FEC FORM 3X		RE AN For C	D	DI	SI	BI	JF	25	SE	EN	/ E	El	N.	T	S		
1. NAME OF COMMITTEE (in f	ull)	ТҮРЕ	ORI	PRINT	「 ▼					xaı ver					ng,	typ	e
	roup I	ncorp	orat	ed I	PA	С ((Un	ite	d⊦	lea	altl	h (Gr	ou ⊥	p	PA	\C)
ADDRESS (number and	street)	70	1 Penr	nsylva	inia .	Ave	, NV	/									
Check if different than previous reported. (AC	ly		ite 200							<u> </u>		<u> </u>					

2.

DRESS (number and street)	701 Pennsylvania	Ave, N	v								
Check if different	Suite 200										AN
than previously reported. (ACC)	Washington								DC		
FEC IDENTIFICATION NUMBER V			ITY 🔺					ST	ATE		
C C00274431	-	3.	IS TH		×	NE					

	C	C00274431			3. IS THIS REPORT	×	NEW (N) O	R	AMENDED (A)		
4.	TYPE OF REPORT(b)(Choose One)			nthly port e On:	Feb 20 (M2)		May 20 (N		Aug 20 (M8)		Nov 20 (M11) (Non-Election Year Only)
	(a) Qua	arterly Reports:			Mar 20 (M3)		Jun 20 (M	16)	Sep 20 (M9)		Dec 20 (M12) (Non-Election Year Only)
		April 15		×	Apr 20 (M4)		Jul 20 (M	7)	Oct 20 (M10)		Jan 31 (YE)
		Quarterly Report (Q1) July 15) (c)	12-Day PRE -Electi		Primary (12	P)	Ge	neral (12G)		Runoff (12R)
	Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE))	Report for		Convention	(12C)	Spe	ecial (12S)		
					Election on	M M		/ Y Y	Y Y	in the State o	f
		July 31 Mid-Year Report (Non-election Year Only) (MY)	(d)	30-Day POST -Elec Report for		General (30)G)	Ru	noff (30R)		Special (30S)
	Termination Report (TER)			Election on	M		/ Y Y	Y Y	in the State o	f	
5.	Covering	g Period 03	/ D 01	D / Y	2019	through	M 03	M / D 31	D / Y Y 20	үү 19	
	-	I have examined this t Name of Treasurer	Report a Davis, K		pest of my kno	wledge and	belief it is	s true, corre	ct and comple	te.	
Sig	nature of	Treasurer	Kelly, , ,			[Electronical	lly Filed]	Date	04 / D 18	D /	Y Y Y Y 2019
NO	TE: Subm	ission of false, erroneo	us, or inc	complete info	ormation may su	ubject the pe	erson signin	ng this Repor	rt to the penalti	es of 52	U.S.C. § 30109
	U	fice se nly							-	FOR Rev. 05/2	-

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Office Use Only

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SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name

FEC Form 3X (Rev. 05/2016)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

R	Report Covering the Period: From:	03 / D D / Y Y Y Y 01 2019 Te	D: 03 / D D / Y Y Y Y 31 2019
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2019		940764.59
	(b) Cash on Hand at Beginning of Reporting Period	1119717.06	
	(c) Total Receipts (from Line 19)	144078.23	423080.70
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	1263795.29	1363845.29
7.	Total Disbursements (from Line 31)	239000.00	339050.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1024795.29	1024795.29
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Report Covering the Period: From:	/ 01 / Y Y Y Y 01 2019 To:	M M / D D / Y
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)	130568.00	342394.45
(ii) Unitemized	13510.23	78521.81
(iii) TOTAL (add Lines 11(a)(i) and (ii)►	144078.23	420916.26
(b) Political Party Committees(c) Other Political Committees	0.00	0.00
(such as PACs) (d) Total Contributions (add Lines	0.00	0.00
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	144078.23	420916.26
Party Committees	0.00	2164.44
3. All Loans Received	0.00	0.00
 Loan Repayments Received Offsets To Operating Expenditures 	0.00	0.00
 (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) 6. Refunds of Contributions Made to Federal Candidates and Other 	0.00	0.00
Political Committees	0.00	0.00
(Dividends, Interest, etc.)	0.00	0.00
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	144078.23	423080.70
20. Total Federal Receipts (subtract Line 18(c) from Line 19)►	144078.23	423080.70

Page 3

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016) Page 4 COLUMN A COLUMN B **II. Disbursements Total This Period Calendar Year-to-Date** 21. Operating Expenditures: Allocated Federal/Non-Federal (a) Activity (from Schedule H4) 0.00 0.00 Federal Share (i) 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 0.00 0.00 Expenditures (c) Total Operating Expenditures 0.00 (add 21(a)(i), (a)(ii), and (b)) 0.00 22. Transfers to Affiliated/Other Party Committees..... 0.00 0.00 23 Contributions to Federal Candidates/Committees 279500.00 146500.00 and Other Political Committees... 24. Independent Expenditures (use Schedule E)...... Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... 0.00 0.00 25. 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 Loans Made.... Refunds of Contributions To: (a) Individuals/Persons Other 0.00 27. 28. 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees 0.00 0.00 Other Political Committees (c) (such as PACs)..... 0.00 0.00 Total Contribution Refunds (d) (add Lines 28(a), (b), and (c))...... 0.00 0.00 29. Other Disbursements (Including Non-Federal Donations)..... 59550.00 92500.00 30. Federal Election Activity (52 U.S.C. § 30101(20)) (a) Allocated Federal Election Activity (from Schedule H6) (i) Federal Share 0.00 0.00 (ii) "Levin" Share..... 0.00 0.00 (b) Federal Election Activity Paid Entirely With Federal Funds 0.00 0.00 Total Federal Election Activity (add (C) Lines 30(a)(i), 30(a)(ii) and 30(b)) 0.00 0.00 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 239000.00 339050.00 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... 239000.00 339050.00

DETAILED SUMMARY PAGE

of Disbursements

COLUMN A

Total This Period

FEC	Form	3X	(Rev.	05/2016)
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III. Net Contributions/ **Operating Expenditures**

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

(subtract Line 37 from Line 36)

	-7			144078.23
				0.00
	-7			0.00
				144078.23
	-7-			
				0.00
	7			
				0.00
	-7			
1				0.00
la su	-7-	1	-1	

420916.26 0.00 420916.26 - 7 0.00 7 -7 0.00 7 7 0.00

COLUMN B

Calendar Year-to-Date

Page	5
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FOR LINE NUMBER:

PAGE 6 OF

		Use separate schedule(s)	(check	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 1	F	11b	11c	12				
Any information copied from such Reports and			erson for								
or for commercial purposes, other than using t	ne name and a	ddress of any political committee	e to solici	t cont	ribution	is from sl	icn commi	ttee.			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle WEBER, DONALD, , ,	Initial) or Full C	rganization Name	Da	te of I	Receipt	t					
Mailing Address 145 S 17TH ST				03 15 / Y Y Y Y 2019							
City LA CROSSE	State WI	Zip Code 54601-4255		Transaction ID : 43236967 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С						5000				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		Mer	no Iten	n					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00	1								
Full Name of Individual (Last, First, Middle B. GAUDIO , JOSEPH, , ,	Initial) or Full C	rganization Name	Da	te of I	Receipt	t					
Mailing Address 4842 E MOUNTAIN VIEW F				03		31	2019	Y			
	State AZ	Zip Code					98118537	-			
PARADISE VALLEY	AZ	85253-1539	Am	ount	of Each	n Receipt	this Period	d			
FEC ID number of contributing federal political committee.			_	-J-	-	384	.60				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Plan CEO		Mer	no Iten	n					
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify) ▼		1153.80	P/R	Deduc	tion (\$	192.30 Bi	Weekly)				
Full Name of Individual (Last, First, Middle C. WICHMANN, DAVID, , ,	Initial) or Full C	rganization Name	Da	te of I	Receipt	t					
Mailing Address 7000 ANTRIM ROAD				03		31 /	2019	Ŷ			
City EDINA	State MN	Zip Code 55439-1708					598147537 this Period	-			
FEC ID number of contributing federal political committee.	С			_	y	,	384	.60			
Name of Employer (for Individual) United HealthCare Services Inc	Occ	upation (for Individual))		Mei	no Iter	n					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional).					y	,	5769	.20			
TOTAL This Period (last page this line number	er only)										

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PAGE 7 OF

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111			for each category of the Detailed Summary Page		K 11a 13		11b 14	11c	12	17			
	y information copied from such Reports and Sta for commercial purposes, other than using the n				for the		oose of	soliciting	contribu	tions			
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	InitedHealth Group PA	AC)									
A.	Full Name of Individual (Last, First, Middle Initia MEAD, BRUCE, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt						
	Mailing Address 1232 GRAY BRANCH RD				03 / D D / Y Y Y Y Y 03 31 2019								
	City MCKINNEY	State TX	Zip Code 75071-6495		Transaction ID : PR1159816153723 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С							576.	90			
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP N	pation (for Individual) /Iktg		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 1346.10	'	P/R Dedu	uctio	on (\$192	2.30 Bi-W	/eekly)				
в.	Full Name of Individual (Last, First, Middle Initia PENSHORN, JOHN, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt						
	Mailing Address 120 BLACK OAKS LANE		м м 03	/	D D D 31	/ Y	y y 2019	Y					
	City WAYZATA	State MN	Zip Code 55391-1363				-	PR11598 leceipt th		3			
	FEC ID number of contributing federal political committee.	s l							384.	60			
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) UnitedHIth Group		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
С.	Full Name of Individual (Last, First, Middle Initia KALLMEYER, PAUL, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt						
	Mailing Address 468 HERALD DR	1 -			^M 03	/	31		2019 ^Y				
	City AMBLER	State PA	Zip Code 19002-1530					PR11598 leceipt th		3			
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .		230.	76			
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) ity Gen Counsel Mgr	Memo Item									
	Receipt For: Primary General Other (specify)	imary General Aggregate Tear to Date V											
s	UBTOTAL of Receipts This Page (optional)			•			, .		1192.	26			
т	OTAL This Period (last page this line number on	ly)	•••••	•	<u> </u>		_						

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PAGE 8 OF

ITE			Use separate schedule(s) for each category of the	(check only one)							
			Detailed Summary Page	X 11a 11b 11c 12							
	v information copied from such Reports and Star or commercial purposes, other than using the n										
	NAME OF COMMITTEE (In Full)										
	UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	AC)							
A .	Full Name of Individual (Last, First, Middle Initia MIGLIORI, RICHARD, , ,	l) or Full O	rganization Name	Date of Receipt							
-	Mailing Address PO BOX 72			03 / D D / Y Y Y Y 2019							
	City WAYZATA	State MN	Zip Code 55391-0072	Transaction ID : PR1159827453723 Amount of Each Receipt this Period							
	FEC ID number of contributing ederal political committee.	С		384.60							
I	Name of Employer (for Individual)		upation (for Individual) 9, UHG Chief Medical Officer	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Initia MATTEO, MICHAEL, , ,	l) or Full O	rganization Name	Date of Receipt							
I	Mailing Address 25 JEREMIAHS WAY		03 31 2019								
	City SOUTH GLASTONBURY	State CT	Zip Code 06073-3621	Transaction ID : PR1551133453723							
-	FEC ID number of contributing ederal political committee.	C		Amount of Each Receipt this Period							
	Name of Employer (for Individual) Dptum Services, Inc		upation (for Individual) of Client Officer	Memo Item							
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 692.28	P/R Deduction (\$115.38 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Initia CARR, ANTHONY, , ,	l) or Full O	rganization Name	Date of Receipt							
	Mailing Address 5400 THOROUGHBRED LN			03 / D D / Y Y Y Y 2019							
(City SOUTHWEST RANCHES	State FL	Zip Code 33330-2411	Transaction ID : PR1554323453723 Amount of Each Receipt this Period							
	FEC ID number of contributing rederal political committee.	С		384.60							
	Name of Employer (for Individual)		upation (for Individual) Natl VP SIs & Acct Mgmt	Memo Item							
I	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
ຣເ	JBTOTAL of Receipts This Page (optional)		••••••	999.96							
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PAGE 9 OF

		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
			person for the purpose of soliciting contributions to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle A. MILLER, KATHERINE, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 2321 HARBOR LAKE DRIV	/E		03 31 Y Y Y Y 2019							
City ORANGE PARK	State FL	Zip Code 32003-7799	Transaction ID : PR1554324353723 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Pres Ntwk Mgmt	Memo Item							
Receipt For: Primary General Other (specify) \checkmark	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. ANDERSON, CRAIG, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 47 AMATO CIRCLE			M M / D J Y							
City WETHERSFIELD	State CT	Zip Code 06109-3971	Transaction ID : PR1575957353723 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In Pres Ntwk Mgmt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C ERICKSON, KAREN, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 15348 RED OAKS ROAD	1		03 / D D / Y Y Y Y 03 31 2019							
City PRIOR LAKE	State MN	Zip Code 55372-1834	Transaction ID : PR1575957653723 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) um Exec	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			1153.80							
TOTAL This Period (last page this line number	er only)									

