare Services Inc SVP Chief Acctng Off

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3076.80**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015

Transaction ID : PR2225819338431

Amount of Each Receipt this Period
576.90

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. JOHN RYAN

Mailing Address 45 WESTMORELAND LN

City State Zip Code
 NAPERVILLE IL 60540-5817

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

Name of Employer Occupation
 United HealthCare Services Inc RVP Clnt Mgmt Svc

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **923.04**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015

Transaction ID : PR2225819638431

Amount of Each Receipt this Period
173.07

P/R Deduction (\$57.69 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **865.35**

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 192
	<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

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

A. ROY SAILOR
Full Name (Last, First, Middle Initial)

Mailing Address 276 COYOTE WILLOW DRIVE

City COLORADO SPRINGS State CO Zip Code 80921-7631

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

Name of Employer Optum Services, Inc Occupation Dir Ntwk Contrctng

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1230.72

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2225819738431

Amount of Each Receipt this Period 230.76

P/R Deduction (\$76.92 Bi-Weekly)

B. MICHAEL CORNE
Full Name (Last, First, Middle Initial)

Mailing Address 12642 CHIEFS COURT

City FISHERS State IN Zip Code 46037-9553

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

Name of Employer United HealthCare Services Inc Occupation VP Regl Affs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2231346938431

Amount of Each Receipt this Period 42.00

P/R Deduction (\$14.00 Bi-Weekly)

C. KAREN DIPALMO
Full Name (Last, First, Middle Initial)

Mailing Address 7533 PRAIRIE VIEW DR

City INDIANAPOLIS State IN Zip Code 46256-8408

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

Name of Employer United HealthCare Services Inc Occupation Dir Gen Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2231347238431

Amount of Each Receipt this Period 90.00

P/R Deduction (\$30.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 362.76

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 48 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. MICHAEL CONNLY

Mailing Address 570 MONTCALM PL

City SAINT PAUL State MN Zip Code 55116-1730

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

Name of Employer Optum Services, Inc Occupation Chief Tech Off

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015

Transaction ID : PR2247625838431

Amount of Each Receipt this Period
300.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. JOSEPH CARCIONE

Mailing Address 11 CARRIAGE WAY

City WHITE PLAINS State NY Zip Code 10605-5424

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

Name of Employer United HealthCare Services Inc Occupation Med Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **923.20**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015

Transaction ID : PR2247626838431

Amount of Each Receipt this Period
173.10

P/R Deduction (\$57.70 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. KEVIN KANTOLA

Mailing Address 7031 HALSTEAD DRIVE

City MINNETRISTA State MN Zip Code 55364-3201

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

Name of Employer Optum Services, Inc Occupation VP IT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **624.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015

Transaction ID : PR2247627038431

Amount of Each Receipt this Period
117.00

P/R Deduction (\$39.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	590.10
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 49 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. DENNIS O'BRIEN
Full Name (Last, First, Middle Initial)

Mailing Address 61 LOUGHLIN AVE

City COS COB State CT Zip Code 06807-2621

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

Name of Employer United HealthCare Services Inc Occupation Regn CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1538.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015

Transaction ID : PR2247627338431

Amount of Each Receipt this Period
288.45

P/R Deduction (\$96.15 Bi-Weekly)

B. JEFFERY VERNEY
Full Name (Last, First, Middle Initial)

Mailing Address 266 WESTLEDGE ROAD

City WEST SIMSBURY State CT Zip Code 06092-2017

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

Name of Employer United HealthCare Services Inc Occupation VP Gen Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
923.20

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015

Transaction ID : PR2247627438431

Amount of Each Receipt this Period
173.10

P/R Deduction (\$57.70 Bi-Weekly)

C. SANJAY GARODIA
Full Name (Last, First, Middle Initial)

Mailing Address 282 MIDDAUGH

City CLARENDON HILLS State IL Zip Code 60514-1067

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

Name of Employer Optum Services, Inc Occupation COO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
538.44

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015

Transaction ID : PR2247627838431

Amount of Each Receipt this Period
115.38

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	576.93
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:	PAGE 50 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. DANIEL OHMAN

Mailing Address 8970 MOOR PARK RUN

City State Zip Code
DULUTH GA 30097-6621

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

Name of Employer Occupation
United HealthCare Services Inc Regn CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1538.40

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2247628038431

Amount of Each Receipt this Period
288.45

P/R Deduction (\$96.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. JOHN PRINCE

Mailing Address 546 HARRINGTON ROAD

City State Zip Code
WAYZATA MN 55391-1550

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

Name of Employer Occupation
Optum Services, Inc Mkt Group COO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1552.00

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2259738438431

Amount of Each Receipt this Period
291.00

P/R Deduction (\$97.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. CHRISTOPHER CRONN

Mailing Address 1122 COLORADO STREET
SUITE 2399

City State Zip Code
AUSTIN TX 78701-2132

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

Name of Employer Occupation
United HealthCare Services Inc Govt Affs Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
615.36

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2270522938431

Amount of Each Receipt this Period
115.38

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 694.83

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 51 OF 192 (check only one)
<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"/>	<input type="checkbox"/> 17

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

A. MJ FRASCINO
Full Name (Last, First, Middle Initial)
Mailing Address 7 PIONEER DRIVE

City ELLINGTON	State CT	Zip Code 06029-3221
-------------------	-------------	------------------------

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

Name of Employer United HealthCare Services Inc	Occupation Dir Mktg
----------------------------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2402316538431

Amount of Each Receipt this Period

42.00

P/R Deduction (\$14.00 Bi-Weekly)

B. ANGELA KEPLEY CARRIER
Full Name (Last, First, Middle Initial)
Mailing Address 3219 PENINSULA DRIVE

City JAMESTOWN	State NC	Zip Code 27282-8717
-------------------	-------------	------------------------

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

Name of Employer United HealthCare Services Inc	Occupation Dir Med Clin Ops
----------------------------------------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2402317738431

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Bi-Weekly)

C. MARILYN LEVI-BAUMGARTEN
Full Name (Last, First, Middle Initial)
Mailing Address 4800 W 27TH ST

City SAINT LOUIS PARK	State MN	Zip Code 55416-1933
--------------------------	-------------	------------------------

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

Name of Employer Optum Services, Inc	Occupation Dir Gen Mgmt
-----------------------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2402317938431

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	162.00
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 52 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. JAKE LOGAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 4826 EAST CALLE REDONDA
 City State Zip Code
 PHOENIX AZ 85018-2931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Govt Affs Dir
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1538.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2402318238431
 Amount of Each Receipt this Period
 288.45
 P/R Deduction (\$96.15 Bi-Weekly)

B. STACY MCGRATH
 Full Name (Last, First, Middle Initial)
 Mailing Address 5801 CHOWEN AVE S
 City State Zip Code
 EDINA MN 55410-2759
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Optum Services, Inc Dir Proj Mgmt
 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
 07 / 31 / 2015
Transaction ID : PR2402318538431
 Amount of Each Receipt this Period
 45.00
 P/R Deduction (\$15.00 Bi-Weekly)

C. SHELLEY CRANLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 3801 MAURICE COURT
 City State Zip Code
 LAS VEGAS NV 89108-5245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Dir Regl Affs
 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
 07 / 31 / 2015
Transaction ID : PR2402444438431
 Amount of Each Receipt this Period
 75.00
 P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 408.45
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 53 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. JAY ANLIKER
Full Name (Last, First, Middle Initial)

Mailing Address 4306 MOUNTAIN LANE

City WAUSAU State WI Zip Code 54401-8543

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

Name of Employer United HealthCare Services Inc Occupation CEO TPA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015

Transaction ID : PR2402445038431

Amount of Each Receipt this Period
60.00

P/R Deduction (\$20.00 Bi-Weekly)

B. JAMES BECKER
Full Name (Last, First, Middle Initial)

Mailing Address 378 FERNDALE ROAD WEST

City WAYZATA State MN Zip Code 55391-1559

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

Name of Employer United HealthCare Services Inc Occupation SVP Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3076.80**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015

Transaction ID : PR2402445138431

Amount of Each Receipt this Period
576.90

P/R Deduction (\$192.30 Bi-Weekly)

C. JAMES COLEMAN
Full Name (Last, First, Middle Initial)

Mailing Address 4720 WEST 66TH STREET

City EDINA State MN Zip Code 55435-1506

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

Name of Employer United HealthCare Services Inc Occupation Mkt Grp SVP, Human Capital

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015

Transaction ID : PR2402445238431

Amount of Each Receipt this Period
300.00

P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	936.90
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 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. JOHN LARSEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 11688 TANGLEWOOD DRIVE
 City EDEN PRAIRIE State MN Zip Code 55347-4726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Bus Segment CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3088.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2402445638431
 Amount of Each Receipt this Period 579.00
 P/R Deduction (\$193.00 Bi-Weekly)

B. JOY HIGA
 Full Name (Last, First, Middle Initial)
 Mailing Address 2208 ELM AVENUE
 City MANHATTAN BEACH State CA Zip Code 90266-2809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Regl Affs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2402446238431
 Amount of Each Receipt this Period 90.00
 P/R Deduction (\$30.00 Bi-Weekly)

C. CORY ALEXANDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 4203 BRADLEY LANE
 City CHEVY CHASE State MD Zip Code 20815-5234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation EVP External Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3076.80

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2405428838431
 Amount of Each Receipt this Period 576.90
 P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	1245.90
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 55 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. KAREN SAELENS
 Full Name (Last, First, Middle Initial)
 Mailing Address 105 N FLORENCE AVE
 City LITCHFIELD PARK State AZ Zip Code 85340-4424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Exec Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2408544838431
 Amount of Each Receipt this Period 60.00
 P/R Deduction (\$20.00 Bi-Weekly)

B. KATHLYN WEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 2225 46TH ST NW
 City WASHINGTON State DC Zip Code 20007-1032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation SVP State SIs Optuml
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2408545038431
 Amount of Each Receipt this Period 60.00
 P/R Deduction (\$20.00 Bi-Weekly)

C. JEFFREY CORZINE
 Full Name (Last, First, Middle Initial)
 Mailing Address 9350 TRACEYTON DRIVE
 City DUBLIN State OH Zip Code 43017-9689
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Dir Mktg Bus Dev
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2437119738431
 Amount of Each Receipt this Period 60.00
 P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 180.00
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 56 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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 (Last, First, Middle Initial)
A. WILLIAM HAGAN

Mailing Address **6536 E GREYTHORN DRIVE**

City **SCOTTSDALE** State **AZ** Zip Code **85266-6761**

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

Name of Employer **United HealthCare Services Inc** Occupation **Chief Growth Off**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **615.36**

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

Transaction ID : PR2437120038431

Amount of Each Receipt this Period

1	1	5	3	8
.	3	8		

115.38

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. RITA JOHNSON-MILLS

Mailing Address **235 GOVERNORS WAY**

City **BRENTWOOD** State **TN** Zip Code **37027-8931**

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

Name of Employer **United HealthCare Services Inc** Occupation **Hlth Plan CEO**

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
0	7			3	1			2	0	1	5		

Transaction ID : PR2437120138431

Amount of Each Receipt this Period

4	5	0	0	0
---	---	---	---	---

45.00

P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. JACK WEISS

Mailing Address **6245 NORTH 75 STREET**

City **SCOTTSDALE** State **AZ** Zip Code **85250-4621**

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

Name of Employer **United HealthCare Services Inc** Occupation **Bus Seg Chief Med Off**

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
0	7			3	1			2	0	1	5		

Transaction ID : PR2437120538431

Amount of Each Receipt this Period

7	5	0	0	0
---	---	---	---	---

75.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	235.38
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 192
	<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	

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

A. PAUL BALTHAZOR
Full Name (Last, First, Middle Initial)

Mailing Address 9013 FARNSWORTH AVENUE NORTH

City State Zip Code
BROOKLYN PARK MN 55443-1754

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

Name of Employer Occupation
United HealthCare Services Inc Bus Segment COO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **960.00**

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2437120738431

Amount of Each Receipt this Period
180.00

P/R Deduction (\$60.00 Bi-Weekly)

B. LAURA NESS
Full Name (Last, First, Middle Initial)

Mailing Address 10550 PINNACLE WAY

City State Zip Code
WOODBURY MN 55129-4282

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

Name of Employer Occupation
United HealthCare Services Inc VP Gen Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **624.00**

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2437121538431

Amount of Each Receipt this Period
117.00

P/R Deduction (\$39.00 Bi-Weekly)

C. JOHN COSGRIFF
Full Name (Last, First, Middle Initial)

Mailing Address 1837 SUMMIT LANE

City State Zip Code
MENDOTA HEIGHTS MN 55118-4137

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

Name of Employer Occupation
United HealthCare Services Inc VP Strategy

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **3076.80**

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2437121638431

Amount of Each Receipt this Period
576.90

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	873.90
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 58 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. PETER RAINEY
Full Name (Last, First, Middle Initial)

Mailing Address 3115 WEST 47 STREET

City State Zip Code
MINNEAPOLIS MN 55410-1857

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

Name of Employer Occupation
United HealthCare Services Inc VP Fin

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1840.00

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2437127538431

Amount of Each Receipt this Period
345.00

P/R Deduction (\$115.00 Bi-Weekly)

B. ROBIN LIPPERT
Full Name (Last, First, Middle Initial)

Mailing Address UNIT 9600 BOX 2

City State Zip Code
DPO AP 96209-0002

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

Name of Employer Occupation
United HealthCare Services Inc VP External Affs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
3076.96

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2439928038431

Amount of Each Receipt this Period
576.93

P/R Deduction (\$192.31 Bi-Weekly)

C. STEPHEN HEYMAN
Full Name (Last, First, Middle Initial)

Mailing Address 5300 SHERRILL AVENUE

City State Zip Code
CHEVY CHASE MD 20815-3720

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

Name of Employer Occupation
United HealthCare Services Inc VP Govt Affs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2444265738431

Amount of Each Receipt this Period
300.00

P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 1221.93

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:	PAGE 59 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. DONALD LANGER

Mailing Address 5110 OAK RAMBLING DRIVE

City KATY	State TX	Zip Code 77494-1971
--------------	-------------	------------------------

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

Name of Employer United HealthCare Services Inc	Occupation Hlth Plan CEO
----------------------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2445015438431

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. NANCY LIND

Mailing Address 2703 NORTHVIEW LANE

City CEDAR FALLS	State IA	Zip Code 50613-1655
---------------------	-------------	------------------------

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

Name of Employer United HealthCare Services Inc	Occupation Dir Gen Mgmt
----------------------------------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2445016238431

Amount of Each Receipt this Period

42.00

P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. AMY ADLINGTON SHKABERIN

Mailing Address 4329 EWING AVE S

City MINNEAPOLIS	State MN	Zip Code 55410-1342
---------------------	-------------	------------------------

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

Name of Employer Optum Services, Inc	Occupation VP Human Capital
-----------------------------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1538.40**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2445016438431

Amount of Each Receipt this Period

288.45

P/R Deduction (\$96.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	390.45
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 60 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. LILLI ANN HIRSH
 Full Name (Last, First, Middle Initial)
 Mailing Address 7379 DEVIN LANE
 City State Zip Code
 SHAKOPEE MN 55379-7029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Human Capital Partner Mgr
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 224.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2445016738431
 Amount of Each Receipt this Period
 42.00
 P/R Deduction (\$14.00 Bi-Weekly)

B. DAVID SIEGEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 264 LAKEWOOD DRIVE
 City State Zip Code
 BLOOMFIELD HILLS MI 48304-3531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Med Dir
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 730.08

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2445017138431
 Amount of Each Receipt this Period
 136.89
 P/R Deduction (\$45.63 Bi-Weekly)

C. EILEEN LIVERANI
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 BOSTOCK ROAD
 City State Zip Code
 SHOKAN NY 12481-5400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Dir Cust Service
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 443.20

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2460167238431
 Amount of Each Receipt this Period
 83.10
 P/R Deduction (\$27.70 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 261.99
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 61 OF 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. DANIEL KRAJNOVICH
 Full Name (Last, First, Middle Initial)
 Mailing Address 9958 BUTTOWNDOWN LANE
 City ZIONSVILLE State IN Zip Code 46077-8135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Hlth Plan CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2460167338431
 Amount of Each Receipt this Period 60.00
 P/R Deduction (\$20.00 Bi-Weekly)

B. JUNE THIELEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 6245 WAKEFIELD COURT
 City SHAKOPEE State MN Zip Code 55379-7091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation SVP Human Capital
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.80

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2460167538431
 Amount of Each Receipt this Period 41.40
 P/R Deduction (\$13.80 Bi-Weekly)

C. LARRY RENFRO
 Full Name (Last, First, Middle Initial)
 Mailing Address 5 DOVE LANE
 City ANDOVER State MA Zip Code 01810-2845
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation VICE CHAIRMAN & CEO Optum
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3076.80

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2460168138431
 Amount of Each Receipt this Period 576.90
 P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	678.30
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 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial)
A. DAVID ORBUCH

Mailing Address 3370 SYCAMORE LANE

City State Zip Code
PLYMOUTH MN 55441-2229

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

Name of Employer Occupation
Optum Services, Inc Optum Exec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1538.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2460168238431

Amount of Each Receipt this Period
288.45

P/R Deduction (\$96.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. ERIC WEXLER

Mailing Address 7220 WILLOW OAK DR

City State Zip Code
WEST BLOOMFIELD MI 48324-3081

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

Name of Employer Occupation
United HealthCare Services Inc Bus Segment Gen Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
512.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2463723138431

Amount of Each Receipt this Period
96.00

P/R Deduction (\$32.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. SUE SCHICK

Mailing Address 1220 DENBIGH LANE

City State Zip Code
WAYNE PA 19087-4644

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

Name of Employer Occupation
United HealthCare Services Inc Chief Growth Off

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3076.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2480620538431

Amount of Each Receipt this Period
576.90

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	961.35
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 63 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. CHRISTOPHER ABBOTT
Full Name (Last, First, Middle Initial)

Mailing Address W154N6076 HICKORY HOLLOW CT

City	State	Zip Code
MENOMONEE FALLS	WI	53051-5891

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

Name of Employer	Occupation
United HealthCare Services Inc	Hlth Plan CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2484541538431

Amount of Each Receipt this Period

42.00

P/R Deduction (\$14.00 Bi-Weekly)

B. MATTHEW BURNS
Full Name (Last, First, Middle Initial)

Mailing Address 716 ROAD NOT TAKEN

City	State	Zip Code
EDMOND	OK	73034-0817

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

Name of Employer	Occupation
United HealthCare Services Inc	VP Comm

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **238.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2484541738431

Amount of Each Receipt this Period

71.40

P/R Deduction (\$23.80 Bi-Weekly)

C. LILLIAN HECKMAN
Full Name (Last, First, Middle Initial)

Mailing Address 552 DEER LAKE CIRCLE

City	State	Zip Code
BLUE BELL	PA	19422-1371

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

Name of Employer	Occupation
United HealthCare Services Inc	Dir Proj Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **480.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2484542138431

Amount of Each Receipt this Period

90.00

P/R Deduction (\$30.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	203.40
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 64 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. MARK PHILLIPS
 Mailing Address 1760 LUCY RIDGE CT
 City State Zip Code
 CHANHASSEN MN 55317-7661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc SVP SIs
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1538.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2484542638431
 Amount of Each Receipt this Period
 288.45
 P/R Deduction (\$96.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. JERI KUBICKI
 Mailing Address 7659 COLDSTREAM DRIVE
 City State Zip Code
 CINCINNATI OH 45255-3932
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc VP Govt Affs
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3076.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2486697838431
 Amount of Each Receipt this Period
 576.90
 P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. THOMAS MANDERFELD
 Mailing Address 3760 WEST CALHOUN PARKWAY
 City State Zip Code
 MINNEAPOLIS MN 55410-1118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc VP Capital Mkt Comm
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 640.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2486697938431
 Amount of Each Receipt this Period
 120.00
 P/R Deduction (\$40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 985.35
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 65 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. DIRK MCMAHON