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 10 OF

		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
Any information copied from such Reports and or for commercial purposes, other than using			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle A. MONFILETTO, ERNEST, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 3062 COMFORT ROAD			03 31 2019						
City	State	Zip Code	Transaction ID : PR1575958153723						
NEW HOPE	PA	18938-5622	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		153.84						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Prgms	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		461.52	P/R Deduction (\$76.92 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. VALENTA, LEE, , ,	Initial) or Full C	Prganization Name	Date of Receipt						
Mailing Address 5033 PARK TERRACE			M M / D D / Y Y Y Y 03 31 2019						
City	State	Zip Code	Transaction ID : PR1575958553723						
EDINA	MN	55436-1098	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. KELLY, JOHN, , ,	Initial) or Full C	Prganization Name	Date of Receipt						
Mailing Address 341 PLEASANT AVENUE			03 31 Y Y Y Y 2019						
City	State	Zip Code	Transaction ID : PR1575959753723						
SAINT PAUL	MN	55102-2333	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ? Tax	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			923.04						
TOTAL This Period (last page this line numb	er only)	·····							

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PAGE 11 OF

		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
			13 14 15 16 17 person for the purpose of soliciting contributions be to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)	<u>y</u>								
UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Midd WEBB, ROBERT, , ,	le Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 4516 DREXEL AVENUE			03 31 Y Y Y Y Y 03 31 2019						
City EDINA	State MN	Zip Code 55424-1130	Transaction ID : PR1580865353723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 UnitedHlth Grp	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Midd B. HUGHES, RICHARD, , ,	le Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3905 COUNTY ROAD 44			M M M J D J Y						
City	State MN	Zip Code							
MINNETRISTA		55364-9572	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P COO of Human Capital	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Midd C. JOHNSON, THAD, , ,	le Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 9741 GLACIER BAY		1	03 / D D / Y Y Y Y 2019						
City EDEN PRAIRIE	State MN	Zip Code 55347-2615	Transaction ID : PR1596304353723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Group Gen Counsel	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optiona	al)		1153.80						
TOTAL This Period (last page this line num	nber only)								

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PAGE 12 OF

		Use separate schedule(s)			(check only one)							
11			for each category of the Detailed Summary Page		11a 13		11b 14	11c		12 16	17	
	y information copied from such Reports and S for commercial purposes, other than using the			erson for	the		pose of	soliciting	g cont	tributio	ons	
$\overline{\}$	NAME OF COMMITTEE (In Full)										<u>.</u>	
	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)								
Α.	Full Name of Individual (Last, First, Middle Ini SCHUMACHER, DANIEL, , ,	tial) or Full C	rganization Name	Da	ate of	Re	eceipt					
	Mailing Address 5401 LARADA LANE				03	1	31) / Y	۲ 201	19	Ŷ	
	City EDINA	State MN	Zip Code 55436-1024					PR1596 Receipt th				
	FEC ID number of contributing federal political committee.	С						- 7	;	384.60	0	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Grp Pres & COO		Me	emc	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R	Ded	uctio	on (\$19	2.30 Bi-V	Veekly	/)		
в.	Full Name of Individual (Last, First, Middle Ini THEISEN, SCOTT, , ,	tial) or Full C	rganization Name	Da	ate of	Re	eceipt					
	Mailing Address 1950 MEADOWWOODS TRA			03 31 Y Y Y Y Y 2019						ſ		
	City	State MN	Transaction ID : PR1596305653723 Amount of Each Receipt this Period									
		IVIIN	55356-9312	An	nount	of	Each F	Receipt th	nis Pe	riod	_	
	FEC ID number of contributing federal political committee.	С			_	_	-	-		384.60	D	
	Name of Employer (for Individual) Optum Services, Inc	Occ SVI		Me	emc	ltem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R	Dedu	uctio	on (\$192	2.30 Bi-V	Veekly	<i>י</i>)			
С.	Full Name of Individual (Last, First, Middle Ini ANDERSON, MICHAEL, , ,	tial) or Full C	rganization Name	Da	ate of	Re	eceipt					
	Mailing Address 17907 INVERNESS CURVE		The second secon	03 31 2019								
	City EDEN PRAIRIE	State MN	Zip Code 55347-2155		Transaction ID : PR1596309353723 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С			384.60							
	Name of Employer (for Individual) United HealthCare Services Inc	Occ SVF		M	emo	ttem						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R	R Ded	ucti	on (\$19	2.30 Bi-V	Veekly	¥)		
s	UBTOTAL of Receipts This Page (optional)								1'	153.80)	
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PAGE 13 OF

TEMIZED RECEIPTS		Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle I FLYNN, DIANE, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 3318 FOXRIDGE CIRCLE			M M / D D / Y Y Y Y 03 31 2019							
City TAMPA	State FL	Zip Code 33618-2149	Transaction ID : PR1596309753723 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		78.00							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Product	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 234.00	P/R Deduction (\$39.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I B. BORCA, TROY, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 1649 SPRING VALLEY RO			03 / D D / Y Y Y Y Y 03 31 2019							
City	State	Zip Code	Transaction ID : PR1596310453723							
HARTLAND	WI	53029-2056	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		76.92							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For:	Aggregate	Year-to-Date 🔻								
Primary General Other (specify) ▼		230.76	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I DAVIDSON, TRACY, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 6058 HARBOUR TOWN CI	R		03 / D D / Y Y Y Y 03 31 2019							
City WESTERVILLE	State OH	Zip Code 43082-8144	Transaction ID : PR1596311653723 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			539.52							
TOTAL This Period (last page this line number	er only)									

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PAGE 14 OF

		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
> UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle I DUNLOP, RICHARD, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 2964 WYSE COURT			M M / D D / Y Y Y Y Y 03 31 2019						
City LEWIS CENTER	State OH	Zip Code 43035-8253	Transaction ID : PR1596312353723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		392.00						
		un etiene (feur le divielue))							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) ▼		1080.00	P/R Deduction (\$196.00 Bi-Weekly)						
			-						
Full Name of Individual (Last, First, Middle I B. HEUMANN, KURT, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 9825 GERALD DR			03 31 YYYYY 2019						
City	State MO	Zip Code	Transaction ID : PR1596313753723						
SAINT LOUIS		63128-1767	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	1						
Primary General Other (specify) ▼		230.76	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 4304 SOUTH 167 AVENUE			03 31 2019						
City OMAHA	State NE	Zip Code 68135-1353	Transaction ID : PR1596315453723						
FEC ID number of contributing	_	00100-1000	Amount of Each Receipt this Period						
federal political committee.	C		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
Receipt For:		Year-to-Date ▼	_						
Primary General Other (specify)		1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)	<u> </u>		853.52						
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SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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PAGE 15 OF

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111	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 1'		11b	11c	12	<u> </u>		
	y information copied from such Reports and Sta for commercial purposes, other than using the r				the pu						
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated										
A.	Full Name of Individual (Last, First, Middle Initia ROSENTHAL, DANIEL, , ,	al) or Full O	rganization Name	Dat	e of F	Receipt					
	Mailing Address 8 VIA HERMOSA				03 [™]	/ D D 31) / Y	y y 2019	Y		
	City ORINDA	State CA	Zip Code 94563-1828				PR15963 Receipt th		3		
	FEC ID number of contributing federal political committee.	С				- J -		384.0	60		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) s Ntwk		Men	no Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R	Deduc	tion (\$19	2.30 Bi-W	/eekly)			
в.	Full Name of Individual (Last, First, Middle Initia RUTH, KEVIN, , ,	al) or Full Oi	rganization Name	Dat	e of F	Receipt					
	Mailing Address 16621 ALEXANDER MANOR D	RIVE			03 / D D / Y Y Y Y Y 2019						
	City SILVER SPRING	State MD	Zip Code 20905-5028	Transaction ID : PR1596317453723 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С	384.60								
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) SVP, HIth Advancement			Men	no Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R I	Deduc	tion (\$192	2.30 Bi-W	eekly)			
с.	Full Name of Individual (Last, First, Middle Initia STURKEY, DAVID, , ,	al) or Full Oi	rganization Name	Dat	e of F	Receipt					
	Mailing Address 1941 MARINA ROAD	State	Zip Code		03	/ 31		2019			
	City IRMO	SC	29063-8579				PR15963 Receipt th		3		
	FEC ID number of contributing federal political committee.	С				y .	 	78.0	00		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) /P Acct Mgmt		Mer	no Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 234.00	P/R	Deduc	ction (\$39	.00 Bi-We	ekly)			
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

FOR LINE NUMBER:

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PAGE 16 OF

				ailed Summary Page		1 1a		11b		11c		12				
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Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements mana and a	ay not address	be sold or used by any person of any political committee	erson e to so	for the plicit cor	pur ntrib	pose	of s s fro	soliciting om sucl) cor 1 co	ntribut mmitte	ions ee.			
$\left \right\rangle$	NAME OF COMMITTEE (In Full)															
	UnitedHealth Group Incorporate				(C)											
Α.	Full Name of Individual (Last, First, Middle Init DODDY, JOHN, , ,	ial) or Full C	Organiz	ation Name		Date of	Re	eceipt								
	Mailing Address 50 WALSINGHAM ROAD				03 31 2019											
	City	State	Z	ip Code		Trans	acti	ion ID) : F	PR1600	5973	35372	3			
	MENDHAM	NJ		07945-1827	_	Amount	of	Each	Re	eceipt th	is P	eriod				
	FEC ID number of contributing federal political committee.	С				Amount of Each Receipt this Period										
	Name of Employer (for Individual) Optum Services, Inc		cupatior Info Te	n (for Individual) Ich		Me	emc	ltem	1							
	Receipt For:	Aggregate	Year-te	o-Date 🔻												
	Primary General Other (specify) ▼		4	234.00		P/R Ded	uctio	on (\$3	39.0	00 Bi-We	ekly	1)				
в.	Full Name of Individual (Last, First, Middle Init SANDY, LEWIS, , ,	ial) or Full C	Organiz	ation Name	Date of Receipt											
	Mailing Address 4800 SUNNYSLOPE ROAD E					03 31 2019										
	City	State		Transaction ID : PR1600598753723							3					
	EDINA	MN	_	Amount of Each Receipt this Period												
	FEC ID number of contributing federal political committee.	С				384.60										
	Name of Employer (for Individual) United HealthCare Services Inc		•	n (for Individual) Advancement		Me	emc	ltem	1							
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-te	o-Date ▼ 1153.80	F	P/R Dedu	uctio	on (\$1	92.	30 Bi-W	/eek	ly)				
с.	Full Name of Individual (Last, First, Middle Init PETERSON, MATTHEW, , ,	ial) or Full C	Organiz	ation Name		Date of	Re	ceipt								
	Mailing Address 2260 FOX STREET					03 31 2019										
	City	State		ip Code		Trans	act	ion ID):F	PR1602	6699)5372	3			
	ORONO	MN		55356-8316	_	Amount	of	Each	Re	eceipt th	is P	eriod				
	FEC ID number of contributing federal political committee.	С						y		,	_	384.6	60			
	Name of Employer (for Individual) United HealthCare Services Inc			n (for Individual) ary & Ind/Sgt CAO		M	emo	ltem	I							
	Receipt For: Primary General Other (specify)	Aggregate	e Year-te	o-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)											
s	UBTOTAL of Receipts This Page (optional)			•••••	<u> </u>			,		.,		847.2	20			
Т	OTAL This Period (last page this line number of	only)			-											

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PAGE 17 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
			erson for the purpose of soliciting contributions to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)	orated PAC (Ur	nitedHealth Group PA	AC)					
Full Name of Individual (Last, First, Mid A. MALONEY, JEFFREY, , ,	dle Initial) or Full Org	anization Name	Date of Receipt					
Mailing Address 6327 PASADENA POIN	IT BLVD S		03 31 2019					
City	State FL	Zip Code	Transaction ID : PR1613243553723					
GULFPORT	FL	33707-3867	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		192.30					
Name of Employer (for Individual) Optum Services, Inc		ation (for Individual) en Mgmt	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)					
Full Name of Individual (Last, First, Mid B. CELLI, PAT, , ,	Date of Receipt							
Mailing Address 1210 COUNTRY CLUB	03 31 2019							
City CUTCHOGUE	State NY	Zip Code 11935-1728	Transaction ID : PR1613243753723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		384.60					
Name of Employer (for Individual) United HealthCare Services Inc		ation (for Individual) Ian CEO	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 961.50	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Mid C. BELLAMY, THOMAS, , ,	dle Initial) or Full Org	Date of Receipt						
Mailing Address 2743 THOMAS AVENU	IE SOUTH		03 / D D / Y Y Y Y 03 31 2019					
City MINNEAPOLIS	State MN	Zip Code 55416-4346	Transaction ID : PR1653444353723					
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 384.60					
Name of Employer (for Individual) United HealthCare Services Inc	Occup VP Sis	ation (for Individual) 9 Ops	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
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FOR LINE NUMBER:

PAGE 18 OF

T	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)							
			for each category of the Detailed Summary Page	X 11a 11b 11c 12							
An	y information copied from such Reports and S	Statements ma	y not be sold or used by any p	13 14 15 16 berson for the purpose of soliciting contributions							
		e name and a	ddress of any political committe	e to solicit contributions from such committee.							
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group P	AC)							
۹.	Full Name of Individual (Last, First, Middle In SULLIVAN, DANIEL, , ,	itial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 57 QUORN HUNT ROAD			03 31 2019							
	City WEST SIMSBURY	State CT	Zip Code 06092-2524	Transaction ID : PR1653445853723 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		76.92							
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Proj-Prgm Mgmt	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)							
3.	Full Name of Individual (Last, First, Middle In EMERSON, PAUL, , ,	itial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 18855 MEADOW VIEW BLVE			03 / D D / Y Y Y Y 2019							
		State	Zip Code	Transaction ID : PR1806750353723							
	PRIOR LAKE	MN	55372-3133	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		384.60							
	Name of Employer (for Individual) Optum360 Services Inc	Occ CO	upation (for Individual) D	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle In ANDERSON, CATHERINE, , ,	itial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 57 SIMMONS LANE			03 / D D / Y Y Y Y Y 2019							
	City SEVERNA PARK	State MD	Zip Code 21146-1921	Transaction ID : PR1903550753723 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		384.60							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Strat Initiv	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							

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FOR LINE NUMBER:

PAGE 19 OF

ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)						
11			for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 □	17					
	y information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contribution	IS					
	NAME OF COMMITTEE (In Full)									
	UnitedHealth Group Incorporate	ed PAC (I	UnitedHealth Group PA	AC)						
Α.		-	Organization Name	Date of Receipt						
	Mailing Address 12880 53RD STREET NORTH			03 / D D / Y Y Y Y 03 31 2019						
	City STILLWATER	State MN	Zip Code 55082-1063	Transaction ID : PR1903591153723 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		78.00						
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 234.00	P/R Deduction (\$39.00 Bi-Weekly)						
в.	Full Name of Individual (Last, First, Middle Init SANTELLI, JOHN, , ,	ial) or Full C	Organization Name	Date of Receipt						
	Mailing Address 25510 BIRCH BLUFF ROAD			03 31 2019 Transaction ID : PR1903622053723						
	City EXCELSIOR	State MN	Zip Code 55331-8520							
			55551-6520	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		384.60						
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P CIO	Memo Item						
	Receipt For:	Aggregate	Year-to-Date ▼							
	Other (specify) ▼		, 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Init WEYMOUTH, PAUL, , ,	ial) or Full C	Organization Name	Date of Receipt						
	Mailing Address 317 WRIGHTS MILL RD	1 -		03 / D D / Y Y Y Y 03 31 2019						
	City COVENTRY	State CT	Zip Code 06238-1559	Transaction ID : PR1903636953723 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		384.60						
	Name of Employer (for Individual) Optum Services, Inc	Occ VP I	upation (for Individual) IT	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)			847.20						
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FOR LINE NUMBER:

PAGE 20 OF

		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	λC)					
Full Name of Individual (Last, First, Middle HANSEN, DAVID, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 33 VIA CONOCIDO			03 / D D / Y Y Y Y 03 31 2019					
City SAN CLEMENTE	State CA	Zip Code 92673-7044	Transaction ID : PR2119476753723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		270.00					
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) Fin	Memo Item					
Receipt For: Primary General Other (specify) \checkmark	Aggregate	Year-to-Date ▼ 810.00	P/R Deduction (\$135.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle KANNE , KATHLEEN , , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 4826 PALOMINO COURT			03 / D D / Y Y Y Y 03 31 2019					
City	State PA	Zip Code	Transaction ID : PR2119479653723					
ERIE	PA	16506-6624	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		384.60					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Comm	Memo Item					
Receipt For:	Aggregate	Year-to-Date V						
Primary General Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. PITTMAN, AUSTIN, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 4621 EDINA BLVD			03 / D D / Y Y Y Y 03 31 2019					
City EDINA	State MN	Zip Code 55424-1154	Transaction ID : PR2119486753723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CEO	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional).			1039.20					
TOTAL This Period (last page this line numb	er only)							

FOR LINE NUMBER:

PAGE 21 OF

			Use separate schedule(s)	(check only one)						
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11	a	11b	11c	12		
	y information copied from such Reports and Sta				the pu					
or	for commercial purposes, other than using the n	ame and a	address of any political committee	to solicit	contr	ibutions 1	from suc	n commit	iee.	
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	UnitedHealth Group PA	C)						
A.	Full Name of Individual (Last, First, Middle Initia VANASTEN, SUSAN, , ,	l) or Full O	Drganization Name	Dat	e of F	leceipt				
	Mailing Address N2249 NICOLE COURT			03 31 2019						
City State KAUKAUNA WI			Zip Code 54130-9462					49265372 nis Period		
	FEC ID number of contributing federal political committee.	С						80.	00	
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) R Telesls Dir		Merr	no Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$40.00 Bi-Weekly)							
в.	Full Name of Individual (Last, First, Middle Initia WRIGHT, GREGORY, , ,	l) or Full O	Drganization Name	Dat	e of F	leceipt				
	Mailing Address 10471 STRAND TERRACE				03 / D D / Y Y Y Y 2019					
	City SANTA ANA	State CA	Zip Code 92705-1495					19415372	-	
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) HIth Plan CEO			Amount of Each Receipt this Period					
	Name of Employer (for Individual) United HealthCare Services Inc				Mem	no Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$192.30 Bi-Weekly)							
С.	Full Name of Individual (Last, First, Middle Initia MASON, JOHN, J, ,	l) or Full O	Drganization Name	Dat	e of F	leceipt				
	Mailing Address 524 N CRESCENT HEIGHTS B	LVD)3	/ 31	D / Y	2019	Y	
	City LOS ANGELES	State CA	Zip Code 90048-2208	Transaction ID : PR2126373853723 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc			cupation (for Individual) Comm		Mem	no Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 986.57	P/R Deduction (\$192.30 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)		•			9		849.	20	
Т	OTAL This Period (last page this line number or	ly)	••••••							