Mailing Address 60 WILDHURST ROAD

City State Zip Code
 EXCELSIOR MN 55331-8461

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

Name of Employer Occupation
 United HealthCare Services Inc EVP ENTRPRS OPS/TECH

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1600.00

Date of Receipt
 07 / 31 / 2015
Transaction ID : PR2491457038431

Amount of Each Receipt this Period
 300.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. DONALD NATHAN

Mailing Address 275 GREENWICH STREET #30

City State Zip Code
 NEW YORK NY 10007-2150

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

Name of Employer Occupation
 United HealthCare Services Inc SVP Chief Comm Off

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 3076.80

Date of Receipt
 07 / 31 / 2015
Transaction ID : PR2491457338431

Amount of Each Receipt this Period
 576.90

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. KATHRYN SULLIVAN

Mailing Address 530 N LAKE SHORE DR # 2309

City State Zip Code
 CHICAGO IL 60611-7435

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

Name of Employer Occupation
 United HealthCare Services Inc CEO E&I Regions

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1552.00

Date of Receipt
 07 / 31 / 2015
Transaction ID : PR2491457538431

Amount of Each Receipt this Period
 291.00

P/R Deduction (\$97.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 1167.90

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 192
	<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

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

A. MARTIN TOOMB
Full Name (Last, First, Middle Initial)
Mailing Address 4 STANLEY TERRACE
City DOVER State NJ Zip Code 07801-1605
FEC ID number of contributing federal political committee. **C**
Name of Employer Optum Services, Inc Occupation VP IT
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **240.00**

Date of Receipt **07 / 31 / 2015**
Transaction ID : PR2538641538431
Amount of Each Receipt this Period **45.00**
P/R Deduction (\$15.00 Bi-Weekly)

B. KARA SMITH
Full Name (Last, First, Middle Initial)
Mailing Address 610 CRESTWOOD DRIVE
City ALEXANDRIA State VA Zip Code 22302-2533
FEC ID number of contributing federal political committee. **C**
Name of Employer United HealthCare Services Inc Occupation VP Govt Affs
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **3076.80**

Date of Receipt **07 / 31 / 2015**
Transaction ID : PR2540175338431
Amount of Each Receipt this Period **576.90**
P/R Deduction (\$192.30 Bi-Weekly)

C. HYLLIUS EDWARDS
Full Name (Last, First, Middle Initial)
Mailing Address 1541 S VINE STREET
City DENVER State CO Zip Code 80210-2835
FEC ID number of contributing federal political committee. **C**
Name of Employer UHC International Services Inc Occupation External Affs Dir
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **800.00**

Date of Receipt **07 / 31 / 2015**
Transaction ID : PR2541300438431
Amount of Each Receipt this Period **150.00**
P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **771.90**
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 67 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. PATRICIA PURDY
 Full Name (Last, First, Middle Initial)
 Mailing Address 7417 LYNNHURST STREET
 City State Zip Code
 CHEVY CHASE MD 20815-3101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc VP Govt Affs
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1570.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2541300638431
 Amount of Each Receipt this Period
 294.45
 P/R Deduction (\$98.15 Bi-Weekly)

B. JOELLE TIERNEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 5710 TAYCHOPERA RD
 City State Zip Code
 MADISON WI 53705-1020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Dir Govt Affs
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 615.36

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2541300738431
 Amount of Each Receipt this Period
 115.38
 P/R Deduction (\$38.46 Bi-Weekly)

C. JOHN VERSAGGI
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 ALBANY AVENUE
 City State Zip Code
 ALEXANDRIA VA 22302-3501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Dir Govt Affs
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1538.56

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2541300838431
 Amount of Each Receipt this Period
 288.48
 P/R Deduction (\$96.16 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 698.31
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 68 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. BRENDAN HOSTETLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2309 W WINNEMAC AVE
 City CHICAGO State IL Zip Code 60625-1817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Govt Affs Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2542541938431
 Amount of Each Receipt this Period 90.00
 P/R Deduction (\$30.00 Bi-Weekly)

B. RICHARD RAMSAY
 Full Name (Last, First, Middle Initial)
 Mailing Address 543 E LURAY AVE
 City ALEXANDRIA State VA Zip Code 22301-1605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Dir Regl Affs
 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
 07 / 31 / 2015
Transaction ID : PR2542542238431
 Amount of Each Receipt this Period 150.00
 P/R Deduction (\$50.00 Bi-Weekly)

C. IPYANA SPENCER
 Full Name (Last, First, Middle Initial)
 Mailing Address 4226 40TH STREET NORTH
 City ARLINGTON State VA Zip Code 22207-4610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Govt Affs Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2542542338431
 Amount of Each Receipt this Period 90.00
 P/R Deduction (\$30.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 330.00
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 69 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. ANNE YAU

Mailing Address 9905 WOODLAND DRIVE

City State Zip Code
SILVER SPRING MD 20902-4047

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

Name of Employer Occupation
United HealthCare Services Inc External Affs Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **572.76**

Date of Receipt
07 / 31 / 2015

Transaction ID : PR2543582538431

Amount of Each Receipt this Period
128.19

P/R Deduction (\$42.73 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. CHANTA COMBS

Mailing Address 4229 SUMMERTREE DRIVE

City State Zip Code
TALLAHASSEE FL 32311-3331

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

Name of Employer Occupation
United HealthCare Services Inc Govt Affs Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **4615.36**

Date of Receipt
07 / 31 / 2015

Transaction ID : PR2552313538431

Amount of Each Receipt this Period
115.38

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. ALLISON DAVENPORT

Mailing Address 3242 MIDVALE AVE

City State Zip Code
PHILADELPHIA PA 19129-1012

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

Name of Employer Occupation
United HealthCare Services Inc Hlth Plan CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **365.00**

Date of Receipt
07 / 31 / 2015

Transaction ID : PR2552313638431

Amount of Each Receipt this Period
365.00

P/R Deduction (\$365.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **608.57**

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:	PAGE 70 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. JEANNE PACE

Mailing Address 458 MORENO ROAD

City State Zip Code
WYNNEWOOD PA 19096-1124

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

Name of Employer Occupation
United HealthCare Services Inc KA Sr Acct Exe

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
624.00

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2552313738431

Amount of Each Receipt this Period
117.00

P/R Deduction (\$39.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. JEFFREY ALTER

Mailing Address 3 WOODLAND ROAD

City State Zip Code
PORT JEFFERSON NY 11777-1053

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

Name of Employer Occupation
United HealthCare Services Inc Bus Segment CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3076.80

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2552960238431

Amount of Each Receipt this Period
576.90

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. KEVIN BROOKS

Mailing Address 2750 FOUNTAIN LANE NORTH

City State Zip Code
PLYMOUTH MN 55447-1705

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

Name of Employer Occupation
Optum Services, Inc Dir Mktg

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
224.00

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2552961038431

Amount of Each Receipt this Period
42.00

P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 735.90

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 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial)
A. MARK BRUNELL

Mailing Address **20 VERMILION CLIFFS**

City **ALISO VIEJO** State **CA** Zip Code **92656-8096**

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

Name of Employer **Optum Services, Inc** Occupation **Dir Clnt Svc Acct Mgt**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015

Transaction ID : PR2552961238431

Amount of Each Receipt this Period
42.00

P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. JEREMY BRYANT

Mailing Address **4534 MYSTIQUE WAY**

City **ROSWELL** State **GA** Zip Code **30075-2087**

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

Name of Employer **United HealthCare Services Inc** Occupation **VP Clnt Mgmt NA Accts**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **560.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015

Transaction ID : PR2552961338431

Amount of Each Receipt this Period
105.00

P/R Deduction (\$35.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. MICHAEL EHLMAN

Mailing Address **10051 VALLEY RIDGE COURT**

City **LAS VEGAS** State **NV** Zip Code **89148-7602**

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

Name of Employer **Health Plan of Nevada** Occupation **Dir Apps Dev**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015

Transaction ID : PR2552962238431

Amount of Each Receipt this Period
42.00

P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	189.00
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 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. SCOTT FLANNERY
 Full Name (Last, First, Middle Initial)
 Mailing Address 8508 TRELADY CT
 City PLANO State TX Zip Code 75024-6827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Regn Growth Off
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 624.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2552962338431
 Amount of Each Receipt this Period 117.00
 P/R Deduction (\$39.00 Bi-Weekly)

B. WILLIAM GWINN
 Full Name (Last, First, Middle Initial)
 Mailing Address 9302 CENTURY OAK COURT
 City BRENTWOOD State TN Zip Code 37027-3321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Dir Proj Rsch Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2552962638431
 Amount of Each Receipt this Period 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

C. CLAIRE HANNAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 25932 PORTAFINO DRIVE
 City MISSION VIEJO State CA Zip Code 92691-5716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Gen Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 624.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2552962738431
 Amount of Each Receipt this Period 117.00
 P/R Deduction (\$39.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	276.12
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: PAGE 73 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. OREN Hermel

Mailing Address 7705 WALDEN BLVD

City State Zip Code
 WAUSAU WI 54401-9006

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

Name of Employer Occupation
 United HealthCare Services Inc VP IT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 07 / 31 / 2015
Transaction ID : PR2552962838431

Amount of Each Receipt this Period
 28.00

P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. GREGORY JAMES

Mailing Address 2323 KINGS POINT DRIVE

City State Zip Code
 LARGO FL 33774-1009

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

Name of Employer Occupation
 Optum Services, Inc Sr Med Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1538.40

Date of Receipt
 07 / 31 / 2015
Transaction ID : PR2552963238431

Amount of Each Receipt this Period
 288.45

P/R Deduction (\$96.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. NARASIMHAN KIDAMBI

Mailing Address 18477 85TH AVE N

City State Zip Code
 MAPLE GROVE MN 55311-1663

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

Name of Employer Occupation
 United HealthCare Services Inc Assc Dir Bus Anlys

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 320.00

Date of Receipt
 07 / 31 / 2015
Transaction ID : PR2552963838431

Amount of Each Receipt this Period
 60.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 376.45

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 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. JULIE MACLEOD
 Full Name (Last, First, Middle Initial)
 Mailing Address 15314 JEFFERS PASS NW
 City PRIOR LAKE State MN Zip Code 55372-3614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Human Capital Partner Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2552964438431
 Amount of Each Receipt this Period 42.00
 P/R Deduction (\$14.00 Bi-Weekly)

B. MICHELLE MARTO
 Full Name (Last, First, Middle Initial)
 Mailing Address 149 WILLIAMSBURG COURT
 City ALBANY State NY Zip Code 12203-5502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Dir Govt Affs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2552964738431
 Amount of Each Receipt this Period 42.00
 P/R Deduction (\$14.00 Bi-Weekly)

C. CARL MATTSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 539 ROUTE 9P
 City SARATOGA SPRINGS State NY Zip Code 12866-7279
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Dir Clnt Svc Acct Mgt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2552964838431
 Amount of Each Receipt this Period 42.00
 P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	126.00
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 192
	<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

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

A. MICHAEL MORRIS
Full Name (Last, First, Middle Initial)

Mailing Address 2624 N HARTLAND COURT

City CHICAGO State IL Zip Code 60614-4955

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

Name of Employer United HealthCare Services Inc Occupation KA Dir Acct Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 246.08

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2552965038431

Amount of Each Receipt this Period 46.14

P/R Deduction (\$15.38 Bi-Weekly)

B. LESLIE PAULUS
Full Name (Last, First, Middle Initial)

Mailing Address 305 E TUCKEY LN

City PHOENIX State AZ Zip Code 85012-1048

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

Name of Employer United HealthCare Services Inc Occupation Med Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2552965238431

Amount of Each Receipt this Period 42.00

P/R Deduction (\$14.00 Bi-Weekly)

C. GARY PEKA
Full Name (Last, First, Middle Initial)

Mailing Address 8350 CRABAPPLE COURT

City VICTORIA State MN Zip Code 55386-8200

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

Name of Employer Optum Services, Inc Occupation Six Sigma Cnslt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2552965338431

Amount of Each Receipt this Period 42.00

P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 130.14

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 192
	<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

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

Full Name (Last, First, Middle Initial) A. DONALD POTTER			Date of Receipt MM / DD / YYYY 07 / 31 / 2015
Mailing Address 116 FULLER LANE			Transaction ID : PR2552965438431
City WINNETKA	State IL	Zip Code 60093-4213	Amount of Each Receipt this Period 42.00
FEC ID number of contributing federal political committee. C			
Name of Employer United HealthCare Services Inc	Occupation NA VP Clnt Relationship		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 224.00		P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. KRISTINE SAMSEL			Date of Receipt MM / DD / YYYY 07 / 31 / 2015
Mailing Address 91 WAVERLY RD			Transaction ID : PR2552965738431
City HUNTINGTON	State CT	Zip Code 06484-5835	Amount of Each Receipt this Period 42.00
FEC ID number of contributing federal political committee. C			
Name of Employer United HealthCare Services Inc	Occupation Dir Gen Mgmt		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 224.00		P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. BARRY STREIT			Date of Receipt MM / DD / YYYY 07 / 31 / 2015
Mailing Address 5421 KELLOGG AVENUE			Transaction ID : PR2552966738431
City EDINA	State MN	Zip Code 55424-1604	Amount of Each Receipt this Period 117.00
FEC ID number of contributing federal political committee. C			
Name of Employer United HealthCare Services Inc	Occupation RVP Medicr Field SIs		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 624.00		P/R Deduction (\$39.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	201.00
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 192
	<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

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

A. ANN TINKER
Full Name (Last, First, Middle Initial)
Mailing Address 530 HUNTER FLAT STREET
City LAS VEGAS State NV Zip Code 89138-1110
FEC ID number of contributing federal political committee. **C**
Name of Employer United HealthCare Services Inc Occupation Assc Dir Compli
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2552966838431
Amount of Each Receipt this Period 42.00
P/R Deduction (\$14.00 Bi-Weekly)

B. THOMAS VANDERHEYDEN
Full Name (Last, First, Middle Initial)
Mailing Address 534 WAYZATA BLVD E
City WAYZATA State MN Zip Code 55391-1727
FEC ID number of contributing federal political committee. **C**
Name of Employer United HealthCare Services Inc Occupation VP Prd
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2552966938431
Amount of Each Receipt this Period 42.00
P/R Deduction (\$14.00 Bi-Weekly)

C. AARON WACKER
Full Name (Last, First, Middle Initial)
Mailing Address 4704 CAVAN ROAD
City MOUND State MN Zip Code 55364-1877
FEC ID number of contributing federal political committee. **C**
Name of Employer Optum Services, Inc Occupation Dir Apps Dev
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2552967038431
Amount of Each Receipt this Period 42.00
P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 126.00
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 78 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. SCOTT NAASZ

Mailing Address 14327 BLUEBIRD TRAIL NE

City	State	Zip Code
PRIOR LAKE	MN	55372-1204

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

Name of Employer	Occupation
United HealthCare Services Inc	VP Cust Svs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2553474738431

Amount of Each Receipt this Period

42.00

P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. MONICA RAYBURN

Mailing Address 5127 JACKSON PONDS CT

City	State	Zip Code
SUGAR LAND	TX	77479-4656

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

Name of Employer	Occupation
Optum Services, Inc	Dir Gen Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **624.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2553475138431

Amount of Each Receipt this Period

117.00

P/R Deduction (\$39.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. ANDREW SULLIVAN

Mailing Address 1101 ROSEWOOD DRIVE

City	State	Zip Code
ATLANTA	GA	30306-3554

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

Name of Employer	Occupation
Optum Services, Inc	Bus Adv/Tech Cnslt Sr Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2553475338431

Amount of Each Receipt this Period

42.00

P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	201.00
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 79 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. RICHARD THOMAS

Mailing Address 5121 DUPONT AVENUE SOUTH

City State Zip Code
 MINNEAPOLIS MN 55419-1151

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

Name of Employer Occupation
 United HealthCare Services Inc VP Gen Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
 1552.00

Date of Receipt
 07 / 31 / 2015
Transaction ID : PR2553475438431

Amount of Each Receipt this Period
 291.00

P/R Deduction (\$97.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. DENEEN VOJTA

Mailing Address 5201 KELLOGG AVENUE

City State Zip Code
 EDINA MN 55424-1304

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

Name of Employer Occupation
 United HealthCare Services Inc SVP Bus Initiv Clin Aff

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
 3088.00

Date of Receipt
 07 / 31 / 2015
Transaction ID : PR2553475538431

Amount of Each Receipt this Period
 579.00

P/R Deduction (\$193.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. DANIEL ZERAFI

Mailing Address 61234 ADMIRAL DRIVE

City State Zip Code
 WASHINGTON TOWNSHIP MI 48094-1242

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

Name of Employer Occupation
 Optum Services, Inc VP Info Tech

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
 224.00

Date of Receipt
 07 / 31 / 2015
Transaction ID : PR2553475738431

Amount of Each Receipt this Period
 42.00

P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 912.00

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 192
	<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

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

A. COLLEEN COHAN
Full Name (Last, First, Middle Initial)

Mailing Address 17402 SAINT THERESA DRIVE

City OLNEY State MD Zip Code 20832-2547

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

Name of Employer United HealthCare Services Inc Occupation Sr Assc Gen Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2554012738431

Amount of Each Receipt this Period 45.00

P/R Deduction (\$15.00 Bi-Weekly)

B. SHELLY ESPINOSA
Full Name (Last, First, Middle Initial)

Mailing Address 777 EXCELSIOR BLVD #209

City EXCELSIOR State MN Zip Code 55331-1938

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

Name of Employer United HealthCare Services Inc Occupation Dir Found/Social Resp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2554012938431

Amount of Each Receipt this Period 42.00

P/R Deduction (\$14.00 Bi-Weekly)

C. KARSTEN FLAGSTAD
Full Name (Last, First, Middle Initial)

Mailing Address 13420 JAY ST NW

City ANDOVER State MN Zip Code 55304-4015

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

Name of Employer Optum Services, Inc Occupation VP Info Tech

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2554013038431

Amount of Each Receipt this Period 300.00

P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 387.00

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 81 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. PATRICK MEYER

Mailing Address 20676 HAZELWOOD TRAIL

City LAKEVILLE	State MN	Zip Code 55044-4678
-------------------	-------------	------------------------

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

Name of Employer United HealthCare Services Inc	Occupation Dir Internal Audit
----------------------------------------------------	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
224.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2015

Transaction ID : PR2554013138431

Amount of Each Receipt this Period
42.00

P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. THOMAS MOORE

Mailing Address 10733 TAVISTOCK DRIVE

City TAMPA	State FL	Zip Code 33626-1718
---------------	-------------	------------------------

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

Name of Employer Optum Services, Inc	Occupation Sls Dir Care Mgmt & Del
-----------------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
224.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2015

Transaction ID : PR2554013238431

Amount of Each Receipt this Period
42.00

P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. GREGORY REIDY

Mailing Address 5251 MCGAVOCK RD

City BRENTWOOD	State TN	Zip Code 37027-5197
-------------------	-------------	------------------------

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

Name of Employer United HealthCare Services Inc	Occupation Hlth Plan CEO
----------------------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
224.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2015

Transaction ID : PR2554013338431

Amount of Each Receipt this Period
42.00

P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	126.00
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 82 OF 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ALICE FERREIRA
 Full Name (Last, First, Middle Initial)
 Mailing Address 18 BRITTANY AVENUE
 City TRUMBULL State CT Zip Code 06611-1105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Dir Comm
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2554208138431
 Amount of Each Receipt this Period 115.38
 P/R Deduction (\$38.46 Bi-Weekly)

B. ASIR AHMAD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1935 HILLWOOD DRIVE
 City BLOOMFIELD HILLS State MI Zip Code 48304-2420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Med Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2560064038431
 Amount of Each Receipt this Period 42.00
 P/R Deduction (\$14.00 Bi-Weekly)