Use separate schedule(s)

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PAGE 22 OF

			Use separate schedule(s)	(check only one)						
			for each category of the Detailed Summary Page	▲ 11a □ 11b □ 11c □ 12						
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma	ay not be sold or used by any p	13 14 15 16 17 erson for the purpose of soliciting contributions a to collicit contributions from such committee						
or		name and a	doress of any political committee	e to solicit contributions from such committee.						
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	AC)						
A.	Full Name of Individual (Last, First, Middle Initia BURKE, FORREST, , ,	al) or Full O	rganization Name	Date of Receipt						
	Mailing Address 380 LEAF STREET			03 / D D / Y Y Y Y 2019						
			Zip Code 55356-9733	Transaction ID : PR2133132453723 Amount of Each Receipt this Period						
				384.60						
			upation (for Individual) Unit CEO	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
B.	Full Name of Individual (Last, First, Middle Initia HULTGREN, BROR, , ,	al) or Full O	rganization Name	Date of Receipt						
	Mailing Address 408 22ND ST			03 / D D / Y Y Y Y 2019						
	City GOLDEN	State CO	Zip Code 80401-2452	Transaction ID : PR2133133253723 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		384.60						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In CEO	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
С.	Full Name of Individual (Last, First, Middle Initia MORISATO, SUSAN, , ,	al) or Full O	rganization Name	Date of Receipt						
	Mailing Address 238 ARDMORE ROAD		03 / D D / Y Y Y Y 2019							
	City DES PLAINES	State IL	Zip Code 60016-2119	Transaction ID : PR2133133853723 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.			384.60						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Insurance Sols	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)			1153.80						
т	OTAL This Period (last page this line number o	nly)								

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FOR LINE NUMBER:

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PAGE 23 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
or for commercial purposes, other than usin			erson for the purpose of soliciting contributions to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (I	JnitedHealth Group PA	AC)					
Full Name of Individual (Last, First, Midd PUTNAM, T JEFFREY, , ,	lle Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 303 ELMWOOD PLACE			03 / D D / Y Y Y Y 2019					
City MINNEAPOLIS	State MN	Zip Code 55419-1349	Transaction ID : PR2133134253723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Group CFO	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Midd B. FALKENBERG, ROBERT, , ,	lle Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 6 LANTANA			03 / D D / Y Y Y Y Y 2019					
City NEWPORT COAST	State CA	Zip Code 92657-1646	Transaction ID : PR2145728453723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		230.76					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Plan CEO	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 692.28	P/R Deduction (\$115.38 Bi-Weekly)					
Full Name of Individual (Last, First, Midd C. RUMMEL, LEAH, , ,	lle Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 12100 TRAUTWEIN RO	AD		03 / D D / Y Y Y Y Y 03 31 2019					
City AUSTIN	State TX	Zip Code 78737-9358	Transaction ID : PR2145729553723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		76.92					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional	al)		. 692.28					
TOTAL This Period (last page this line nur	mber only)	••••••						

SCHEDULE A (FEC Form 3X) DEOFIDTO

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FOR LINE NUMBER:

PAGE 24 OF

		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12						
			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)	the name and a								
UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle A. SMITH, DANNETTE, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 4200 ALDEN DRIVE			03 / D D / Y Y Y Y Y 2019						
City EDINA	State MN	Zip Code 55416-5010	Transaction ID : PR2145729953723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Deputy Gen Counsel	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. LEWIS, KURT, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 961 RIVER FOREST DRI			M M						
City MAINEVILLE	State OH	Zip Code 45039-7720							
FEC ID number of contributing federal political committee.	С								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle BEAULE, JEAN-FRANCOIS, ,		rganization Name	Date of Receipt						
Mailing Address 7 STRATFORD RD			03 31 2019						
City FARMINGTON	State CT	Zip Code 06032-1444	Transaction ID : PR2225813653723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.			230.76						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) HIth Advancement	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 692.28	P/R Deduction (\$115.38 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)		999.96						
TOTAL This Period (last page this line num	ber only)								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 25 OF

		Use separate schedule(s)	(check only one)						
II EIVIIZED KEGEIFIJ		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
			erson for the purpose of soliciting contributions to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle A. MCGUIRE, MICHAEL, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 437 DRURY LANE			03 31 / Y Y Y Y 03 31 2019						
City WYCKOFF	State NJ	Zip Code 07481-2204	Transaction ID : PR2225818853723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		192.30						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. RYAN, JOHN, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 45 WESTMORELAND LN			03 / D D / Y Y Y Y 03 31 2019						
City NAPERVILLE	State	Zip Code 60540-5817	Transaction ID : PR2225819653723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. SAILOR, ROY, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 276 COYOTE WILLOW D	1		03 / D D / Y Y Y Y 03 31 2019						
City COLORADO SPRINGS	State CO	Zip Code 80921-7631	Transaction ID : PR2225819753723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.			153.84						
Name of Employer (for Individual) Optum Services, Inc Receipt For:		upation (for Individual) Gen Mgmt	Memo Item						
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 461.52	P/R Deduction (\$76.92 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optiona)		730.74						
TOTAL This Period (last page this line num	ber only)								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 26 OF

		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page		12					
Any information copied from such Reports and			erson for the purpose of soliciting cont						
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	he name and a	ddress of any political committee	to solicit contributions from such con	imittee.					
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	NC)						
Full Name of Individual (Last, First, Middle I CONNLY, MICHAEL, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 570 MONTCALM PL			03 31 20 ⁻	Y Y 19					
City SAINT PAUL	State MN	Zip Code 55116-1730	Transaction ID : PR224762585 Amount of Each Receipt this Pe						
FEC ID number of contributing federal political committee.	С			384.60					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ef Tech Off	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I B. CARCIONE, JOSEPH, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 11 CARRIAGE WAY			M M M / D D / 2019 Transaction ID : PR2247626853723 Amount of Each Receipt this Period Amount of Each Receipt this Period 115.40						
City WHITE PLAINS	State NY	Zip Code 10605-5424							
FEC ID number of contributing federal political committee.	С								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Dir	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.20	P/R Deduction (\$57.70 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I C. KANTOLA, KEVIN, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 7031 HALSTEAD DRIVE			03 31 2019						
City MINNETRISTA	State MN	Zip Code 55364-3201	Transaction ID : PR224762705 Amount of Each Receipt this Pe						
FEC ID number of contributing federal political committee.	С			78.00					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Software Engineering	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 234.00	P/R Deduction (\$39.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)				578.00					
TOTAL This Period (last page this line numbe	r only)			48.					