C. JOY ALEXANDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 5116 NORTH TIOGA WAY
 City LAS VEGAS State NV Zip Code 89149-5830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Plan of Nevada Occupation Dir Mktg
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2560064138431
 Amount of Each Receipt this Period 42.00
 P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	199.38
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 83 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. JIM BENNETT

Mailing Address 3724 PINE TIP ROAD

City State Zip Code
TALLAHASSEE FL 32312-1016

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

Name of Employer Occupation
United HealthCare Services Inc Sr Assc Gen Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
224.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015
Transaction ID : PR2560064238431

Amount of Each Receipt this Period
42.00

P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. DANIEL CLUTE

Mailing Address 7756 N 85TH STREET

City State Zip Code
OMAHA NE 68122-1281

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

Name of Employer Occupation
United HealthCare Services Inc Med Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1552.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015
Transaction ID : PR2560064438431

Amount of Each Receipt this Period
291.00

P/R Deduction (\$97.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. PAULA GAZELEY

Mailing Address 36 MAYFAIR ROAD

City State Zip Code
WYNANTSKILL NY 12198-8018

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

Name of Employer Occupation
Optum Services, Inc VP Regn Pharm Dev

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
224.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015
Transaction ID : PR2560064838431

Amount of Each Receipt this Period
42.00

P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	375.00
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 84 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. DONALD GIANCURSIO
Full Name (Last, First, Middle Initial)
Mailing Address 72 MIDNIGHT RIDGE DR
City LAS VEGAS State NV Zip Code 89135-1680
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Plan of Nevada Occupation Hlth Plan CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3088.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015
Transaction ID : PR2560064938431
Amount of Each Receipt this Period 579.00
P/R Deduction (\$193.00 Bi-Weekly)

B. JERI JONES
Full Name (Last, First, Middle Initial)
Mailing Address 512 W ORANGEWOOD AVE
City PHOENIX State AZ Zip Code 85021-7252
FEC ID number of contributing federal political committee. **C**
Name of Employer United HealthCare Services Inc Occupation Regn CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1538.40

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015
Transaction ID : PR2560065138431
Amount of Each Receipt this Period 288.45
P/R Deduction (\$96.15 Bi-Weekly)

C. SHELDON LIPPMAN
Full Name (Last, First, Middle Initial)
Mailing Address 55 CLIFFFIELD ROAD
City BEDFORD State NY Zip Code 10506-1210
FEC ID number of contributing federal political committee. **C**
Name of Employer United HealthCare Services Inc Occupation Med Dir
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1552.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015
Transaction ID : PR2560065438431
Amount of Each Receipt this Period 291.00
P/R Deduction (\$97.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	1158.45
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 85 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. JEFFREY LUCHT
 Full Name (Last, First, Middle Initial)
 Mailing Address 33 FOUR SEASONS DR
 City ALTON State NH Zip Code 03809-4872
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation SVP Act Underwriting
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1552.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2560065638431
 Amount of Each Receipt this Period 291.00
 P/R Deduction (\$97.00 Bi-Weekly)

B. KEVIN MARONEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 5052 NORMAN DRIVE
 City MINNETONKA State MN Zip Code 55345-4636
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Assc Gen Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2560065738431
 Amount of Each Receipt this Period 42.00
 P/R Deduction (\$14.00 Bi-Weekly)

C. DONALD MELNYK
 Full Name (Last, First, Middle Initial)
 Mailing Address 141 MONROE STREET
 City GARFIELD State NJ Zip Code 07026-1825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Dir IT Architecture
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 226.24

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2560065938431
 Amount of Each Receipt this Period 42.42
 P/R Deduction (\$14.14 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.42
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 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. DAVID MILICH
 Full Name (Last, First, Middle Initial)
 Mailing Address 2702 BIRCHMERE COURT
 City KATY State TX Zip Code 77450-1303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Hlth Plan CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 624.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2560066038431
 Amount of Each Receipt this Period 117.00
 P/R Deduction (\$39.00 Bi-Weekly)

B. WILLIAM O'BRYANT
 Full Name (Last, First, Middle Initial)
 Mailing Address 22191 WESTCLIFF
 City MISSION VIEJO State CA Zip Code 92692-4310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Sr Med Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2560066138431
 Amount of Each Receipt this Period 42.00
 P/R Deduction (\$14.00 Bi-Weekly)

C. RICHARD PERRIER
 Full Name (Last, First, Middle Initial)
 Mailing Address 3161 EMERALD VALLEY ROAD
 City ELLICOTT CITY State MD Zip Code 21042-1013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation KA VP Acct Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2560066238431
 Amount of Each Receipt this Period 42.00
 P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	201.00
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 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial)
A. DONALD ROWE

Mailing Address **5 LANTERN LANE**

City MAYNARD	State MA	Zip Code 01754-2171
------------------------	--------------------	-------------------------------

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

Name of Employer United HealthCare Services Inc	Occupation KA Dir of AM producing
-----------------------------------------------------------	---------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2560066538431

Amount of Each Receipt this Period

42.00

P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. DENISE VAIL

Mailing Address **35 CLEVELAND AVENUE**

City SAYVILLE	State NY	Zip Code 11782-1322
-------------------------	--------------------	-------------------------------

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

Name of Employer United HealthCare Services Inc	Occupation Dir Clnt Svc Acct Mgt
-----------------------------------------------------------	--------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2560066838431

Amount of Each Receipt this Period

42.00

P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. DEBRA DATTA

Mailing Address **1415 A STREET SE**

City WASHINGTON	State DC	Zip Code 20003-1524
---------------------------	--------------------	-------------------------------

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

Name of Employer United HealthCare Services Inc	Occupation Dir Ntwk Prgms
-----------------------------------------------------------	-------------------------------------

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
07	/	31	/	2015

Transaction ID : PR2560398038431

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	129.00
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 88 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. KRISTA DICKMAN
Full Name (Last, First, Middle Initial)
Mailing Address 2533 ONYX DRIVE
City SHAKOPEE State MN Zip Code 55379-2770
FEC ID number of contributing federal political committee. **C**
Name of Employer United HealthCare Services Inc Occupation Sr Proj Mgr III
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2560398138431
Amount of Each Receipt this Period 42.00
P/R Deduction (\$14.00 Bi-Weekly)

B. GEORGE KOREAN
Full Name (Last, First, Middle Initial)
Mailing Address 6 VERANO
City Foothill Ranch State CA Zip Code 92610-1827
FEC ID number of contributing federal political committee. **C**
Name of Employer United HealthCare Services Inc Occupation Dir Act Svs
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2560398538431
Amount of Each Receipt this Period 42.00
P/R Deduction (\$14.00 Bi-Weekly)

C. TIMOTHY NOEL
Full Name (Last, First, Middle Initial)
Mailing Address 4316 FREMONT AVENUE SOUTH
City MINNEAPOLIS State MN Zip Code 55409-1721
FEC ID number of contributing federal political committee. **C**
Name of Employer United HealthCare Services Inc Occupation SVP Prd
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1538.40

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2560398838431
Amount of Each Receipt this Period 288.45
P/R Deduction (\$96.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	372.45
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 192
	<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

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

Full Name (Last, First, Middle Initial)
A. ROBERT WULF

Mailing Address **622 N 11TH ST**

City **WAUSAU** State **WI** Zip Code **54403-5004**

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

Name of Employer **United HealthCare Services Inc** Occupation **VP Gen Mgmt**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.64**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR2560398938431

Amount of Each Receipt this Period **42.12**

P/R Deduction (\$14.04 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. JAMES CRONIN

Mailing Address **241 WALLACE RD**

City **BEDFORD** State **NH** Zip Code **03110-5144**

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

Name of Employer **United HealthCare Services Inc** Occupation **SVP Ops**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1538.40**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR2560821138431

Amount of Each Receipt this Period **288.45**

P/R Deduction (\$96.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. PATRICK O'BRIEN

Mailing Address **33 BARRINGTON DRIVE**

City **BEDFORD** State **NH** Zip Code **03110-5601**

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

Name of Employer **United HealthCare Services Inc** Occupation **VP Ops**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.00**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR2560821438431

Amount of Each Receipt this Period **42.00**

P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	372.57
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:	PAGE 90 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. MARIE PERO		Date of Receipt MM / DD / YYYY 07 / 31 / 2015
Mailing Address 516 APPLE LANE		Transaction ID : PR2560821538431
City HARLEYSVILLE	State PA	Zip Code 19438-2549
FEC ID number of contributing federal political committee.	C	
Name of Employer United HealthCare Services Inc	Occupation Dir Prod	Amount of Each Receipt this Period 42.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 224.00	P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. JOY STEPHENS		Date of Receipt MM / DD / YYYY 07 / 31 / 2015
Mailing Address 7320 YORK AVE N		Transaction ID : PR2560821638431
City BROOKLYN PARK	State MN	Zip Code 55443-3544
FEC ID number of contributing federal political committee.	C	
Name of Employer United HealthCare Services Inc	Occupation Assc Dir Bus Anlys	Amount of Each Receipt this Period 42.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 224.00	P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. BRIAN LUND		Date of Receipt MM / DD / YYYY 07 / 31 / 2015
Mailing Address 464 EAST NORTH AVE		Transaction ID : PR2561457638431
City GRANTSBURG	State WI	Zip Code 54840-7423
FEC ID number of contributing federal political committee.	C	
Name of Employer United HealthCare Services Inc	Occupation Dir Tax	Amount of Each Receipt this Period 117.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 624.00	P/R Deduction (\$39.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	201.00
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 91 OF 192
	<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

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

A. KEITH VOLLBERG
 Full Name (Last, First, Middle Initial)
 Mailing Address 1001 NANDINA DR
 City WESTON State FL Zip Code 33327-2481
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Exec Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2563207738431
 Amount of Each Receipt this Period 42.00
 P/R Deduction (\$14.00 Bi-Weekly)

B. LARRY W CAVANAUGH
 Full Name (Last, First, Middle Initial)
 Mailing Address 520 NE 20TH ST # 1010
 City WILTON MANORS State FL Zip Code 33305-2162
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Spc Ben Govt Dntl Sls Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 624.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2563211038431
 Amount of Each Receipt this Period 117.00
 P/R Deduction (\$39.00 Bi-Weekly)

C. JACQULYN BARTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1587 112 TH COURT WEST
 City INVER GROVE HEIGHTS State MN Zip Code 55077-5412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Human Capital Partner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2563211238431
 Amount of Each Receipt this Period 42.00
 P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	201.00
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 92 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. ANDREW MACKENZIE

Mailing Address 1912 IRVING AVE S

City State Zip Code
MINNEAPOLIS MN 55403-2823

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

Name of Employer Occupation
United HealthCare Services Inc Bus Segment CMO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2564297138431

Amount of Each Receipt this Period
300.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. STEPHEN SWANSON

Mailing Address 3001 HUNTINGTON COURT

City State Zip Code
KATY TX 77493-1159

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

Name of Employer Occupation
United HealthCare Services Inc KA VP Acct Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
624.00

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2564297338431

Amount of Each Receipt this Period
117.00

P/R Deduction (\$39.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. HARVEY BALTHASER

Mailing Address 3103 FLEECE FLOWER COVE

City State Zip Code
AUSTIN TX 78735-1539

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

Name of Employer Occupation
United HealthCare Services Inc Med Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
624.00

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2564297538431

Amount of Each Receipt this Period
117.00

P/R Deduction (\$39.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 534.00

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 93 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. STEVEN WALLI

Mailing Address 18615 CHARLEVOIX LANE

City State Zip Code
CHESTERFIELD MO 63005-6200

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

Name of Employer Occupation
United HealthCare Services Inc Hlth Plan CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
615.36

Date of Receipt
07 / 31 / 2015

Transaction ID : PR2564297638431

Amount of Each Receipt this Period
115.38

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. ELLEN DAMATO

Mailing Address 1300 DALHART DRIVE

City State Zip Code
ALLEN TX 75013-5339

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

Name of Employer Occupation
United HealthCare Services Inc VP Ntwk Contrctng

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
224.00

Date of Receipt
07 / 31 / 2015

Transaction ID : PR2564802238431

Amount of Each Receipt this Period
42.00

P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. JOSH WILLSON

Mailing Address 201 ADAMS CT

City State Zip Code
COLLEYVILLE TX 76034-6811

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

Name of Employer Occupation
United HealthCare Services Inc Spc Ben KA SB RVP SIs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
224.00

Date of Receipt
07 / 31 / 2015

Transaction ID : PR2564802538431

Amount of Each Receipt this Period
42.00

P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	199.38
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 192
	<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

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

A. CHRISTOPHER CARLSON
Full Name (Last, First, Middle Initial)

Mailing Address 12801 OVERLOOK ROAD

City DAYTON State MN Zip Code 55327-9678

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

Name of Employer United HealthCare Services Inc Occupation VP Gen Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR2564802638431

Amount of Each Receipt this Period **60.00**

P/R Deduction (\$20.00 Bi-Weekly)

B. PAUL HANSEN
Full Name (Last, First, Middle Initial)

Mailing Address 18430 62ND PLACE NORTH

City MAPLE GROVE State MN Zip Code 55311-4585

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

Name of Employer United HealthCare Services Inc Occupation Controller Mkt Grp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1552.00**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR2564802738431

Amount of Each Receipt this Period **291.00**

P/R Deduction (\$97.00 Bi-Weekly)

C. MARYELLEN GOODWIN
Full Name (Last, First, Middle Initial)

Mailing Address 1678 BRIDGEWATER DRIVE

City LAKE MARY State FL Zip Code 32746-4103

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

Name of Employer United HealthCare Services Inc Occupation KA VP Acct Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **224.00**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR2564802938431

Amount of Each Receipt this Period **42.00**

P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **393.00**

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 95 OF 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. KATHERINE KENNY
 Full Name (Last, First, Middle Initial)
 Mailing Address 22408 FITZGERALD DRIVE
 City LAYTONSVILLE State MD Zip Code 20882-2301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation SB VP of Acct Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 624.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2564803238431
 Amount of Each Receipt this Period 117.00
 P/R Deduction (\$39.00 Bi-Weekly)

B. PAUL MARDEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 718 HICKORY HILL RD
 City FRANKLIN LAKES State NJ Zip Code 07417-1707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Hlth Plan CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 624.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2564803338431
 Amount of Each Receipt this Period 117.00
 P/R Deduction (\$39.00 Bi-Weekly)

C. DARREN MOQUIST
 Full Name (Last, First, Middle Initial)
 Mailing Address 1200 NICOLLET MALL #507
 City MINNEAPOLIS State MN Zip Code 55403-2408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Bus Segment CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1538.56

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2564803438431
 Amount of Each Receipt this Period 288.48
 P/R Deduction (\$96.16 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 522.48
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: PAGE 96 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. MARK BELLMAN

Mailing Address 5601 VAN WINKLE LN

City State Zip Code
 AUSTIN TX 78739-1694

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

Name of Employer Occupation
 United HealthCare Services Inc SB VP Sls Acct Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **224.00**

Date of Receipt
 07 / 31 / 2015
Transaction ID : PR2564803538431

Amount of Each Receipt this Period
42.00

P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. LISA WRIGHT

Mailing Address 6 VOLERRAN PATH LANE

City State Zip Code
 MISSOURI CITY TX 77459-1167

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

Name of Employer Occupation
 United HealthCare Services Inc Dir Gen Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **224.00**

Date of Receipt
 07 / 31 / 2015
Transaction ID : PR2564803738431

Amount of Each Receipt this Period
42.00

P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. TAMMY O'HARE

Mailing Address 2420 SAINT GEORGE WAY

City State Zip Code
 BROOKEVILLE MD 20833-3265

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

Name of Employer Occupation
 United HealthCare Services Inc SB VP Sls

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **624.00**

Date of Receipt
 07 / 31 / 2015
Transaction ID : PR2564803938431

Amount of Each Receipt this Period
117.00

P/R Deduction (\$39.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ **201.00**

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 97 OF 192
	<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
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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. DEBRA BERNIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 3209 GALLERIA
 UNIT 1705
 City EDINA State MN Zip Code 55435-2556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Chief Complnc/Ethics Off
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1552.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2564804038431
 Amount of Each Receipt this Period 291.00
 P/R Deduction (\$97.00 Bi-Weekly)

B. BARRY HOFER
 Full Name (Last, First, Middle Initial)
 Mailing Address 10464 SHELTER GROVE
 City EDEN PRAIRIE State MN Zip Code 55347-4855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation VP Fin
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2564804138431
 Amount of Each Receipt this Period 42.00
 P/R Deduction (\$14.00 Bi-Weekly)

C. TIMOTHY WICKS
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 44518
 City EDEN PRAIRIE State MN Zip Code 55344-1518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Bus Segment CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2565448638431
 Amount of Each Receipt this Period 115.38
 P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	448.38
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 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. DONNA CRAIG
 Full Name (Last, First, Middle Initial)
 Mailing Address 10761 INDEPENDENCE WAY
 City State Zip Code
 CARMEL IN 46032-9333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Hlth Plan CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 224.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2565448838431
 Amount of Each Receipt this Period
 42.00
 P/R Deduction (\$14.00 Bi-Weekly)

B. THOMAS KUNST
 Full Name (Last, First, Middle Initial)
 Mailing Address 4872 103RD STREET
 City State Zip Code
 PLEASANT PRAIRIE WI 53158-6516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc KA VP Sls Acct Mgmt
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 224.64

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2566302138431
 Amount of Each Receipt this Period
 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

C. NEIL MANSUKHANI
 Full Name (Last, First, Middle Initial)
 Mailing Address 4215 LAUREL RIDGE CIRCLE
 City State Zip Code
 WESTON FL 33331-4012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Dir PEO Sls
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 224.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2567129438431
 Amount of Each Receipt this Period
 42.00
 P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	126.12
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:	PAGE 99 OF 192
	(check only one)	
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<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. DENISE ZAMORE
Full Name (Last, First, Middle Initial)

Mailing Address 75 HOCKANUM BLVD
APT 1011

City VERNON State CT Zip Code 06066-4063

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

Name of Employer United HealthCare Services Inc Occupation Sr Assc Gen Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 224.00

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2567129538431

Amount of Each Receipt this Period
42.00

P/R Deduction (\$14.00 Bi-Weekly)

B. WENDY ARNONE
Full Name (Last, First, Middle Initial)

Mailing Address 5243 E DESERT PARK LANE

City PARADISE VALLEY State AZ Zip Code 85253-3015

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

Name of Employer United HealthCare Services Inc Occupation Regn CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1538.40

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2568900538431

Amount of Each Receipt this Period
288.45

P/R Deduction (\$96.15 Bi-Weekly)

C. CHRISTOPHER PARRILLO
Full Name (Last, First, Middle Initial)

Mailing Address 9501 WEXCROFT DRIVE

City BRENTWOOD State TN Zip Code 37027-3824

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

Name of Employer United HealthCare Services Inc Occupation Dir Ntwk Contrctng

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 615.36

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2571778238431

Amount of Each Receipt this Period
115.38

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 445.83

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 100 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. BRUCE MOYER
 Full Name (Last, First, Middle Initial)
 Mailing Address 18426 MAGENTA BAY
 City EDEN PRAIRIE State MN Zip Code 55347-1051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation VP Gen Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 624.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2571778338431
 Amount of Each Receipt this Period 117.00
 P/R Deduction (\$39.00 Bi-Weekly)

B. DUSTIN HINTON
 Full Name (Last, First, Middle Initial)
 Mailing Address W132N6475 MARACH RD
 City MENOMONEE FALLS State WI Zip Code 53051-6085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Hlth Plan CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2571978738431
 Amount of Each Receipt this Period 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

C. MARCUS ROBINSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 590 SPENDER TRACE
 City DUNWOODY State GA Zip Code 30350-5018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Public Exchange Dir Bus Dev
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2572588938431
 Amount of Each Receipt this Period 42.00
 P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 201.12
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: PAGE 101 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. SHAUN JACQUET

Mailing Address 4332 FOREST RIDGE DRIVE

City State Zip Code
 SUAMICO WI 54313-8557

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

Name of Employer Occupation
 United HealthCare Services Inc Dir Gen Mgmt

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 224.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015

Transaction ID : PR2572589338431

Amount of Each Receipt this Period
 42.00

P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. THOMAS SMITH

Mailing Address 1502 EAST AVENUE NORTH

City State Zip Code
 ONALASKA WI 54650-7003

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

Name of Employer Occupation
 United HealthCare Services Inc Dir Gen Mgmt

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 224.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015

Transaction ID : PR2572589538431

Amount of Each Receipt this Period
 42.00

P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. KEVIN CARLSON

Mailing Address 4909 WEST SUNNYSLOPE ROAD

City State Zip Code
 EDINA MN 55424-1170

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

Name of Employer Occupation
 United HealthCare Services Inc VP Ntwk Contrctng

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 624.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015

Transaction ID : PR2572590038431

Amount of Each Receipt this Period
 117.00

P/R Deduction (\$39.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 201.00

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 102 OF 192
	(check only one)	
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<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
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		<input type="checkbox"/> 17

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

A. CHARLES WACKER
Full Name (Last, First, Middle Initial)

Mailing Address 2747 WEST VIEW DRIVE

City NEW PRAGUE State MN Zip Code 56071-8989

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

Name of Employer Optum Services, Inc Occupation Sr Mkt Sls Exec Optuml

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2572590138431

Amount of Each Receipt this Period 42.00

P/R Deduction (\$14.00 Bi-Weekly)

B. CHRISTINE OBRIEN
Full Name (Last, First, Middle Initial)

Mailing Address 764 TOPAZ STREET

City NEW ORLEANS State LA Zip Code 70124-3624

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

Name of Employer United HealthCare Services Inc Occupation Chief of Staff

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2572590638431

Amount of Each Receipt this Period 42.00

P/R Deduction (\$14.00 Bi-Weekly)

C. JAMES HARGIS
Full Name (Last, First, Middle Initial)

Mailing Address 1820 ROSEDALE

City EDMOND State OK Zip Code 73013-6638

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

Name of Employer Optum Services, Inc Occupation Mgr Pharm Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2572590738431

Amount of Each Receipt this Period 45.00

P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 129.00

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 103 OF 192
	<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

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

A. DIANE FELDER
Full Name (Last, First, Middle Initial)

Mailing Address 17406 LEDGEFIELD

City CYPRESS State TX Zip Code 77433-2064

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

Name of Employer Optum Services, Inc Occupation Behvrl Med Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2572590838431

Amount of Each Receipt this Period 125.00

P/R Deduction (\$62.50 Bi-Weekly)

B. THERESA CLARKE
Full Name (Last, First, Middle Initial)

Mailing Address 16652 1/2 GRAND AVE

City BELLFLOWER State CA Zip Code 90706-5038

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

Name of Employer Optum Services, Inc Occupation Assc Dir Clin Qlty

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 624.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2572591138431

Amount of Each Receipt this Period 117.00

P/R Deduction (\$39.00 Bi-Weekly)

C. KIMBERLEY MILLER
Full Name (Last, First, Middle Initial)

Mailing Address 16 CELONOVA PLACE

City FOOTHILL RANCH State CA Zip Code 92610-1942

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

Name of Employer United HealthCare Services Inc Occupation Dir Underwriting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2572591238431

Amount of Each Receipt this Period 42.00

P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 284.00

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 104 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. THOMAS WIFFLER

Mailing Address 1421 SOMERFIELD DRIVE

City State Zip Code
 BOLINGBROOK IL 60490-3207

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

Name of Employer Occupation
 United HealthCare Services Inc Bus Segment COO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
 1552.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015

Transaction ID : PR2572992738431

Amount of Each Receipt this Period
 291.00

P/R Deduction (\$97.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. DARYL RICHARD

Mailing Address 24 WEST RIDGE DRIVE

City State Zip Code
 WEST HARTFORD CT 06117-2065

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

Name of Employer Occupation
 United HealthCare Services Inc VP Comm

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
 224.64

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015

Transaction ID : PR2574979038431

Amount of Each Receipt this Period
 42.12

P/R Deduction (\$14.04 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. LESLIE HARE

Mailing Address 9029 SHEEP RANCH CT

City State Zip Code
 LAS VEGAS NV 89143-5432

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

Name of Employer Occupation
 Health Plan of Nevada Dir Clms

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
 224.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015

Transaction ID : PR2574979438431

Amount of Each Receipt this Period
 42.00

P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ **375.12**

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: PAGE 105 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. HEATHER CIANFROCCO
 Full Name (Last, First, Middle Initial)
 Mailing Address 2799 WEST BARDONNER ROAD
 City State Zip Code
 GIBSONIA PA 15044-8462
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Regn CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1538.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2574986238431
 Amount of Each Receipt this Period
 288.45
 P/R Deduction (\$96.15 Bi-Weekly)

B. JAMIE BURNETT
 Full Name (Last, First, Middle Initial)
 Mailing Address 4625 EWING AVENUE SOUTH
 City State Zip Code
 MINNEAPOLIS MN 55410-1745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Optum Services, Inc VP IT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 624.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2574988238431
 Amount of Each Receipt this Period
 117.00
 P/R Deduction (\$39.00 Bi-Weekly)

C. HEIDI KEMMER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2211 WEST ROCKROSE PLACE
 City State Zip Code
 CHANDLER AZ 85248-4208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Dir Prov Svc
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 226.24

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2575021338431
 Amount of Each Receipt this Period
 42.42
 P/R Deduction (\$14.14 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 447.87
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 106 OF 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial)
A. LAURA CRANDON

Mailing Address 12827 MACBETH FARM LANE

City CLARKSVILLE	State MD	Zip Code 21029-1556
---------------------	-------------	------------------------

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

Name of Employer United HealthCare Services Inc	Occupation Dir Clnt Svc Acct Mgt
----------------------------------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1184.13

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015

Transaction ID : PR2575025238431

Amount of Each Receipt this Period
394.71

P/R Deduction (\$131.57 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. LORI VAN HOLMES

Mailing Address 4117 BRYANT AVENUE SOUTH

City MINNEAPOLIS	State MN	Zip Code 55409-1423
---------------------	-------------	------------------------

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

Name of Employer United HealthCare Services Inc	Occupation VP Human Capital Dev
----------------------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1552.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015

Transaction ID : PR2575030938431

Amount of Each Receipt this Period
291.00

P/R Deduction (\$97.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. JENNIFER O'BRIEN

Mailing Address 4371 BENT TREE LANE

City EAGAN	State MN	Zip Code 55123-3054
---------------	-------------	------------------------

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

Name of Employer United HealthCare Services Inc	Occupation Chief Compli Off
----------------------------------------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3076.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015

Transaction ID : PR2575034538431

Amount of Each Receipt this Period
576.90

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	1262.61
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 192
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. JEFFREY MADDOX
Full Name (Last, First, Middle Initial)

Mailing Address 207 MARY WIL CT

City GREENSBORO State NC Zip Code 27455-2262

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

Name of Employer United HealthCare Services Inc Occupation SB VP Sls Acct Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 224.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2575039538431

Amount of Each Receipt this Period
 42.00

P/R Deduction (\$14.00 Bi-Weekly)

B. JULENE DONNAY
Full Name (Last, First, Middle Initial)

Mailing Address 17763 OAKLAND DRIVE NE

City HAM LAKE State MN Zip Code 55304-4527

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

Name of Employer United HealthCare Services Inc Occupation Dir Sourcing Prcrmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 224.64

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2575046238431

Amount of Each Receipt this Period
 42.12

P/R Deduction (\$14.04 Bi-Weekly)

C. VIVIAN LINDSAY
Full Name (Last, First, Middle Initial)

Mailing Address 14930 SW 39 ST

City DAVIE State FL Zip Code 33331-2767

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

Name of Employer United HealthCare Services Inc Occupation SVP Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1538.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2575054938431

Amount of Each Receipt this Period
 288.45

P/R Deduction (\$96.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	372.57
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 108 OF 192
	<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	

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

Full Name (Last, First, Middle Initial) A. CARY MCCARTY			Date of Receipt MM / DD / YYYY 07 / 31 / 2015 Transaction ID : PR2575059438431
Mailing Address 8800 RUMFIELD RD			Amount of Each Receipt this Period 117.00
City NORTH RICHLAND HILLS	State TX	Zip Code 76182-6131	P/R Deduction (\$39.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C			
Name of Employer United HealthCare Services Inc	Occupation VP Gen Mgmt	Aggregate Year-to-Date 624.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MARK ALLEN			Date of Receipt MM / DD / YYYY 07 / 31 / 2015 Transaction ID : PR2575060238431
Mailing Address 11359 ENTREVAUX DRIVE			Amount of Each Receipt this Period 42.00
City EDEN PRAIRIE	State MN	Zip Code 55347-2862	P/R Deduction (\$14.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C			
Name of Employer United HealthCare Services Inc	Occupation VP Gen Mgmt	Aggregate Year-to-Date 224.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. SANDRA NICHOLS			Date of Receipt MM / DD / YYYY 07 / 31 / 2015 Transaction ID : PR2575074538431
Mailing Address 12706 YOUNG LANE			Amount of Each Receipt this Period 288.45
City NORTH POTOMAC	State MD	Zip Code 20878-6112	P/R Deduction (\$96.15 Bi-Weekly)
FEC ID number of contributing federal political committee. C			
Name of Employer United HealthCare Services Inc	Occupation Shared Svs Regn CMO	Aggregate Year-to-Date 1538.40	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	447.45
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 109 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A. RALPH BECK
Full Name (Last, First, Middle Initial)

Mailing Address W155 N5314 SHARPTAIL COURT

City MENOMONEE FALLS	State WI	Zip Code 53051-6771
-------------------------	-------------	------------------------

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

Name of Employer United HealthCare Services Inc	Occupation Dir Gen Mgmt
----------------------------------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.64**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2575074938431

Amount of Each Receipt this Period

42.12

P/R Deduction (\$14.04 Bi-Weekly)

B. DEBRA BURNAM
Full Name (Last, First, Middle Initial)

Mailing Address 740 VORTEX AVE

City HENDERSON	State NV	Zip Code 89002-6514
-------------------	-------------	------------------------

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

Name of Employer Southwest Medical Assoc. Inc.	Occupation Dir Clin Ops
---------------------------------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.64**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2575076238431

Amount of Each Receipt this Period

42.12

P/R Deduction (\$14.04 Bi-Weekly)

C. KAREN UPCHURCH
Full Name (Last, First, Middle Initial)

Mailing Address 5780 VICTORIA CT

City WESTERVILLE	State OH	Zip Code 43082-8680
---------------------	-------------	------------------------

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

Name of Employer United HealthCare Services Inc	Occupation Dir Comm
----------------------------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **615.36**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2575084438431

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	199.62
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 110 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. GLEN GOLEMI		Date of Receipt MM / DD / YYYY 07 / 31 / 2015
Mailing Address 1203 RUE DEGAS		Transaction ID : PR2575098838431
City MANDEVILLE	State LA	Zip Code 70471-3059
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer United HealthCare Services Inc	Occupation Hlth Plan CEO	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.36	

Full Name (Last, First, Middle Initial) B. CHARLES JACOBY		Date of Receipt MM / DD / YYYY 07 / 31 / 2015
Mailing Address 3315 IRVING AVE		Transaction ID : PR2575099238431
City MINNEAPOLIS	State MN	Zip Code 55408-3321
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 48.00
Name of Employer Optum Services, Inc	Occupation Dir IT	P/R Deduction (\$16.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 256.00	

Full Name (Last, First, Middle Initial) C. PHEBE CHAMPION		Date of Receipt MM / DD / YYYY 07 / 31 / 2015
Mailing Address 34 REYBURN DRIVE		Transaction ID : PR2575108338431
City HENDERSON	State NV	Zip Code 89074-2760
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer Health Plan of Nevada	Occupation Dir Cust Service	P/R Deduction (\$25.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional).....▶	238.38
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 192		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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

A. SCOTT LYDON
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 PLOWBOY PATH
 City COMMACK State NY Zip Code 11725-1410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation KA VP Acct Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575122238431
 Amount of Each Receipt this Period 42.00
 P/R Deduction (\$14.00 Bi-Weekly)

B. ZOE HUNT
 Full Name (Last, First, Middle Initial)
 Mailing Address 4030 SERANGO COURT
 City WEST LINN State OR Zip Code 97068-2840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Dir Med Clin Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575136238431
 Amount of Each Receipt this Period 42.00
 P/R Deduction (\$14.00 Bi-Weekly)

C. JEAN MCGANN
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 VILLAGE ROAD
 City FLORHAM PARK State NJ Zip Code 07932-2415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation SB KA Dir Acct Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575146938431
 Amount of Each Receipt this Period 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	126.12
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 112 OF 192
	<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

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

A. KELLY BEECHER
Full Name (Last, First, Middle Initial)

Mailing Address 7640 CURIOSITY AVE

City LAS VEGAS State NV Zip Code 89131-4792

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

Name of Employer United HealthCare Services Inc Occupation Dir Acctng

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575161138431

Amount of Each Receipt this Period 42.12

P/R Deduction (\$14.04 Bi-Weekly)

B. RON JONES
Full Name (Last, First, Middle Initial)

Mailing Address 10066 ESCAMBIA BAY CT

City NAPLES State FL Zip Code 34120-4621

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

Name of Employer Optum360 Services Inc Occupation SVP Clnt Relationship

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575163538431

Amount of Each Receipt this Period 375.00

P/R Deduction (\$125.00 Bi-Weekly)

C. SCOTT CASSANO
Full Name (Last, First, Middle Initial)

Mailing Address 4855 BUCKHORN BUTTE COURT

City LAS VEGAS State NV Zip Code 89149-5258

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

Name of Employer Health Plan of Nevada Occupation Dir Prov Svc

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575164438431

Amount of Each Receipt this Period 300.00

P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 717.12

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 113 OF 192
	<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	

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

A. ROBERT COSTIN
Full Name (Last, First, Middle Initial)

Mailing Address 3109 SHADY SPRINGS DRIVE

City LOUISVILLE State KY Zip Code 40299-4575

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

Name of Employer United HealthCare Services Inc Occupation PS Sr SIs Exe

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **307.68**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR2575180738431

Amount of Each Receipt this Period **57.69**

P/R Deduction (\$19.23 Bi-Weekly)

B. MICHAEL WIELAND
Full Name (Last, First, Middle Initial)

Mailing Address 6741 EAST SHADOW LAKE DRIVE

City CIRCLE PINES State MN Zip Code 55014-1348

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

Name of Employer Optum Services, Inc Occupation Dir IT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **224.64**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR2575181638431

Amount of Each Receipt this Period **42.12**

P/R Deduction (\$14.04 Bi-Weekly)

C. THOMAS MCGUIRE
Full Name (Last, First, Middle Initial)

Mailing Address 41 CUMBERLAND ROAD

City WEST HARTFORD State CT Zip Code 06119-1121

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

Name of Employer United HealthCare Services Inc Occupation Sr Deputy Gen Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1538.40**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR2575185438431

Amount of Each Receipt this Period **288.45**

P/R Deduction (\$96.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **388.26**

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 192
	<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

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

A. KRISTIN MOORE
Full Name (Last, First, Middle Initial)

Mailing Address 3021 ROSEDALE AVENUE

City DALLAS State TX Zip Code 75205-1451

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

Name of Employer United HealthCare Services Inc Occupation KA Dir Acct Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575194438431

Amount of Each Receipt this Period 42.00

P/R Deduction (\$14.00 Bi-Weekly)

B. MICHAEL PATRICK STAMM
Full Name (Last, First, Middle Initial)

Mailing Address 6721 MOSSY GLEN DR

City FORT MYERS State FL Zip Code 33908-4771

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

Name of Employer United HealthCare Services Inc Occupation SVP Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 640.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575194638431

Amount of Each Receipt this Period 120.00

P/R Deduction (\$40.00 Bi-Weekly)

C. MITCHELL GRANBERG
Full Name (Last, First, Middle Initial)

Mailing Address 6721 GALWAY DRIVE

City EDINA State MN Zip Code 55439-1313

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

Name of Employer Optum Services, Inc Occupation Deputy Gen Counsel Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575196138431

Amount of Each Receipt this Period 42.12

P/R Deduction (\$14.04 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 204.12

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 115 OF 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. PAUL STORDAHL
 Full Name (Last, First, Middle Initial)
 Mailing Address 7001 W 175TH AVENUE
 City State Zip Code
 EDEN PRAIRIE MN 55346-2161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc VP Actuary
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 365.31

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2575213038431
 Amount of Each Receipt this Period
 91.26
 P/R Deduction (\$45.63 Bi-Weekly)

B. PETER MARTIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7091 HIGHOVER DRIVE
 City State Zip Code
 CHANHASSEN MN 55317-7572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Optum Services, Inc VP Gen Mgmt
 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
 07 / 31 / 2015
Transaction ID : PR2575213638431
 Amount of Each Receipt this Period
 45.00
 P/R Deduction (\$15.00 Bi-Weekly)

C. MATTHEW SHORS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4649 EWING AVENUE SOUTH
 City State Zip Code
 MINNEAPOLIS MN 55410-1745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Deputy Gen Counsel Mgr
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1538.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2575222338431
 Amount of Each Receipt this Period
 288.45
 P/R Deduction (\$96.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	424.71
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 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ANDREW SEKEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 SUMMER NIGHT
 City SANTA FE State NM Zip Code 87506-8344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Optum Exec
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1230.72

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575223738431
 Amount of Each Receipt this Period 230.76
 P/R Deduction (\$76.92 Bi-Weekly)

B. HOWARD GILPIN JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 1210 SHEPARD DRIVE
 City BLUE BELL State PA Zip Code 19422-3481
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Dir Act Cnslt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 624.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575224938431
 Amount of Each Receipt this Period 117.00
 P/R Deduction (\$39.00 Bi-Weekly)

C. SUSAN KIRKPATRICK
 Full Name (Last, First, Middle Initial)
 Mailing Address 417 STERLING STREET
 City LANCASTER State MA Zip Code 01523-1847
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation VP Gen Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575233638431
 Amount of Each Receipt this Period 42.00
 P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	389.76
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 117 OF 192
	<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

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

A. THOMAS RUSSELL
Full Name (Last, First, Middle Initial)

Mailing Address 10205 GROOMSBRIDGE ROAD

City State Zip Code
JOHNS CREEK GA 30022-5645

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

Name of Employer Occupation
United HealthCare Services Inc Dir Empl Rel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
224.00

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2575238638431

Amount of Each Receipt this Period
42.00

P/R Deduction (\$14.00 Bi-Weekly)

B. THOMAS CHOATE
Full Name (Last, First, Middle Initial)

Mailing Address 8749 THE ESPLANADE UNIT #10

City State Zip Code
ORLANDO FL 32836-7733

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

Name of Employer Occupation
United HealthCare Services Inc Regn CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
615.36

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2575247838431

Amount of Each Receipt this Period
115.38

P/R Deduction (\$38.46 Bi-Weekly)

C. ROBERT BROOMFIELD
Full Name (Last, First, Middle Initial)

Mailing Address 12501 WEST 156TH STREET

City State Zip Code
OVERLAND PARK KS 66221-2662

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

Name of Employer Occupation
United HealthCare Services Inc UHC SIs RVP KA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
307.68

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2575260438431

Amount of Each Receipt this Period
57.69

P/R Deduction (\$19.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 215.07

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 118 OF 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. TERRY JONES
 Full Name (Last, First, Middle Initial)
 Mailing Address 11856 NW 12TH MANOR
 City CORAL SPRINGS State FL Zip Code 33071-5035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation KA Dir Acct Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575279238431
 Amount of Each Receipt this Period 42.00
 P/R Deduction (\$14.00 Bi-Weekly)

B. SAMANTHA MARCARIO
 Full Name (Last, First, Middle Initial)
 Mailing Address 2117 CAMP INDIANHEAD ROAD
 City LAND O LAKES State FL Zip Code 34639-5268
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Dir Clin Qlty
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575287838431
 Amount of Each Receipt this Period 42.00
 P/R Deduction (\$14.00 Bi-Weekly)

C. JOHN ESSLINGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 4944 W 151ST TERRACE
 City LEAWOOD State KS Zip Code 66224-9744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Med Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575288938431
 Amount of Each Receipt this Period 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	126.12
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 119 OF 192
	<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	

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

A. THOMAS BEAUREGARD
 Full Name (Last, First, Middle Initial)
 Mailing Address 161 SPRING VALLEY ROAD
 City State Zip Code
 RIDGEFIELD CT 06877-1219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Pres United Essentials
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3076.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2575295138431
 Amount of Each Receipt this Period
 576.90
 P/R Deduction (\$192.30 Bi-Weekly)

B. JOHN MONAGHAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 450 EDGEWOOD AVE
 City State Zip Code
 WESTFIELD NJ 07090-4353
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Dir Ntwk Prgms
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 224.64

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2575296838431
 Amount of Each Receipt this Period
 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

C. MARY MCELRATH-JONES
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 AMHERST DRIVE
 City State Zip Code
 NEW ROCHELLE NY 10804-1800
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Dir Comm
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 224.64

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2575302138431
 Amount of Each Receipt this Period
 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	661.14
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 120 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. ROBERT HUGHES

Mailing Address **68 OCEAN DRIVE**

City **SEABROOK** State **NH** Zip Code **03874-4712**

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

Name of Employer **Optum Services, Inc** Occupation **Mgr Mktg Bus Dev**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.64**

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

Transaction ID : PR2575304238431

Amount of Each Receipt this Period

4	2	.	1	2
---	---	---	---	---

42.12

P/R Deduction (\$14.04 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. BRANDON CUEVAS

Mailing Address **25 STRATHMORE**

City **LADERA RANCH** State **CA** Zip Code **92694-0549**

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

Name of Employer **United HealthCare Services Inc** Occupation **Hlth Plan CEO**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1538.40**

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

Transaction ID : PR2575305638431

Amount of Each Receipt this Period

2	8	8	.	4	5
---	---	---	---	---	---

288.45

P/R Deduction (\$96.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. BRADLEY TINNERMON

Mailing Address **845 HICKORY SHOALS RD**

City **MARIETTA** State **GA** Zip Code **30064-1182**

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

Name of Employer **Optum360 Services Inc** Occupation **Dir Gen Mgmt**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.64**

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

Transaction ID : PR2575311038431

Amount of Each Receipt this Period

4	2	.	1	2
---	---	---	---	---

42.12

P/R Deduction (\$14.04 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	372.69
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 121 OF 192
	<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	

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

A. JAN GRIMM
Full Name (Last, First, Middle Initial)

Mailing Address 3608 WEST 85TH STREET

City LEAWOOD State KS Zip Code 66206-1353

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

Name of Employer Optum Services, Inc Occupation Mkt Sls SVP Optuml

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575314838431

Amount of Each Receipt this Period 42.12

P/R Deduction (\$14.04 Bi-Weekly)

B. JEFFREY GOLDBERG
Full Name (Last, First, Middle Initial)

Mailing Address 3410 BRADLEY LANE

City CHEVY CHASE State MD Zip Code 20815-3262

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

Name of Employer Optum Services, Inc Occupation Strat Clnt Rel Ex Optuml

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 624.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575326938431

Amount of Each Receipt this Period 117.00

P/R Deduction (\$39.00 Bi-Weekly)

C. MICHAEL SIMONE
Full Name (Last, First, Middle Initial)

Mailing Address 12 SCALIA COURT

City HAMILTON State NJ Zip Code 08690-1363

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

Name of Employer United HealthCare Services Inc Occupation Dir Gen Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575346738431

Amount of Each Receipt this Period 42.12

P/R Deduction (\$14.04 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 201.24

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 122 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. PATRICK IMDIEKE
 Mailing Address 15900 WHITE PINE DRIVE
 City State Zip Code
 WAYZATA MN 55391-2125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Sr Bus Anlys Cnslt
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 224.64

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2575347938431
 Amount of Each Receipt this Period
 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. MICHAEL TELESKY
 Mailing Address 2602 PENNINGTON PLACE
 City State Zip Code
 VALPARAISO IN 46383-9163
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc KA VP Sls Acct Mgmt
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 624.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2575350938431
 Amount of Each Receipt this Period
 117.00
 P/R Deduction (\$39.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. SALLY BROWN
 Mailing Address 192 HOMEWOOD DRIVE
 City State Zip Code
 CLINTON NY 13323-1512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Assc Dir Service Acct Mgmt
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 224.64

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2575363638431
 Amount of Each Receipt this Period
 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 201.24
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 123 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. JOHN WILSON

Mailing Address 9450 E BECKER LANE
APT 1044

City SCOTTSDALE State AZ Zip Code 85260-6718

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

Name of Employer Optum Services, Inc Occupation Optum Exec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
224.64

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2575372438431

Amount of Each Receipt this Period
42.12

P/R Deduction (\$14.04 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. STEVE MORGAN

Mailing Address 1252 W 71ST TERRACE

City KANSAS CITY State MO Zip Code 64114-1238

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

Name of Employer Optum Services, Inc Occupation VP Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
224.64

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2575374838431

Amount of Each Receipt this Period
42.12

P/R Deduction (\$14.04 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. YASMINE WINKLER

Mailing Address 1429 WEST WIGWAM TRAIL

City MOUNT PROSPECT State IL Zip Code 60056-2940

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

Name of Employer United HealthCare Services Inc Occupation Regn CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
615.36

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2575390938431

Amount of Each Receipt this Period
115.38

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	199.62
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 124 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. GREGORIO CORTEZ

Mailing Address 215 GASPAR BEND

City State Zip Code
 CEDAR PARK TX 78613-4556

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

Name of Employer Occupation
 United HealthCare Services Inc Med Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 224.00

Date of Receipt
 07 / 31 / 2015
Transaction ID : PR2575394338431

Amount of Each Receipt this Period
 42.00

P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. LINDA POST

Mailing Address 6520 JAYCOX ROAD

City State Zip Code
 GALENA OH 43021-9530

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

Name of Employer Occupation
 United HealthCare Services Inc Med Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 07 / 31 / 2015
Transaction ID : PR2575395238431

Amount of Each Receipt this Period
 45.00

P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. CHAD WALKER

Mailing Address 26850 MOUNT HILL ROAD

City State Zip Code
 WELCH MN 55089-4472

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

Name of Employer Occupation
 United HealthCare Services Inc VP IT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 224.64

Date of Receipt
 07 / 31 / 2015
Transaction ID : PR2575414938431

Amount of Each Receipt this Period
 42.12

P/R Deduction (\$14.04 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 129.12

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:	PAGE 125 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. CAROL GOTHARD
Full Name (Last, First, Middle Initial)

Mailing Address 16492 BROOKLANE BOULEVARD

City NORTHVILLE State MI Zip Code 48168-8417

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

Name of Employer United HealthCare Services Inc Occupation Dir Fin

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **615.36**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2575419138431

Amount of Each Receipt this Period
115.38

P/R Deduction (\$38.46 Bi-Weekly)

B. JERI LOSE
Full Name (Last, First, Middle Initial)

Mailing Address 9995 DELL ROAD

City EDEN PRAIRIE State MN Zip Code 55347-3524

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

Name of Employer United HealthCare Services Inc Occupation VP Info Tech

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2575419838431

Amount of Each Receipt this Period
300.00

P/R Deduction (\$100.00 Bi-Weekly)

C. KARIN O'HARA
Full Name (Last, First, Middle Initial)

Mailing Address 1431 HENRY COURT

City CHANHASSEN State MN Zip Code 55317-2200

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

Name of Employer United HealthCare Services Inc Occupation VP Acctng

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **615.36**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2575428738431

Amount of Each Receipt this Period
115.38

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ **530.76**

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 126 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. TIMOTHY SPILKER
 Mailing Address 9801 MOHAWK LANE
 City LEAWOOD State KS Zip Code 66206-2432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Hlth Plan CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **615.36**

Date of Receipt **07 / 31 / 2015**
Transaction ID : PR2575446338431
 Amount of Each Receipt this Period **115.38**
 P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. MILLA HAUTMAN
 Mailing Address 410 SYCAMORE CIRCLE
 City PLYMOUTH State MN Zip Code 55441-5667
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Chief Tech Off
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **224.64**

Date of Receipt **07 / 31 / 2015**
Transaction ID : PR2575447138431
 Amount of Each Receipt this Period **42.12**
 P/R Deduction (\$14.04 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. ROBERT BOOKER
 Mailing Address 16632 HANSON BLVD NW
 City ANDOVER State MN Zip Code 55304-2089
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation VP IT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **224.64**

Date of Receipt **07 / 31 / 2015**
Transaction ID : PR2575447238431
 Amount of Each Receipt this Period **42.12**
 P/R Deduction (\$14.04 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **199.62**
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 127 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. LOUIS FLOCCO
Full Name (Last, First, Middle Initial)
Mailing Address 7353 EAST SKYLINE DRIVE

City ORANGE	State CA	Zip Code 92867-6451
----------------	-------------	------------------------

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

Name of Employer United HealthCare Services Inc	Occupation VP Underwriting
----------------------------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
224.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2575448638431

Amount of Each Receipt this Period
42.00

P/R Deduction (\$14.00 Bi-Weekly)

B. THOMAS GEHLBACH
Full Name (Last, First, Middle Initial)
Mailing Address 5460 YELLOWSTONE TRAIL

City MINNETRISTA	State MN	Zip Code 55331-9193
---------------------	-------------	------------------------

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

Name of Employer United HealthCare Services Inc	Occupation SVP Underwriting
----------------------------------------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
224.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2575448838431

Amount of Each Receipt this Period
42.12

P/R Deduction (\$14.04 Bi-Weekly)

C. THOMAS BARTHEL
Full Name (Last, First, Middle Initial)
Mailing Address 9713 HEMLOCK LANE NORTH

City MAPLE GROVE	State MN	Zip Code 55369-3665
---------------------	-------------	------------------------

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

Name of Employer Optum Services, Inc	Occupation Dir IT
-----------------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
224.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2575484338431

Amount of Each Receipt this Period
42.12

P/R Deduction (\$14.04 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	126.24
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 128 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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. JOHN HAMILTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 202 PARKER
 City SAN MARCOS State TX Zip Code 78666-7718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Assc Dir Service Acct Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1538.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2575489438431
 Amount of Each Receipt this Period 288.45
 P/R Deduction (\$96.15 Bi-Weekly)

B. CLINTON WOLF
 Full Name (Last, First, Middle Initial)
 Mailing Address 2647 N SOUTHPORT
 City CHICAGO State IL Zip Code 60614-1227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Dir Mktg Bus Dev
 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
 07 / 31 / 2015
Transaction ID : PR2575490938431
 Amount of Each Receipt this Period 45.00
 P/R Deduction (\$15.00 Bi-Weekly)

C. DANIEL MACLAUHLAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 780 CENTRAL AVENUE
 City GLENSIDE State PA Zip Code 19038-1701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Assc Dir Regl Affs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.64

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2575492738431
 Amount of Each Receipt this Period 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	375.57
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 129 OF 192
	<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

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

A. MICHELE RAMIREZ
Full Name (Last, First, Middle Initial)

Mailing Address 37 CALAIS ROAD

City RANDOLPH State NJ Zip Code 07869-3531

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

Name of Employer United HealthCare Services Inc Occupation Human Capital Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **224.00**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR2575502438431

Amount of Each Receipt this Period **42.00**

P/R Deduction (\$14.00 Bi-Weekly)

B. DEBORAH SUNDAL
Full Name (Last, First, Middle Initial)

Mailing Address 5109 WEST 66TH ST

City EDINA State MN Zip Code 55439-1429

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

Name of Employer United HealthCare Services Inc Occupation VP Gen Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **224.00**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR2575502938431

Amount of Each Receipt this Period **42.00**

P/R Deduction (\$14.00 Bi-Weekly)

C. AMBER WEBSTER
Full Name (Last, First, Middle Initial)

Mailing Address 2115 VALLEY ROAD

City COSTA MESA State CA Zip Code 92627-3976

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

Name of Employer United HealthCare Services Inc Occupation Dir Gen Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **224.64**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR2575504838431

Amount of Each Receipt this Period **42.12**

P/R Deduction (\$14.04 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **126.12**

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 130 OF 192
	<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

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

A. MOLLY JOSEPH
Full Name (Last, First, Middle Initial)

Mailing Address 2711 CRESCENT RIDGE ROAD

City	State	Zip Code
MINNETONKA	MN	55305-2809

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

Name of Employer	Occupation
United HealthCare Services Inc	VP Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3072.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2575521738431

Amount of Each Receipt this Period
576.00

P/R Deduction (\$192.00 Bi-Weekly)

B. PAUL HEBERT
Full Name (Last, First, Middle Initial)

Mailing Address 13 GOVERNORS ROW

City	State	Zip Code
WEST HARTFORD	CT	06117-1931

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

Name of Employer	Occupation
United HealthCare Services Inc	VP Fin

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2575522338431

Amount of Each Receipt this Period
375.00

P/R Deduction (\$125.00 Bi-Weekly)

C. ERIC KAPLAN
Full Name (Last, First, Middle Initial)

Mailing Address 193 PARTRIDGE LANDING

City	State	Zip Code
GLASTONBURY	CT	06033-2849

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

Name of Employer	Occupation
Optum Services, Inc	NA VP Clnt Dev

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
224.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2575524038431

Amount of Each Receipt this Period
42.00

P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	993.00
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 131 OF 192
(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
-----------------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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

Full Name (Last, First, Middle Initial)
A. WILLIAM JETER

Mailing Address 9557 WOODRIDGE CIRCLE

City	State	Zip Code
EDEN PRAIRIE	MN	55347-2744

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

Name of Employer	Occupation
Optum Services, Inc	VP IT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2575528138431

Amount of Each Receipt this Period

42.00

P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. ROBERT HUNTER

Mailing Address 9236 PRESTON PLACE

City	State	Zip Code
EDEN PRAIRIE	MN	55347-3396

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

Name of Employer	Occupation
United HealthCare Services Inc	Mgr M A

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.64**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2575528338431

Amount of Each Receipt this Period

42.12

P/R Deduction (\$14.04 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. KRISTEN HOLOVIA

Mailing Address 4610 LAKEVIEW DRIVE

City	State	Zip Code
EDINA	MN	55424-1518

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

Name of Employer	Occupation
United HealthCare Services Inc	Deputy Gen Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.64**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2575533038431

Amount of Each Receipt this Period

42.12

P/R Deduction (\$14.04 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	126.24
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 132 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. THOMAS HAMLIN

Mailing Address 2800 NEWMAN

City HOUSTON State TX Zip Code 77098-1408

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

Name of Employer Optum Services, Inc Occupation Sr Behvrl Med Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **615.36**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015

Transaction ID : PR2575536238431

Amount of Each Receipt this Period
115.38

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. AMY BALCK

Mailing Address N3681 VINE RD

City FREEDOM State WI Zip Code 54913-6928

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

Name of Employer United HealthCare Services Inc Occupation KA Mgr Acct Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015

Transaction ID : PR2575548438431

Amount of Each Receipt this Period
42.00

P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. JULIE SCOTT

Mailing Address 271 NW 42ND AVE

City COCONUT CREEK State FL Zip Code 33066-1823

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

Name of Employer United HealthCare Services Inc Occupation Dir Fin

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015

Transaction ID : PR2575578038431

Amount of Each Receipt this Period
42.00

P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ **199.38**

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 133 OF 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ELIZABETH WINSOR
 Full Name (Last, First, Middle Initial)
 Mailing Address 57 WILDERS PASS
 City CANTON State CT Zip Code 06019-2259
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation CEO NA Acct
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1538.40

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575582838431
 Amount of Each Receipt this Period 288.45
 P/R Deduction (\$96.15 Bi-Weekly)

B. RICHARD REEVES
 Full Name (Last, First, Middle Initial)
 Mailing Address 1901 JONAHS RIDGE DRIVE
 City NOLENSVILLE State TN Zip Code 37135-9609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Gen Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575583838431
 Amount of Each Receipt this Period 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

C. MICHAEL PETEROY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1004 PHILLIPS STREET
 City VISTA State CA Zip Code 92083-7171
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Dir Bus Process
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 624.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575585638431
 Amount of Each Receipt this Period 117.00
 P/R Deduction (\$39.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 447.57
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:	PAGE 134 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. KATHLEEN DWYER

Mailing Address **4852 EXCALIBUR DRIVE**

City State Zip Code
SYRACUSE NY 13215-9317

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

Name of Employer Occupation
United HealthCare Services Inc Assc Dir Comm

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
615.36

Date of Receipt
07 / 31 / 2015

Transaction ID : PR2575590638431

Amount of Each Receipt this Period
115.38

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. DEBORAH JORGE

Mailing Address **140 OLD BAY RD**

City State Zip Code
BELCHERTOWN MA 01007-9348

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

Name of Employer Occupation
Optum Services, Inc Bus Adv/Tech Cnslt Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
224.00

Date of Receipt
07 / 31 / 2015

Transaction ID : PR2575593638431

Amount of Each Receipt this Period
42.00

P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. LISA IVERSON

Mailing Address **13341 CARRACH AVENUE**

City State Zip Code
ROSEMOUNT MN 55068-4774

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

Name of Employer Occupation
United HealthCare Services Inc Bus Segment CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
615.36

Date of Receipt
07 / 31 / 2015

Transaction ID : PR2575603238431

Amount of Each Receipt this Period
115.38

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	272.76
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 135 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. DAVID STAPLES		Date of Receipt MM / DD / YYYY 07 / 31 / 2015
Mailing Address 900 SOUTHERLY RD APT 402		Transaction ID : PR2575633938431
City TOWSON	State MD	Zip Code 21204-2943
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.12
Name of Employer United HealthCare Services Inc	Occupation Dir Gen Mgmt	P/R Deduction (\$14.04 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 224.64	

Full Name (Last, First, Middle Initial) B. BRIAN THOMPSON		Date of Receipt MM / DD / YYYY 07 / 31 / 2015
Mailing Address 17829 63RD AVE N		Transaction ID : PR2575634638431
City MAPLE GROVE	State MN	Zip Code 55311-4650
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer United HealthCare Services Inc	Occupation Bus Segment CFO	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.36	

Full Name (Last, First, Middle Initial) C. TERRENCE CLARK		Date of Receipt MM / DD / YYYY 07 / 31 / 2015
Mailing Address 8 COOPER AVENUE		Transaction ID : PR2575636938431
City EDINA	State MN	Zip Code 55436-1315
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 291.00
Name of Employer United HealthCare Services Inc	Occupation Bus Segment CMO	P/R Deduction (\$97.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1552.00	

SUBTOTAL of Receipts This Page (optional).....▶	448.50
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 136 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. NEIL COLLINS
 Mailing Address 8465 MISSION HILLS LANE
 City State Zip Code
 CHANHASSEN MN 55317-7712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc VP Gen Mgmt
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 224.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2575637638431
 Amount of Each Receipt this Period
 42.00
 P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. BENTON DAVIS
 Mailing Address 9825 NORTH 53RD PLACE
 City State Zip Code
 PARADISE VALLEY AZ 85253-1634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Optum Services, Inc VP GM Clin Comnty Ntwk
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1442.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2575639238431
 Amount of Each Receipt this Period
 288.45
 P/R Deduction (\$96.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. CRAIG HERMAN
 Mailing Address 9609 WYOMING CIRCLE
 City State Zip Code
 BLOOMINGTON MN 55438-1628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Optum Services, Inc VP Gen Mgmt
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 615.36

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2575650238431
 Amount of Each Receipt this Period
 115.38
 P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 445.83
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 137 OF 192		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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

Full Name (Last, First, Middle Initial)
A. MARK VAN ERT

Mailing Address 221 OAKWOOD RD

City HOPKINS State MN Zip Code 55343-8532

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

Name of Employer Optum Services, Inc Occupation Dir Gen Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.64**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015

Transaction ID : PR2575650538431

Amount of Each Receipt this Period
42.12

P/R Deduction (\$14.04 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. RONALD GONG

Mailing Address 2240 SOUTH MOON VIEW DRIVE

City HACIENDA HEIGHTS State CA Zip Code 91745-5739

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

Name of Employer United HealthCare Services Inc Occupation M R Sls Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **624.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015

Transaction ID : PR2575651538431

Amount of Each Receipt this Period
117.00

P/R Deduction (\$39.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. JENNY HAYHURST

Mailing Address 23A MOUNT HYGEIA ROAD

City FOSTER State RI Zip Code 02825-1434

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

Name of Employer United HealthCare Services Inc Occupation VP Ntwk Contrctng

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015

Transaction ID : PR2575651838431

Amount of Each Receipt this Period
42.00

P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	201.12
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: PAGE 138 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. ELENA MCFANN

Mailing Address 18925 24TH AVENUE NORTH

City State Zip Code
 PLYMOUTH MN 55447-2072

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

Name of Employer Occupation
 United HealthCare Services Inc Regn CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1538.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015

Transaction ID : PR2575654738431

Amount of Each Receipt this Period
 288.45

P/R Deduction (\$96.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. KATHRYN PIZZANO

Mailing Address PO BOX 31
 44 SAYER RD

City State Zip Code
 BLOOMING GROVE NY 10914-0031

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

Name of Employer Occupation
 United HealthCare Services Inc Dir Gen Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 224.64

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015

Transaction ID : PR2575662138431

Amount of Each Receipt this Period
 42.12

P/R Deduction (\$14.04 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. CARL ALLEN

Mailing Address 8675 AZURE SKY DRIVE

City State Zip Code
 LAS VEGAS NV 89129-2227

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

Name of Employer Occupation
 Southwest Medical Assoc. Inc. Sr Med Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 624.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015

Transaction ID : PR2575669338431

Amount of Each Receipt this Period
 117.00

P/R Deduction (\$39.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 447.57

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:	PAGE 139 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. PATRICK MOESCHLER
Full Name (Last, First, Middle Initial)
Mailing Address 10940 E TIERRA DR
City SCOTTSDALE State AZ Zip Code 85259-5730
FEC ID number of contributing federal political committee. **C**
Name of Employer United HealthCare Services Inc Occupation KA VP Acct Mgmt
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 624.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575676138431
Amount of Each Receipt this Period 117.00
P/R Deduction (\$39.00 Bi-Weekly)

B. BRADY PRIEST
Full Name (Last, First, Middle Initial)
Mailing Address 4401 COUNTRY CLUB RD
City EDINA State MN Zip Code 55424-1148
FEC ID number of contributing federal political committee. **C**
Name of Employer United HealthCare Services Inc Occupation VP Gen Mgmt
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1538.40

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575677238431
Amount of Each Receipt this Period 288.45
P/R Deduction (\$96.15 Bi-Weekly)

C. JILL MITCHELL
Full Name (Last, First, Middle Initial)
Mailing Address 11499 ASHLEY COURT
City INVER GROVE HEIGHTS State MN Zip Code 55077-5251
FEC ID number of contributing federal political committee. **C**
Name of Employer United HealthCare Services Inc Occupation Deputy Gen Counsel Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 246.08

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575678338431
Amount of Each Receipt this Period 46.14
P/R Deduction (\$15.38 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 451.59
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 140 OF 192
	<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. MICHELLE SCHROEDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 3305 TOWN TRAIL
 City BROOKFIELD State WI Zip Code 53045-2640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Dir Med Clin Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575683738431
 Amount of Each Receipt this Period 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

B. CHRISTOPHER STIDMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 6504 CHEROKEE TRAIL
 City EDINA State MN Zip Code 55439-1109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation VP Clnt Relationship
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1538.40

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575683838431
 Amount of Each Receipt this Period 288.45
 P/R Deduction (\$96.15 Bi-Weekly)

C. STEPHEN FARRELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 50 MAJOR DOANE RD
 City WELLFLEET State MA Zip Code 02667-7836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Hlth Plan CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575696238431
 Amount of Each Receipt this Period 115.38
 P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	445.95
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 141 OF 192
<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

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

A. ELIZABETH PROKOCKI
 Full Name (Last, First, Middle Initial)
 Mailing Address 9746 SUNSET HILL DR
 City LONE TREE State CO Zip Code 80124-6720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Hlth Plan CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1538.40

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575705838431
 Amount of Each Receipt this Period 288.45
 P/R Deduction (\$96.15 Bi-Weekly)

B. D ELLEN WILSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 400 STUART STREET 25D
 City BOSTON State MA Zip Code 02116-5011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation EVP Human Capital
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1552.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575708838431
 Amount of Each Receipt this Period 291.00
 P/R Deduction (\$97.00 Bi-Weekly)

C. KIM CRANDALL
 Full Name (Last, First, Middle Initial)
 Mailing Address 6016 BRIGIDS CLOSE DRIVE
 City DUBLIN State OH Zip Code 43017-3428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Dir Med Clin Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575731238431
 Amount of Each Receipt this Period 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	621.57
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 142 OF 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ROBYN HELLAND
 Full Name (Last, First, Middle Initial)
 Mailing Address 9089 PARTRIDGE RD
 City State Zip Code
 MINNETRISTA MN 55375-4513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Dir Traffic/Workforce
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.64

Date of Receipt
 07 / 31 / 2015
Transaction ID : PR2575733838431
 Amount of Each Receipt this Period 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

B. MOLLY KNORR
 Full Name (Last, First, Middle Initial)
 Mailing Address 1144 PROSPECT AVENUE
 City State Zip Code
 HARTFORD CT 06105-1124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc SVP Risk Adjustment
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt
 07 / 31 / 2015
Transaction ID : PR2575735438431
 Amount of Each Receipt this Period 115.38
 P/R Deduction (\$38.46 Bi-Weekly)

C. JEFFREY GROSKLAGS
 Full Name (Last, First, Middle Initial)
 Mailing Address 3233 TIMBERWOLF CIRCLE
 City State Zip Code
 PRIOR LAKE MN 55372-3272
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Optum Services, Inc VP Fin
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.64

Date of Receipt
 07 / 31 / 2015
Transaction ID : PR2575735738431
 Amount of Each Receipt this Period 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	199.62
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 143 OF 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. JULIE STRICKLAND
 Full Name (Last, First, Middle Initial)
 Mailing Address 3207 SUNNYWOOD DRIVE
 City FULLERTON State CA Zip Code 92835-1858
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Dir Advrtng
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575740938431
 Amount of Each Receipt this Period 42.00
 P/R Deduction (\$14.00 Bi-Weekly)

B. STEPHANIE WAITE
 Full Name (Last, First, Middle Initial)
 Mailing Address 2501 S HORIZON DR
 City APPLETON State WI Zip Code 54915-5851
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Prod Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575743238431
 Amount of Each Receipt this Period 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

C. THOMAS PORTZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 2119 SHERIDAN HILLS RD
 City WAYZATA State MN Zip Code 55391-2327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Fin
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575744538431
 Amount of Each Receipt this Period 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	126.24
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 144 OF 192
	<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

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

A. HERBERT DOMER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2715 IONE COURT
 City COLUMBUS State OH Zip Code 43235-2810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Dir IT DT Analytics
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575756038431
 Amount of Each Receipt this Period 42.00
 P/R Deduction (\$14.00 Bi-Weekly)

B. MICHAEL CUNNINGHAM
 Full Name (Last, First, Middle Initial)
 Mailing Address 1025 MAXWELL LANE APT 600
 City HOBOKEN State NJ Zip Code 07030-6825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation COO NA Acct
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 246.08

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575767838431
 Amount of Each Receipt this Period 46.14
 P/R Deduction (\$15.38 Bi-Weekly)

C. MATTHEW MONTOYA
 Full Name (Last, First, Middle Initial)
 Mailing Address 12370 BRADFORD DR
 City PARKER State CO Zip Code 80134-3609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation KA Dir Acct Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575777638431
 Amount of Each Receipt this Period 42.00
 P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 130.14
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 145 OF 192
	<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	

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

A. CHRISTOPHER MULLINS
Full Name (Last, First, Middle Initial)

Mailing Address 15560 SMITHFIELD PLACE

City CENTREVILLE State VA Zip Code 20120-4901

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

Name of Employer United HealthCare Services Inc Occupation Hlth Plan CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **307.68**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR2575778738431

Amount of Each Receipt this Period **57.69**

P/R Deduction (\$19.23 Bi-Weekly)

B. CAROLYN MORRIS
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1744

City SHIPROCK State NM Zip Code 87420-1744

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

Name of Employer United HealthCare Services Inc Occupation Govt Affs Assc Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **225.28**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR2575780938431

Amount of Each Receipt this Period **42.24**

P/R Deduction (\$14.08 Bi-Weekly)

C. SUSAN MADDUX
Full Name (Last, First, Middle Initial)

Mailing Address 16426 FARMERS MILL LANE

City CHESTERFIELD State MO Zip Code 63005-4549

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

Name of Employer United HealthCare Services Inc Occupation Dir Clin Pharm

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **224.64**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR2575783838431

Amount of Each Receipt this Period **42.12**

P/R Deduction (\$14.04 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **142.05**

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: PAGE 146 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. APUR PATEL
 Mailing Address 4101 SHERIDAN AVENUE SOUTH
 City State Zip Code
 MINNEAPOLIS MN 55410-1258
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Optum Services, Inc Deputy Gen Counsel Mgr
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 224.64

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2575809538431
 Amount of Each Receipt this Period
 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. LAURIE RUSSELL
 Mailing Address 3108 SONIA DRIVE
 City State Zip Code
 LAS VEGAS NV 89107-3246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Govt Affs Dir
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 624.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2575812138431
 Amount of Each Receipt this Period
 117.00
 P/R Deduction (\$39.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. SAMUEL MECKEY
 Mailing Address 1828 WYNDAM DRIVE
 City State Zip Code
 SHAKOPEE MN 55379-5437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Optum Services, Inc VP Ops
 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
 07 / 31 / 2015
Transaction ID : PR2575814538431
 Amount of Each Receipt this Period
 300.00
 P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 459.12
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 147 OF 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. WILLIAM MILLER
Full Name (Last, First, Middle Initial)

Mailing Address 26104 WEST 108 TERRACE

City OLATHE State KS Zip Code 66061-7522

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

Name of Employer Optum Services, Inc Occupation Bus Segment CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1415.52

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575819838431

Amount of Each Receipt this Period 265.41

P/R Deduction (\$88.47 Bi-Weekly)

B. JOEL BRADLEY
Full Name (Last, First, Middle Initial)

Mailing Address 300 WHITE MOSS PLACE

City FRANKLIN State TN Zip Code 37064-8628

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

Name of Employer United HealthCare Services Inc Occupation Med Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.36

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575825838431

Amount of Each Receipt this Period 55.38

P/R Deduction (\$18.46 Bi-Weekly)

C. PHILIP KAUFMAN
Full Name (Last, First, Middle Initial)

Mailing Address 1680 NORTH FARM ROAD

City ORONO State MN Zip Code 55356-9309

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

Name of Employer United HealthCare Services Inc Occupation CEO Spclty Ben Visn

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1538.40

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575829838431

Amount of Each Receipt this Period 288.45

P/R Deduction (\$96.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 609.24

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 148 OF 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. MICHELLE HUNTLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 19503 HARMONY AVE
 City State Zip Code
 ROGERS MN 55374-4843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Deputy Gen Counsel
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 583.57

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2575832038431
 Amount of Each Receipt this Period
 124.95
 P/R Deduction (\$41.65 Bi-Weekly)

B. WILLIAM MANDELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 720 MISSION HILL WAY
 City State Zip Code
 COLORADO SPRINGS CO 80921-2672
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Med Dir
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 224.64

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2575837838431
 Amount of Each Receipt this Period
 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

C. MARY JANE BEESON
 Full Name (Last, First, Middle Initial)
 Mailing Address 279 OAK COMMON AVENUE
 City State Zip Code
 SAINT AUGUSTINE FL 32095-6803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Dir Mktg Bus Dev
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2575839538431
 Amount of Each Receipt this Period
 90.90
 P/R Deduction (\$45.45 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 257.97
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:	PAGE 149 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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. CHARLES HARRISON
 Full Name (Last, First, Middle Initial)
 Mailing Address 10603 MILLET SEED HILL
 City COLUMBIA State MD Zip Code 21044-4150
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Med Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575840338431
 Amount of Each Receipt this Period 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

B. EDWARD SKOPAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 43 JOEL DR
 City HEBRON State CT Zip Code 06248-1245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Mkt Grp CIO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 624.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575842738431
 Amount of Each Receipt this Period 117.00
 P/R Deduction (\$39.00 Bi-Weekly)

C. WILLIAM GOLDEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 106 SOUND COURT
 City NORTHPORT State NY Zip Code 11768-3527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Regn CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1538.40

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575859338431
 Amount of Each Receipt this Period 288.45
 P/R Deduction (\$96.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	447.57
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:	PAGE 150 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A. NYLE BRENT COTTINGTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 6630 EMPIRE COURT
 City MAPLE GROVE State MN Zip Code 55311-3433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Acctng
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 246.24

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575865338431
 Amount of Each Receipt this Period 46.17
 P/R Deduction (\$15.39 Bi-Weekly)

B. JAMIE DAMATO
 Full Name (Last, First, Middle Initial)
 Mailing Address 349 KING STREET
 City NAUGATUCK State CT Zip Code 06770-1505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Dir IT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575872038431
 Amount of Each Receipt this Period 45.00
 P/R Deduction (\$15.00 Bi-Weekly)

C. PAMELA LIPPITT
 Full Name (Last, First, Middle Initial)
 Mailing Address 944 RILEY WILLS ROAD
 City LEBANON State OH Zip Code 45036-9037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Assc Dir Med Clin Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575884438431
 Amount of Each Receipt this Period 42.00
 P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	133.17
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: PAGE 151 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. PATRICK LANGAN

Mailing Address 405 MEADOW LANE

City Benson State MN Zip Code 56215-1033

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

Name of Employer: United HealthCare Services Inc Occupation: VP IT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1552.00**

Date of Receipt: **07 / 31 / 2015**

Transaction ID : **PR2575885038431**

Amount of Each Receipt this Period: **291.00**

P/R Deduction (\$97.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. CHRISTOPHER MCGOLDRICK

Mailing Address 48 MOUNTAIN TERRACE ROAD

City West Hartford State CT Zip Code 06107-1533

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

Name of Employer: United HealthCare Services Inc Occupation: Natl VP Sls & Bus Dev

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **224.64**

Date of Receipt: **07 / 31 / 2015**

Transaction ID : **PR2575930438431**

Amount of Each Receipt this Period: **42.12**

P/R Deduction (\$14.04 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. MICHAEL MEDEIROS

Mailing Address 7112 LANGMUIR DRIVE

City MCKINNEY State TX Zip Code 75071-4606

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

Name of Employer: United HealthCare Services Inc Occupation: VP Clnt Mgmt NA Accts

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **624.00**

Date of Receipt: **07 / 31 / 2015**

Transaction ID : **PR2575930638431**

Amount of Each Receipt this Period: **117.00**

P/R Deduction (\$39.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **450.12**

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: PAGE 152 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. CHRISTOPHER ZITZER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2848 FRANCE AVE S
 City ST LOUIS PARK State MN Zip Code 55416-4204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Compli
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575933338431
 Amount of Each Receipt this Period 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

B. RICHARD MATTERA
 Full Name (Last, First, Middle Initial)
 Mailing Address 483 HIGHCROFT ROAD
 City WAYZATA State MN Zip Code 55391-1548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Mkt Group Gen Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3076.80

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575938438431
 Amount of Each Receipt this Period 576.90
 P/R Deduction (\$192.30 Bi-Weekly)

C. DAVID KISCH
 Full Name (Last, First, Middle Initial)
 Mailing Address 7715 GIBRALTER TERRACE
 City APPLE VALLEY State MN Zip Code 55124-6124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation VP Gen Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575966038431
 Amount of Each Receipt this Period 45.00
 P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 664.02
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: PAGE 153 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. DOREEN MELLBERG
 Full Name (Last, First, Middle Initial)
 Mailing Address 119 SOUTH EMERALD DRIVE
 City WAUSAU State WI Zip Code 54401-3964
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum360 Services Inc Occupation Sr Proj Mgr II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575966838431
 Amount of Each Receipt this Period 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

B. MARC SALINAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1630 ROCK RIDGE DRIVE
 City PROSPER State TX Zip Code 75078-9728
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation VP Gen Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 624.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575967938431
 Amount of Each Receipt this Period 117.00
 P/R Deduction (\$39.00 Bi-Weekly)

C. JUDITH PERLMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 116 CANTERBURY LANE PO BOX 2108
 City VINEYARD HAVEN State MA Zip Code 02568-5659
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Gen Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 624.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2575968938431
 Amount of Each Receipt this Period 117.00
 P/R Deduction (\$39.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 276.12
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 154 OF 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial)
A. MARK DICELLO

Mailing Address 5360 ANACALA CT

City WESTERVILLE State OH Zip Code 43082-8352

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

Name of Employer United HealthCare Services Inc Occupation VP Ntwk Contrctng

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015

Transaction ID : PR2575977938431

Amount of Each Receipt this Period
42.00

P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. MARK LEENAY

Mailing Address 29 UNION TERRACE LN N

City PLYMOUTH State MN Zip Code 55441-6232

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

Name of Employer UHC International Services Inc Occupation NA Med Dir/CMO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **624.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015

Transaction ID : PR2575982838431

Amount of Each Receipt this Period
117.00

P/R Deduction (\$39.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. CAROL ANN CHURCHILL

Mailing Address 230 BATTALION WAY

City MOUNT JULIET State TN Zip Code 37122-6135

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

Name of Employer United HealthCare Services Inc Occupation Med Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015

Transaction ID : PR2575988338431

Amount of Each Receipt this Period
42.00

P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **201.00**

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 155 OF 192
	<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
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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. PAMELA GOLD
 Full Name (Last, First, Middle Initial)
 Mailing Address 8370 DYNASTY WAY
 City State Zip Code
 SALT LAKE CITY UT 84121-6089
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc SB KA VP SIs Acct Mgt
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 224.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2575988638431
 Amount of Each Receipt this Period
 42.00
 P/R Deduction (\$14.00 Bi-Weekly)

B. DAVID LAUTH
 Full Name (Last, First, Middle Initial)
 Mailing Address 5109 EMERSON AV S
 City State Zip Code
 MINNEAPOLIS MN 55419-1155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Sr Assc Gen Counsel
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 325.23

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2575991138431
 Amount of Each Receipt this Period
 11.88
 P/R Deduction (\$3.96 Bi-Weekly)

C. MARC BRIGGS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1608 RED TREE CT
 City State Zip Code
 DRAPER UT 84020-7704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Hlth Plan CEO
 Receipt For:
 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
 07 / 31 / 2015
Transaction ID : PR2576001638431
 Amount of Each Receipt this Period
 120.00
 P/R Deduction (\$40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	173.88
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 156 OF 192
	<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

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

A. KAREN SQUARRELL SHABLIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1377 ROWLAND ROAD
 City LANGHORNE State PA Zip Code 19047-3106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Dir Clnt Svc Acct Mgt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2576017338431
 Amount of Each Receipt this Period 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

B. JOHN SCOTT
 Full Name (Last, First, Middle Initial)
 Mailing Address 4574 VIA DON LUIS
 City NEWBURY PARK State CA Zip Code 91320-6905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation VP Info Tech
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2576018638431
 Amount of Each Receipt this Period 115.38
 P/R Deduction (\$38.46 Bi-Weekly)

C. DAVID SANN
 Full Name (Last, First, Middle Initial)
 Mailing Address 8326 ELKO DRIVE
 City ELLICOTT CITY State MD Zip Code 21043-6913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Dir Med Clin Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2576026438431
 Amount of Each Receipt this Period 115.38
 P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 272.88
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 157 OF 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. KIMBERLY SONERHOLM
 Full Name (Last, First, Middle Initial)
 Mailing Address 7210 HEGGIE AVE
 City LAS VEGAS State NV Zip Code 89131-3233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Plan of Nevada Occupation KA VP SIs Acct Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2576033238431
 Amount of Each Receipt this Period 42.00
 P/R Deduction (\$14.00 Bi-Weekly)

B. KARI MILLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 17293 LIBERTY BEACH CT
 City LAKEVILLE State MN Zip Code 55044-8480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Assc Dir Clin Cnslt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2576036738431
 Amount of Each Receipt this Period 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

C. JAY WARMUTH
 Full Name (Last, First, Middle Initial)
 Mailing Address 16215 GRABEN COURT
 City EDEN PRAIRIE State MN Zip Code 55346-2331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Bus Segment Gen Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 624.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2576040038431
 Amount of Each Receipt this Period 117.00
 P/R Deduction (\$39.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	201.12
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:	PAGE 158 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. GAYLE ADAMS
Full Name (Last, First, Middle Initial)

Mailing Address 39 CANYON RIDGE DRIVE

City SANDIA PARK State NM Zip Code 87047-8509

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

Name of Employer United HealthCare Services Inc Occupation VP Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1538.40

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2576040338431

Amount of Each Receipt this Period
288.45

P/R Deduction (\$96.15 Bi-Weekly)

B. KEVIN KANDALFT
Full Name (Last, First, Middle Initial)

Mailing Address 4189 WINDSOR POINT PLACE

City EL DORADO HILLS State CA Zip Code 95762-3797

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

Name of Employer United HealthCare Services Inc Occupation Hlth Plan CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
615.36

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2576043638431

Amount of Each Receipt this Period
115.38

P/R Deduction (\$38.46 Bi-Weekly)

C. LAURA STONE
Full Name (Last, First, Middle Initial)

Mailing Address 4644 VENETO DRIVE

City FRISCO State TX Zip Code 75033-7135

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

Name of Employer United HealthCare Services Inc Occupation Assc Dir Ntwk Contrctng

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
224.00

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2576045138431

Amount of Each Receipt this Period
42.00

P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 445.83

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 159 OF 192
	<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

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

A. MICHAEL GROENENDAAL
 Full Name (Last, First, Middle Initial)
 Mailing Address 1017 N EUCLID
 City OAK PARK State IL Zip Code 60302-1321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Executive Compensation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2576046238431
 Amount of Each Receipt this Period 42.00
 P/R Deduction (\$14.00 Bi-Weekly)

B. KENT MONICAL
 Full Name (Last, First, Middle Initial)
 Mailing Address 9795 E PIEDRA DRIVE
 City SCOTTSDALE State AZ Zip Code 85255-9231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation SVP Prd
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2576051338431
 Amount of Each Receipt this Period 115.38
 P/R Deduction (\$38.46 Bi-Weekly)

C. RESTOR JOHNSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 2700 CRESCENT RIDGE ROAD
 City MINNETONKA State MN Zip Code 55305-2806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Entrprs Real Estate Svs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1552.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2576051638431
 Amount of Each Receipt this Period 291.00
 P/R Deduction (\$97.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	448.38
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 160 OF 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. JOHN REX
 Full Name (Last, First, Middle Initial)
 Mailing Address 503 HARRINGTON ROAD
 City WAYZATA State MN Zip Code 55391-1512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Mkt Group CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3088.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2576060038431
 Amount of Each Receipt this Period 579.00
 P/R Deduction (\$193.00 Bi-Weekly)

B. LANCE NOVAK
 Full Name (Last, First, Middle Initial)
 Mailing Address 17035 41ST PLACE N
 City PLYMOUTH State MN Zip Code 55446-3358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Fin
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2576073538431
 Amount of Each Receipt this Period 115.38
 P/R Deduction (\$38.46 Bi-Weekly)

C. DARRIN JOHNSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 108 SUMMERBROOKE COURT
 City SICKLERVILLE State NJ Zip Code 08081-9685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Hlth Plan CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2576103738431
 Amount of Each Receipt this Period 115.38
 P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	809.76
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 161 OF 192
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. MARGARET OHME
Full Name (Last, First, Middle Initial)

Mailing Address 3543 STEBNER RD

City HERMANTOWN State MN Zip Code 55811-3714

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

Name of Employer Optum Services, Inc Occupation Dir Gen Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR2576104038431

Amount of Each Receipt this Period **150.00**

P/R Deduction (\$50.00 Bi-Weekly)

B. NATHAN KIEWEL
Full Name (Last, First, Middle Initial)

Mailing Address 1137 PRAIRIE VIEW DR SW

City HUTCHINSON State MN Zip Code 55350-6725

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

Name of Employer Optum Services, Inc Occupation Mgr Apps Dev

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **224.00**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR2576117538431

Amount of Each Receipt this Period **42.00**

P/R Deduction (\$14.00 Bi-Weekly)

C. CHRIS KENT
Full Name (Last, First, Middle Initial)

Mailing Address 13273 CARLINGFORD LANE

City ROSEMOUNT State MN Zip Code 55068-6308

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

Name of Employer United HealthCare Services Inc Occupation VP Gen Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **615.36**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR2576119038431

Amount of Each Receipt this Period **115.38**

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	307.38
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 162 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. CHANDRA TORGERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 5433 10TH AVENUE SOUTH
 City State Zip Code
 MINNEAPOLIS MN 55417-2413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Dir Med Clin Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 624.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2576128638431
 Amount of Each Receipt this Period 117.00
 P/R Deduction (\$39.00 Bi-Weekly)

B. MICHAEL DIOGUARDI
 Full Name (Last, First, Middle Initial)
 Mailing Address 4336 YATES STREET
 City State Zip Code
 DENVER CO 80212-2425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Optum Services, Inc Sr Assc Gen Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2576131938431
 Amount of Each Receipt this Period 115.38
 P/R Deduction (\$38.46 Bi-Weekly)

C. STEVEN NELSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 640 LOCUST HILLS DRIVE
 City State Zip Code
 WAYZATA MN 55391-1973
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Bus Segment CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3076.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2576144838431
 Amount of Each Receipt this Period 576.90
 P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 809.28
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 163 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. JOHN FRIDNER
Full Name (Last, First, Middle Initial)
Mailing Address 782 PENFIELD DR
City CAROL STREAM State IL Zip Code 60188-4738
FEC ID number of contributing federal political committee. **C**
Name of Employer United HealthCare Services Inc Occupation SB NA VP SIs/Gen
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **624.00**

Date of Receipt **07 / 31 / 2015**
Transaction ID : PR2576147538431
Amount of Each Receipt this Period **117.00**
P/R Deduction (\$39.00 Bi-Weekly)

B. JEAN BENSON
Full Name (Last, First, Middle Initial)
Mailing Address 14951 HIGHLAND COURT NE
City PRIOR LAKE State MN Zip Code 55372-4109
FEC ID number of contributing federal political committee. **C**
Name of Employer Optum Services, Inc Occupation VP Fin
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **307.68**

Date of Receipt **07 / 31 / 2015**
Transaction ID : PR2576310938431
Amount of Each Receipt this Period **57.69**
P/R Deduction (\$19.23 Bi-Weekly)

C. THOMAS ELLIOTT
Full Name (Last, First, Middle Initial)
Mailing Address 1880 SUGARLOAF CLUB DR
City DULUTH State GA Zip Code 30097-7451
FEC ID number of contributing federal political committee. **C**
Name of Employer United HealthCare Services Inc Occupation SVP Clint Relationship
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **1538.40**

Date of Receipt **07 / 31 / 2015**
Transaction ID : PR2576313338431
Amount of Each Receipt this Period **288.45**
P/R Deduction (\$96.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	463.14
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 164 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. DANIEL KENIRY

Mailing Address 5553 LITTLE FALLS ROAD

City ARLINGTON State VA Zip Code 22207-1525

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

Name of Employer United HealthCare Services Inc Occupation VP Govt Affs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3076.80**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR2577379338431

Amount of Each Receipt this Period **576.90**

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. DEMETRIOS KOUZOUKAS

Mailing Address 15552 57TH PLACE N

City PLYMOUTH State MN Zip Code 55446-3737

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

Name of Employer United HealthCare Services Inc Occupation Bus Segment Gen Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1538.40**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR2578740438431

Amount of Each Receipt this Period **288.45**

P/R Deduction (\$96.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. PHIL KRAUSE

Mailing Address 63 VAN HOLTEN

City BASKING RIDGE State NJ Zip Code 07920-3438

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

Name of Employer United HealthCare Services Inc Occupation Assc Dir Hlthcare Econ

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.00**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR2578742138431

Amount of Each Receipt this Period **42.00**

P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ► **907.35**

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 165 OF 192
	<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	

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

A. KURT STRODE
Full Name (Last, First, Middle Initial)

Mailing Address 15 MIRA SEGURA

City RANCHO SANTA MARGARITA	State CA	Zip Code 92688-4113
--------------------------------	-------------	------------------------

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

Name of Employer Optum Services, Inc	Occupation Assc Gen Counsel
-----------------------------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2578819238431

Amount of Each Receipt this Period

664.02

45.00

P/R Deduction (\$15.00 Bi-Weekly)

B. BARTLEY ASNER
Full Name (Last, First, Middle Initial)

Mailing Address 25 OFFSHORE

City NEWPORT BEACH	State CA	Zip Code 92657-2162
-----------------------	-------------	------------------------

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

Name of Employer Optum Services, Inc	Occupation CEO Med Grp Physn
-----------------------------------------	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.64**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2578819438431

Amount of Each Receipt this Period

664.02

42.12

P/R Deduction (\$14.04 Bi-Weekly)

C. LAURA CIAVOLA
Full Name (Last, First, Middle Initial)

Mailing Address 1686 WILDFIRE LANE

City FRISCO	State TX	Zip Code 75033-7325
----------------	-------------	------------------------

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

Name of Employer United HealthCare Services Inc	Occupation SVP Ops
----------------------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3076.80**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2578824338431

Amount of Each Receipt this Period

664.02

576.90

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	664.02
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 166 OF 192
	<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	

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

A. NATHANAEL BUSBEE
Full Name (Last, First, Middle Initial)
Mailing Address 611 ORPINGTON RD
City BALTIMORE State MD Zip Code 21229-2128
FEC ID number of contributing federal political committee. **C**
Name of Employer United HealthCare Services Inc Occupation Dir Bus Process
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 615.36

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2578826738431
Amount of Each Receipt this Period 115.38
P/R Deduction (\$38.46 Bi-Weekly)

B. JAY COHEN
Full Name (Last, First, Middle Initial)
Mailing Address 2613 VICTORIA DR
City LAGUNA BEACH State CA Zip Code 92651-3948
FEC ID number of contributing federal political committee. **C**
Name of Employer Optum Services, Inc Occupation CEO Med Grp Physn
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1538.40

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2578829638431
Amount of Each Receipt this Period 288.45
P/R Deduction (\$96.15 Bi-Weekly)

C. RACHEL FARMER
Full Name (Last, First, Middle Initial)
Mailing Address 1929 ALBIZIA COURT
City BATON ROUGE State LA Zip Code 70808-3973
FEC ID number of contributing federal political committee. **C**
Name of Employer United HealthCare Services Inc Occupation Dir Govt Affs
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2595208338431
Amount of Each Receipt this Period 42.12
P/R Deduction (\$14.04 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	445.95
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 167 OF 192
	<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

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

A. VINAY KONERU
Full Name (Last, First, Middle Initial)

Mailing Address 3150 CARRICK RD

City CUMMING State GA Zip Code 30040-6402

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

Name of Employer Optum Services, Inc Occupation Dir Bus Dvlp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 224.64

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2595218438431

Amount of Each Receipt this Period 42.12

P/R Deduction (\$14.04 Bi-Weekly)

B. LAURA GROSCHEN
Full Name (Last, First, Middle Initial)

Mailing Address 3872 KENNET CIRCLE

City EAGAN State MN Zip Code 55123-3952

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

Name of Employer Optum Services, Inc Occupation VP IT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3076.80

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2595230938431

Amount of Each Receipt this Period 576.90

P/R Deduction (\$192.30 Bi-Weekly)

C. WESTON SCOTT
Full Name (Last, First, Middle Initial)

Mailing Address 4330 SPECTRUM 1
APT 4330

City SAN ANTONIO State TX Zip Code 78230-3122

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

Name of Employer Optum Services, Inc Occupation Med Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 492.32

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2601125338431

Amount of Each Receipt this Period 92.31

P/R Deduction (\$30.77 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 711.33

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 168 OF 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. TOM ROBERTS
 Full Name (Last, First, Middle Initial)
 Mailing Address 264 PORTERS HILL RD
 City MONROE State CT Zip Code 06468-2236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Assc Dir Act Svs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2601127838431
 Amount of Each Receipt this Period 45.00
 P/R Deduction (\$15.00 Bi-Weekly)

B. MARIANNE SHORT
 Full Name (Last, First, Middle Initial)
 Mailing Address 2215 SUMMIT AVENUE
 City SAINT PAUL State MN Zip Code 55105-1002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation EVP Gen Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3076.80

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2601133538431
 Amount of Each Receipt this Period 576.90
 P/R Deduction (\$192.30 Bi-Weekly)

C. CRAIG NEWTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 654 W GOLDFINCH WAY
 City CHANDLER State AZ Zip Code 85286-4451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Dir Clin Qlty
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2601133738431
 Amount of Each Receipt this Period 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	664.02
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:	PAGE 169 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. ALLEN PATRICK
Full Name (Last, First, Middle Initial)
Mailing Address 225 W ESCALONES
City SAN CLEMENTE State CA Zip Code 92672-5102
FEC ID number of contributing federal political committee. **C**
Name of Employer United HealthCare Services Inc Occupation SB Mgr SIs
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2601136838431
Amount of Each Receipt this Period 42.12
P/R Deduction (\$14.04 Bi-Weekly)

B. AMY SWANSON
Full Name (Last, First, Middle Initial)
Mailing Address 621 SPARROW WAY
City WADSWORTH State OH Zip Code 44281-7716
FEC ID number of contributing federal political committee. **C**
Name of Employer United HealthCare Services Inc Occupation Dir Mktg Bus Dev
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1538.40

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2601140738431
Amount of Each Receipt this Period 288.45
P/R Deduction (\$96.15 Bi-Weekly)

C. JENNIFER MARDOSZ
Full Name (Last, First, Middle Initial)
Mailing Address 17920 SHAVERS LANE
City WAYZATA State MN Zip Code 55391-2737
FEC ID number of contributing federal political committee. **C**
Name of Employer Optum Services, Inc Occupation Deputy Gen Counsel
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2601142038431
Amount of Each Receipt this Period 42.12
P/R Deduction (\$14.04 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	372.69
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 170 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. DOUGLAS MOORE

Mailing Address 3900 BLACKJACK OAK LANE

City PLANO State TX Zip Code 75074-7790

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

Name of Employer United HealthCare Services Inc Occupation Assc Dir Bus Process

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.64**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015

Transaction ID : PR2601149638431

Amount of Each Receipt this Period
42.12

P/R Deduction (\$14.04 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. MICHAEL CHRIST

Mailing Address 23 BRIARWOOD ROAD

City WEST HARTFORD State CT Zip Code 06107-2902

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

Name of Employer United HealthCare Services Inc Occupation Dir Govt Affs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **615.36**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015

Transaction ID : PR2601156938431

Amount of Each Receipt this Period
115.38

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. ANDREW TICE

Mailing Address 1136 JACKSON SPRINGS RD

City MACON State GA Zip Code 31211-1435

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

Name of Employer Optum Services, Inc Occupation Phys Advsr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **369.12**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2015

Transaction ID : PR2601160938431

Amount of Each Receipt this Period
69.21

P/R Deduction (\$23.07 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	226.71
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 171 OF 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. DEBORAH RICE
 Full Name (Last, First, Middle Initial)
 Mailing Address 10775 ROLLING HILLS DRIVE
 City LITTLE ELM State TX Zip Code 75068-2893
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Mgr Nurse Pract
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2601176438431
 Amount of Each Receipt this Period 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

B. ROGER RODRIGUEZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 10501 SW 102 AVENUE
 City MIAMI State FL Zip Code 33176-3511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Hlth Plan CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2601176838431
 Amount of Each Receipt this Period 115.38
 P/R Deduction (\$38.46 Bi-Weekly)

C. MARC KAPROW
 Full Name (Last, First, Middle Initial)
 Mailing Address 5079 SW 89TH AVE
 City COOPER CITY State FL Zip Code 33328-3636
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Exec Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 605.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2601179038431
 Amount of Each Receipt this Period 118.32
 P/R Deduction (\$39.44 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	275.82
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: PAGE 172 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. PAUL JACOBSEN

Mailing Address 733 OAKWOOD DRIVE

City State Zip Code
 NEW BRIGHTON MN 55112-6633

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

Name of Employer Occupation
 Optum Services, Inc Mgr Proj Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **224.64**

Date of Receipt
 07 / 31 / 2015
Transaction ID : PR2605714138431

Amount of Each Receipt this Period
42.12

P/R Deduction (\$14.04 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. KELLY DAVIS

Mailing Address 12013 TALIESIN PLACE
 UNIT 22

City State Zip Code
 RESTON VA 20190-3338

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

Name of Employer Occupation
 United HealthCare Services Inc Govt Affs Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **615.36**

Date of Receipt
 07 / 31 / 2015
Transaction ID : PR2605734238431

Amount of Each Receipt this Period
115.38

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. TRACY MALONE

Mailing Address 900 S 22ND ST

City State Zip Code
 ARLINGTON VA 22202-2625

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

Name of Employer Occupation
 United HealthCare Services Inc External Affs Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **615.36**

Date of Receipt
 07 / 31 / 2015
Transaction ID : PR2605736938431

Amount of Each Receipt this Period
115.38

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ **272.88**

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 173 OF 192
	<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	

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

A. MICHELLE FERENSIC
Full Name (Last, First, Middle Initial)

Mailing Address 404 KENTUCKY BRANCH LANE

City JACKSONVILLE State FL Zip Code 32259-8863

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

Name of Employer United HealthCare Services Inc Occupation SVP Prov Service

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **307.68**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR2605738238431

Amount of Each Receipt this Period **57.69**

P/R Deduction (\$19.23 Bi-Weekly)

B. WILLIAM KARL KIEFER
Full Name (Last, First, Middle Initial)

Mailing Address 101 MAIN STREET NE #4

City MINNEAPOLIS State MN Zip Code 55413-4502

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

Name of Employer Optum Services, Inc Occupation SVP Strat Dev

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1846.08**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR2605755638431

Amount of Each Receipt this Period **346.14**

P/R Deduction (\$115.38 Bi-Weekly)

C. GLORIA AUSTIN
Full Name (Last, First, Middle Initial)

Mailing Address 1547 HARVARD AVENUE

City SALT LAKE CITY State UT Zip Code 84105-1725

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

Name of Employer Optum Services, Inc Occupation SVP Bus Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1538.40**

Date of Receipt **07 / 31 / 2015**

Transaction ID : PR2605757438431

Amount of Each Receipt this Period **288.45**

P/R Deduction (\$96.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	692.28
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 174 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. LARRY SMITH
Full Name (Last, First, Middle Initial)

Mailing Address 1164 RUE CHINON

City State Zip Code
MANDEVILLE LA 70471-1213

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

Name of Employer Occupation
United HealthCare Services Inc Assc Dir Compli

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
307.68

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2605760638431

Amount of Each Receipt this Period
57.69

P/R Deduction (\$19.23 Bi-Weekly)

B. MICHAEL WEISSEL
Full Name (Last, First, Middle Initial)

Mailing Address 99 HAGEN ROAD

City State Zip Code
NEWTON MA 02459-2731

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

Name of Employer Occupation
Optum Services, Inc Optum Exec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1846.08

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2606842938431

Amount of Each Receipt this Period
346.14

P/R Deduction (\$115.38 Bi-Weekly)

C. JOHN MATECZUN
Full Name (Last, First, Middle Initial)

Mailing Address 700 SAINT GEORGE BARBER ROAD

City State Zip Code
DAVIDSONVILLE MD 21035-1348

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

Name of Employer Occupation
United HealthCare Services Inc Pres M&V

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3076.80

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2606845138431

Amount of Each Receipt this Period
576.90

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	980.73
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 175 OF 192
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. THOMAS ZIESMANN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2004 ESTES PARK ROAD
 City SOUTHLAKE State TX Zip Code 76092-3855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation SVP Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1538.40

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2606854438431
 Amount of Each Receipt this Period 288.45
 P/R Deduction (\$96.15 Bi-Weekly)

B. JAN EYER
 Full Name (Last, First, Middle Initial)
 Mailing Address 6241 CRESTBROOK DRIVE
 City MORRISON State CO Zip Code 80465-2225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Exec Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2606857538431
 Amount of Each Receipt this Period 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

C. SHELLEY KENNEDY
 Full Name (Last, First, Middle Initial)
 Mailing Address 706 SUE BARNETT
 City HOUSTON State TX Zip Code 77018-5412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Dir Service Acct Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2607803038431
 Amount of Each Receipt this Period 150.00
 P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 480.57
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 176 OF 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. CYNTHIA MARGRITZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 16702 L STREET
 City OMAHA State NE Zip Code 68135-1324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Assc Dir Clin Qty
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2607806138431
 Amount of Each Receipt this Period 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

B. SUSAN ESPARZA
 Full Name (Last, First, Middle Initial)
 Mailing Address 4305 VISTA VERDE DRIVE
 City AUSTIN State TX Zip Code 78732-2493
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Mgr Nurse Pract
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2607807838431
 Amount of Each Receipt this Period 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

C. VINCENT CEGLIA
 Full Name (Last, First, Middle Initial)
 Mailing Address 63 BLOSSOM ROAD
 City HAMPTON State NJ Zip Code 08827-2710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Dir Compli
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2608052038431
 Amount of Each Receipt this Period 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	126.36
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 177 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. SHAWN SCHWARTZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 338 SNELLING AVE S
 City SAINT PAUL State MN Zip Code 55105-2048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Assc Dir Ntwk Prgms
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2608059338431
 Amount of Each Receipt this Period 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

B. LISA LANDO
 Full Name (Last, First, Middle Initial)
 Mailing Address 60 PINEAPPLE STREET APT 3J
 City BROOKLYN State NY Zip Code 11201-6839
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Dir Gen Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2608059338431
 Amount of Each Receipt this Period 115.38
 P/R Deduction (\$38.46 Bi-Weekly)

C. VIRGINIA FLYNN
 Full Name (Last, First, Middle Initial)
 Mailing Address 30 VAN TERRACE
 City SPARKILL State NY Zip Code 10976-1406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Dir Med Clin Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.36

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2608061238431
 Amount of Each Receipt this Period 115.38
 P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	272.88
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 178 OF 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. SANDRA FERGUSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 SOUTH SHERATON DRIVE
 City AKRON State OH Zip Code 44319-1918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Assc Dir Med Clin Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **615.36**

Date of Receipt **07 / 31 / 2015**
Transaction ID : PR2608061938431
 Amount of Each Receipt this Period **115.38**
 P/R Deduction (\$38.46 Bi-Weekly)

B. ALLYN HECK
 Full Name (Last, First, Middle Initial)
 Mailing Address 3233 BARHITE STREET
 City PASADENA State CA Zip Code 91107-1254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Assc Dir Underwriting
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **224.64**

Date of Receipt **07 / 31 / 2015**
Transaction ID : PR2609810938431
 Amount of Each Receipt this Period **42.12**
 P/R Deduction (\$14.04 Bi-Weekly)

C. NORMAN WRIGHT
 Full Name (Last, First, Middle Initial)
 Mailing Address 1507 NANTUCKET DRIVE
 City HOUSTON State TX Zip Code 77057-1911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation SVP Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **1250.00**

Date of Receipt **07 / 31 / 2015**
Transaction ID : PR2609812338431
 Amount of Each Receipt this Period **375.00**
 P/R Deduction (\$125.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	532.50
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: (check only one)	PAGE 179 OF 192
	<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
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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. KETAN PATEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 8072 YORKSHIRE CIRCLE
 City LA PALMA State CA Zip Code 90623-2026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Mgr Pharm Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2612523338431
 Amount of Each Receipt this Period 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

B. CARRIE RIVERS
 Full Name (Last, First, Middle Initial)
 Mailing Address 6368 TIMBER TRACE
 City BROWNSBURG State IN Zip Code 46112-8641
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Ntwk Contract Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 319.38

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2612533738431
 Amount of Each Receipt this Period 13.68
 P/R Deduction (\$4.56 Bi-Weekly)

C. ANDREW KREJCI
 Full Name (Last, First, Middle Initial)
 Mailing Address 19865 LAKEVIEW AVENUE
 City EXCELSIOR State MN Zip Code 55331-9353
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Dir Comm
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2614310738431
 Amount of Each Receipt this Period 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	97.92
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 180 OF 192
	<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	

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

A. CHRISTINE LIBERATO
Full Name (Last, First, Middle Initial)
Mailing Address 9021 GRINDLAY ST # 300

City CYPRESS	State CA	Zip Code 90630-3098
-----------------	-------------	------------------------

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

Name of Employer Optum Services, Inc	Occupation Exec Dir
-----------------------------------------	------------------------

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
07	/	31	/	2015

Transaction ID : PR2614313838431

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Bi-Weekly)

B. ABIGAIL VAIL
Full Name (Last, First, Middle Initial)
Mailing Address 3653 DWIGHT DAVIS DR

City TALLAHASSEE	State FL	Zip Code 32312-1076
---------------------	-------------	------------------------

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

Name of Employer United HealthCare Services Inc	Occupation Govt Affs Dir
----------------------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **615.36**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2614315638431

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

C. SAMUEL VANNORMAN
Full Name (Last, First, Middle Initial)
Mailing Address 6216 CONCORD AVE

City EDINA	State MN	Zip Code 55424-1736
---------------	-------------	------------------------

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

Name of Employer Optum Services, Inc	Occupation VP Hlthcare Econ
-----------------------------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.64**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR2615086038431

Amount of Each Receipt this Period

42.12

P/R Deduction (\$14.04 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	202.50
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 181 OF 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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 (Last, First, Middle Initial) A. RANDALL SOLOMON		Date of Receipt
Mailing Address 760 HAIGHT STREET		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2015"/>
City	State	Zip Code
SAN FRANCISCO	CA	94117-3317
FEC ID number of contributing federal political committee.		Transaction ID : PR2615671538431
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="115.38"/>
Name of Employer	Occupation	P/R Deduction (\$38.46 Bi-Weekly)
Optum Services, Inc	Behvrl Med Dir	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="615.36"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MICHAEL BIRNBAUM		Date of Receipt
Mailing Address 55 DEAN STREET		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2015"/>
City	State	Zip Code
BROOKLYN	NY	11201-6245
FEC ID number of contributing federal political committee.		Transaction ID : PR2615671638431
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="115.38"/>
Name of Employer	Occupation	P/R Deduction (\$38.46 Bi-Weekly)
United HealthCare Services Inc	Dir Gen Mgmt	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="615.36"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. JENNIFER YOUNG		Date of Receipt
Mailing Address 321 CLINTON PLACE		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2015"/>
City	State	Zip Code
HACKENSACK	NJ	07601-2802
FEC ID number of contributing federal political committee.		Transaction ID : PR2615929438431
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="42.12"/>
Name of Employer	Occupation	P/R Deduction (\$14.04 Bi-Weekly)
Optum Services, Inc	NA Vice Pres AM	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="224.64"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="272.88"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 182 OF 192
	<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	

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

A. WESLEY KIRBY
Full Name (Last, First, Middle Initial)

Mailing Address 3213 SAGE BRUSH TRL

City PLANO State TX Zip Code 75023-5631

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

Name of Employer Optum Services, Inc Occupation Sr Cnslt Bus Adv/Tech

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2615957038431

Amount of Each Receipt this Period 42.12

P/R Deduction (\$14.04 Bi-Weekly)

B. PATRICIA CAMACHO
Full Name (Last, First, Middle Initial)

Mailing Address 906 BLUEBIRD

City MANCHACA State TX Zip Code 78652-4154

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

Name of Employer United HealthCare Services Inc Occupation Assc Dir Mktg

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2617361138431

Amount of Each Receipt this Period 42.12

P/R Deduction (\$14.04 Bi-Weekly)

C. ALAN MIRVISS
Full Name (Last, First, Middle Initial)

Mailing Address 73 DOWNEY

City SAN FRANCISCO State CA Zip Code 94117-4015

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

Name of Employer Optum360 Services Inc Occupation Sr Proj Mgr II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2617361738431

Amount of Each Receipt this Period 42.12

P/R Deduction (\$14.04 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 126.36

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 183 OF 192
	<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
-----------------------------	-----------------------------	-----------------------------

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

A. MEGHAN PASSINEAU
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 BUROAK DRIVE
 City HOPEWELL JUNCTION State NY Zip Code 12533-6434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Assc Dir Bus Process
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2617363638431
 Amount of Each Receipt this Period 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

B. MARK CHERRY
 Full Name (Last, First, Middle Initial)
 Mailing Address 612 BEMIS HEIGHTS PL
 City SAINT CHARLES State MO Zip Code 63303-1752
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Data/Res Anlyt Cnslt Sr Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2617922838431
 Amount of Each Receipt this Period 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

C. MICHAEL BAUBLIT
 Full Name (Last, First, Middle Initial)
 Mailing Address 2201 RIDGEWIND WAY
 City WINDERMERE State FL Zip Code 34786-5823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Dir Gen Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 212.94

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2617927138431
 Amount of Each Receipt this Period 45.63
 P/R Deduction (\$15.21 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	129.87
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 184 OF 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. JAY PUTTERMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 SUNNY REACH DRIVE
 City WEST HARTFORD State CT Zip Code 06117-1531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation NA VP Clnt Dev
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.64

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2617931338431
 Amount of Each Receipt this Period 42.12
 P/R Deduction (\$14.04 Bi-Weekly)

B. MARK JOHNSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 10529 MOUNT CURVE ROAD
 City EDEN PRAIRIE State MN Zip Code 55347-2902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation VP Ntwk Contrctng
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 738.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2617933938431
 Amount of Each Receipt this Period 138.45
 P/R Deduction (\$46.15 Bi-Weekly)

C. JOLENE GARELLI
 Full Name (Last, First, Middle Initial)
 Mailing Address 9 PROSPECT VIEW DRIVE
 City DUMMERSTON State VT Zip Code 05301-8875
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation IT Proj Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.31

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2622559238431
 Amount of Each Receipt this Period 91.26
 P/R Deduction (\$45.63 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	271.83
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 185 OF 192
	<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	

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

A. THERESA CAMPBELL
Full Name (Last, First, Middle Initial)

Mailing Address 1117 XERXES AVENUE SOUTH

City MINNEAPOLIS	State MN	Zip Code 55405-2128
---------------------	-------------	------------------------

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

Name of Employer Optum Services, Inc	Occupation Human Capital Partner Mgr
-----------------------------------------	-----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
224.64

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2622562138431

Amount of Each Receipt this Period
42.12

P/R Deduction (\$14.04 Bi-Weekly)

B. PETER JACOBY
Full Name (Last, First, Middle Initial)

Mailing Address 6203 STONEHAM LANE

City MCLEAN	State VA	Zip Code 22101-2342
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FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc	Occupation SVP Govt Affs
----------------------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3076.80

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2623707538431

Amount of Each Receipt this Period
576.90

P/R Deduction (\$192.30 Bi-Weekly)

C. REBECCA MULES
Full Name (Last, First, Middle Initial)

Mailing Address 660 DOVER STREET

City BALTIMORE	State MD	Zip Code 21230-2228
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FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc	Occupation Dir Govt Affs
----------------------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
615.36

Date of Receipt
07 / 31 / 2015
Transaction ID : PR2624442638431

Amount of Each Receipt this Period
115.38

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	734.40
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 186 OF 192
	<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

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

A. DAVID JACOBSON
Full Name (Last, First, Middle Initial)

Mailing Address 3177 WHITE CEDAR PLACE

City THOUSAND OAKS State CA Zip Code 91362-4904

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

Name of Employer United HealthCare Services Inc Occupation Dir Mktg Bus Dev

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 224.64

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2624444338431

Amount of Each Receipt this Period 42.12

P/R Deduction (\$14.04 Bi-Weekly)

B. JENIFER FULLER JESSEP
Full Name (Last, First, Middle Initial)

Mailing Address 14320 KEITH COURT

City BROOMFIELD State CO Zip Code 80023-9584

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

Name of Employer United HealthCare Services Inc Occupation Dir Govt Affs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 923.04

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2624445438431

Amount of Each Receipt this Period 173.07

P/R Deduction (\$57.69 Bi-Weekly)

C. CHRISTOPHER COLLETTE
Full Name (Last, First, Middle Initial)

Mailing Address 786 CAMBERWELL DRIVE

City EAGAN State MN Zip Code 55123-3939

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

Name of Employer United HealthCare Services Inc Occupation SVP UnitedHlth Grp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 615.36

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2625499538431

Amount of Each Receipt this Period 115.38

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 330.57

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 187 OF 192
	<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

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

A. WESLEY COWEN
Full Name (Last, First, Middle Initial)

Mailing Address 825 VIRGINIA PARK CIRCLE NE

City ATLANTA State GA Zip Code 30306-4081

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

Name of Employer United HealthCare Services Inc Occupation KA Dir Acct Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **615.36**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015

Transaction ID : PR2625532338431

Amount of Each Receipt this Period
115.38

P/R Deduction (\$38.46 Bi-Weekly)

B. GREGORY HINES
Full Name (Last, First, Middle Initial)

Mailing Address 3660 SILVERWOOD RD

City WEST SACRAMENTO State CA Zip Code 95691-5403

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

Name of Employer United HealthCare Services Inc Occupation Dir Govt Affs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **576.90**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015

Transaction ID : PR2626886538431

Amount of Each Receipt this Period
115.38

P/R Deduction (\$38.46 Bi-Weekly)

C. LAMBERT VAN DER WALDE
Full Name (Last, First, Middle Initial)

Mailing Address 45 AUDUBON CAUSEWAY

City LANTANA State FL Zip Code 33462-4756

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

Name of Employer United HealthCare Services Inc Occupation SVP Hlth Reform/Modernizatn

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2496.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015

Transaction ID : PR2628332338431

Amount of Each Receipt this Period
624.00

P/R Deduction (\$208.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **854.76**

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 188 OF 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial)
A. LORI RILEY

Mailing Address 5636 JAMES AVENUE SOUTH

City MINNEAPOLIS	State MN	Zip Code 55419-1611
---------------------	-------------	------------------------

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

Name of Employer United HealthCare Services Inc	Occupation VP Human Capital Partner
----------------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2628834038431

Amount of Each Receipt this Period
375.00

P/R Deduction (\$125.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. BRUCE JARVIE

Mailing Address 18750 KIPHEART DRIVE

City LEESBURG	State VA	Zip Code 20176-8220
------------------	-------------	------------------------

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

Name of Employer Optum Services, Inc	Occupation VP Fin
-----------------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
388.85

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2629554538431

Amount of Each Receipt this Period
166.65

P/R Deduction (\$55.55 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. ELEANOR HOFFMAN

Mailing Address 2700 CONNECTICUT AVE
APT 701

City WASHINGTON	State DC	Zip Code 20008-5312
--------------------	-------------	------------------------

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

Name of Employer United HealthCare Services Inc	Occupation Govt Affs Dir
----------------------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
388.85

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : PR2629559238431

Amount of Each Receipt this Period
166.65

P/R Deduction (\$55.55 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	708.30
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 189 OF 192
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. MICHAEL TUFFIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 5904 ASHBY MANOR PLACE
 City ALEXANDRIA State VA Zip Code 22310-2267
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation SVP Public Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 714.28

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2632087938431
 Amount of Each Receipt this Period 535.71
 P/R Deduction (\$178.57 Bi-Weekly)

B. LAWRENCE PLATT
 Full Name (Last, First, Middle Initial)
 Mailing Address 3830 KING STREET
 City ALEXANDRIA State VA Zip Code 22302-1906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Comm
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1428.56

Date of Receipt 07 / 31 / 2015
Transaction ID : PR2632880738431
 Amount of Each Receipt this Period 1071.42
 P/R Deduction (\$357.14 Bi-Weekly)

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	1607.13
TOTAL This Period (last page this line number only).....▶	83942.74

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. DIANE FELDER

Mailing Address 17406 LEDGEFIELD

City CYPRESS State TX Zip Code 77433-2064

Purpose of Disbursement
Refund

010
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 38407273

Amount of Each Disbursement this Period

Refund

Full Name (Last, First, Middle Initial)

B. PAUL STORDAHL

Mailing Address 7001 W 175TH AVENUE

City EDEN PRAIRIE State MN Zip Code 55346-2161

Purpose of Disbursement
Refund of PAC contribution

010
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 38407274

Amount of Each Disbursement this Period

Refund of PAC contribution

Full Name (Last, First, Middle Initial)

C. JOLENE GARELLI

Mailing Address 9 PROSPECT VIEW DRIVE

City DUMMERSTON State VT Zip Code 05301-8875

Purpose of Disbursement
Refund of PAC contribution

010
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 38407275

Amount of Each Disbursement this Period

Refund of PAC contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. MARY JANE BEESON

Mailing Address 279 OAK COMMON AVENUE

City SAINT AUGUSTINE State FL Zip Code 32095-6803

Purpose of Disbursement
Refund of PAC contribution

010

Candidate Name

Category/
Type

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
07 / 23 / 2015

Transaction ID : 38407276

Amount of Each Disbursement this Period

134.95

Refund of PAC contribution

Full Name (Last, First, Middle Initial)

B.

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

Amount of Each Disbursement this Period

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

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

134.95

1210.73

**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"/> 24	<input type="checkbox"/> 25	<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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Aric Nesbitt for State Representative

Mailing Address PO Box 400

City Lawton State MI Zip Code 49065

Purpose of Disbursement Contribution

011

Candidate Name

MI Rep. Aric Nesbitt

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 27 / 2015

Transaction ID : 38414920

Amount of Each Disbursement this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

B. Arlan B Meekhof for State Senate

Mailing Address 9128 Oak Creek Lane

City West Olive State MI Zip Code 49460

Purpose of Disbursement Contribution

011

Candidate Name

MI Sen. Arlan B. Meekhof

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 27 / 2015

Transaction ID : 38414922

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Steve Bullock for Montana Governor

Mailing Address PO Box 1330

City Helena State MT Zip Code 59620

Purpose of Disbursement Contribution

011

Candidate Name

Steve Bullock

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 27 / 2015

Transaction ID : 38414924

Amount of Each Disbursement this Period

650.00

Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

2150.00

TOTAL This Period (last page this line number only)..... ▶

2150.00