FOR LINE NUMBER:

PAGE 27 OF

		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
			person for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (I	JnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, Mido A. O'BRIEN, DENNIS, , ,	lle Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 61 LOUGHLIN AVE			M M / D D / Y Y Y Y 03 31 2019					
City COS COB	State CT	Zip Code 06807-2621	Transaction ID : PR2247627353723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n CEO	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Mide B. VERNEY, JEFFERY, , ,	lle Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 266 WESTLEDGE ROA			03 / D D / Y Y Y Y 03 31 2019					
City WEST SIMSBURY	State CT	Zip Code 06092-2017	Transaction ID : PR2247627453723					
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 384.60					
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item					
United HealthCare Services Inc Receipt For:		Gen Mgmt	_					
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Mido C. PRINCE, JOHN, , ,	lle Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 546 HARRINGTON RO			03 / D D / Y Y Y Y 03 31 2019					
City WAYZATA	State MN	Zip Code 55391-1550	Transaction ID : PR2259738453723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CEO	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
SUBTOTAL of Receipts This Page (option	al)		1153.80					
TOTAL This Period (last page this line nu	mber only)							

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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FOR LINE NUMBER:

PAGE 28 OF

		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)	,								
UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle A. CRONN, CHRISTOPHER, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1122 COLORADO STRE SUITE 2399			03 31 Y Y Y Y Y 2019						
City AUSTIN	State TX	Zip Code 78701-2132	Transaction ID : PR2270522953723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		115.38						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) t Affs Dir	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.14	P/R Deduction (\$57.69 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. BARRINGER, PAUL, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3709 WILLIAMS LANE			03 / D D / Y Y Y Y 03 31 2019						
City CHEVY CHASE	State MD	Zip Code 20815-4951	Transaction ID : PR2402444353723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		92.30						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Clnt Svc Acct Mgt	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) ▼		276.90	P/R Deduction (\$46.15 Bi-Weekly)						
Full Name of Individual (Last, First, Middle BECKER , JAMES, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 378 FERNDALE ROAD V	1		03 / D / Y Y Y Y 2019						
City WAYZATA	State MN	Zip Code 55391-1559	Transaction ID : PR2402445153723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Ops	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optiona)		592.28						
TOTAL This Period (last page this line num	ber only)								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 29 OF

			Use separate schedule(s)			(check only one)						
11	EIVILLED RECEIPIS		for each category of the Detailed Summary Page		4 11a		11b	11c	12			
	y information copied from such Reports and Stat for commercial purposes, other than using the n											
<u>.</u>	NAME OF COMMITTEE (In Full)											
\rangle	UnitedHealth Group Incorporated	PAC (L	InitedHealth Group PA	C)								
A.	Full Name of Individual (Last, First, Middle Initia COLEMAN, JAMES, , ,) or Full Or	ganization Name		Date of	Re	eceipt					
	Mailing Address 4720 WEST 66TH STREET				03 31 2019							
			Zip Code 55435-1506					PR24024 Receipt th				
									384.	60		
			pation (for Individual) Grp SVP, Human Capital		Me	emc	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	P/R Deduction (\$192.30 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initial HIGA, JOY, , ,) or Full Or		Date of	Re	eceipt						
	Mailing Address 2208 ELM AVENUE				03 / D D / Y Y Y Y 2019							
	City MANHATTAN BEACH	State CA	Zip Code 90266-2809	-			-	PR24024		-		
	FEC ID number of contributing federal political committee.	Occupation (for Individual) VP Regl Affs			Amount of Each Receipt this Period							
	Name of Employer (for Individual) United HealthCare Services Inc				Me	emc	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate `	P/R Deduction (\$192.30 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial ALEXANDER, CORY, , ,) or Full Or	ganization Name		Date of	Re	eceipt					
	Mailing Address 4203 BRADLEY LANE				03 31 2019							
	City CHEVY CHASE	State MD	Zip Code 20815-5234					PR24054 Receipt th				
Name of Employer (for Individual) United HealthCare Services Inc		С			384.60							
		Occupation (for Individual) EVP Corp Affairs			Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Aggregate Year-to-Date ▼ 1153.80				P/R Deduction (\$192.30 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)		•••••					. ,	1153.	80		
Т	OTAL This Period (last page this line number on	ly)	••••••	-			-					

SCHEDULE A (FEC Form 3X) DEAEIDTA

FOR LINE NUMBER:

PAGE 30 OF

		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12						
			erson for the purpose of soliciting contributions						
or for commercial purposes, other than using t	he name and a	ddress of any political committe	e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle WEE, KATHLYN, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 2225 46TH ST NW			03 31 / Y Y Y Y 2019						
City WASHINGTON	State DC	Zip Code 20007-1032	Transaction ID : PR2408545053723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		384.60						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P State SIs OptumI	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle CORZINE, JEFFREY, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 9350 TRACEYTON DRIVE			03 / D D / Y Y Y Y Y 2019						
City DUBLIN	State OH	Zip Code 43017-9689	Transaction ID : PR2437119753723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev	Memo Item						
Receipt For:	Aggregate	Year-to-Date V	7						
Other (specify) ▼		230.76	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. FUENTEVILLA, ANA, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 5110 N CALLE COLMADO			03 / D D / Y Y Y Y Y 31 / 2019						
City TUCSON	State AZ	Zip Code 85718-5002	Transaction ID : PR2437119853723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Seg Chief Med Off	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			846.12						
TOTAL This Period (last page this line number	er only)								

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FOR LINE NUMBER:

PAGE 31 OF

		Use separate schedule(s)	(check	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 1	H	11b	11c	12	<u> </u>		
Any information copied from such Reports and or for commercial purposes, other than using t				the p						
NAME OF COMMITTEE (In Full)			5 10 301101	Cont	ibutions					
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle HAGAN, WILLIAM, , ,	Initial) or Full C	rganization Name	Dat	Date of Receipt						
Mailing Address 6536 E GREYTHORN DRIV	VE			03 ^M	/ D 3		y y 2019	Y		
City SCOTTSDALE	State AZ	Zip Code 85266-6761				: PR2437 Receipt th		3		
FEC ID number of contributing federal political committee.	С				-y		384.0	60		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CEO		Mer	no Item					
Receipt For: Primary General Other (specify) \checkmark	Aggregate	Aggregate Year-to-Date ▼ 1153.80				P/R Deduction (\$192.30 Bi-Weekly)				
Full Name of Individual (Last, First, Middle BALTHAZOR, PAUL, , ,	Initial) or Full C	tial) or Full Organization Name								
Mailing Address 2002 SUGARWOOD DRIVE		State Zip Code MN 55356-9339 C Occupation (for Individual) Bus Segment COO			03 31 2019 Transaction ID : PR2437120753723 Amount of Each Receipt this Period					
City ORONO										
FEC ID number of contributing federal political committee.	С				384.60					
Name of Employer (for Individual) Optum Services, Inc					no Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Aggregate Year-to-Date ▼ 1153.80				P/R Deduction (\$192.30 Bi-Weekly)				
Full Name of Individual (Last, First, Middle C. NESS, LAURA, , ,	Initial) or Full C	rganization Name	Dat	e of F	Receipt					
Mailing Address 10550 PINNACLE WAY	·				/ 3	D / Y	y y 2019	Y		
City WOODBURY	State MN	Zip Code 55129-4282				: PR2437 Receipt th		3		
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) Optum Services, Inc		Occupation (for Individual) VP Gen Mgmt			no Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).					, .		1153.8	30		
TOTAL This Period (last page this line number	er only)									

SCHEDULE A (FEC Form 3X) DEAEIDTA

FOR LINE NUMBER:

PAGE 32 OF

		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
			13 14 15 16 17 erson for the purpose of soliciting contributions a to collicit contributions from such committee						
or for commercial purposes, other than using t	ne name and a	duress of any political committee	e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle COSGRIFF, JOHN, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1837 SUMMIT LANE			03 / D D / Y Y Y Y 03 31 2019						
City MENDOTA HEIGHTS	State MN	Zip Code 55118-4137	Transaction ID : PR2437121653723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Bus Dev	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle EDELSON, BRETT, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 4600 DREXEL AVENUE			03 / D D / Y Y Y Y Y 2019						
City EDINA	State MN	Zip Code 55424-1132	Transaction ID : PR2437127153723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Strategy	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle RAINEY, PETER, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 8850 COUNTY ROAD 26	03 / D D / Y Y Y Y Y 03 31 2019								
City MINNETRISTA	State MN	Zip Code 55359-9445	Transaction ID : PR2437127553723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Corp Controller	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			1153.80						
TOTAL This Period (last page this line number	er only)								

SCHEDULE A (FEC Form 3X) DEOEIDTO

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 33 OF

		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
Any information copied from such Reports and or for commercial purposes, other than using t			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle I A. LIPPERT, ROBIN, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 404 A ST SE			03 31 / Y Y Y Y 03 31 2019						
City WASHINGTON	State DC	Zip Code 20003-3807	Transaction ID : PR2439928053723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Marketing	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I HEYMAN, STEPHEN, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 5300 SHERRILL AVENUE			03 / D D / Y Y Y Y 2019						
City CHEVY CHASE	State MD	Zip Code 20815-3720	Transaction ID : PR2444265753723						
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Govt Affs	Memo Item						
Receipt For:	1	Year-to-Date ▼	-						
Primary General Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I LANGER, DONALD, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 5110 OAK RAMBLING DRI	M M / D D / Y Y Y Y 03 31 2019								
City KATY	State TX	Zip Code 77494-1971	Transaction ID : PR2445015453723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			1153.80						
TOTAL This Period (last page this line number	er only)								

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PAGE 34 OF

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11	EMIZED RECEIPTS			or each category of the Detailed Summary Page		× 11a		11b	11c	12	
	y information copied from such Reports and Sta for commercial purposes, other than using the n										
	NAME OF COMMITTEE (In Full)	anie anu a	luure		10 5				UIII SUCI	COMIN	liee.
\rangle	UnitedHealth Group Incorporated	I PAC (l	Jni	tedHealth Group PA	C)						
A.	Full Name of Individual (Last, First, Middle Initia ADLINGTON SHKABERIN, AMY, , ,	l) or Full O	rgan	ization Name		Date of	Re	ceipt			
	Mailing Address 3890 SUNSET DRIVE					м м 03	/	D D 31	/ Y	ү ү 2019	Ý
	City SPRING PARK	State MN		Zip Code 55384-9634						0164537	
	FEC ID number of contributing federal political committee.	С						-		384	.60
	Name of Employer (for Individual) United HealthCare Services Inc		•	on (for Individual) an Capital		Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 1153.80		P/R Dedu	uctio	on (\$192	2.30 Bi-V	Veekly)	
в.	Full Name of Individual (Last, First, Middle Initia RENFRO, LARRY, , ,	l) or Full O	rgan	ization Name		Date of	Re	ceipt			
	Mailing Address 15 TREVINO CIRCLE					03	/	31	/ Y	y y 2019	Y
	City ANDOVER	State MA		Zip Code 01810-2876	-			-		16815372 nis Period	-
	FEC ID number of contributing federal political committee.	С								384	
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) airman UHG		Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year	r-to-Date ▼ 1153.80		P/R Dedu	ıctic	on (\$192	.30 Bi-W	/eekly)	
C.	Full Name of Individual (Last, First, Middle Initia ORBUCH, DAVID, , ,	l) or Full O	rgan	ization Name		Date of	Re	ceipt			
	Mailing Address 2220 CEDAR LAKE PKWY					03	/	D D D 31		2019	_
	City MINNEAPOLIS	State MN		Zip Code 55416-3644						1682537	
	FEC ID number of contributing federal political committee.	С				<u> </u>		y	9	384	.60
	Name of Employer (for Individual) Optum Services, Inc	Occu Optu	•	on (for Individual) xec		Me	emo	ltem			
	Receipt For: Primary General Other (specify)	Aggregate	Year	r-to-Date ▼ 1153.80		P/R Ded	uctio	on (\$192	2.30 Bi-V	Veekly)	
s	UBTOTAL of Receipts This Page (optional)			•				,		1153	.80
т	OTAL This Period (last page this line number or	ly)		•							

SCHEDULE A (FEC Form 3X) DEOEIDTO

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PAGE 35 OF

		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)	-								
UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Midd A. WEXLER, ERIC, , ,	le Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 7220 WILLOW OAK DR			M M / D D / Y Y Y Y 03 31 2019						
City WEST BLOOMFIELD	State MI	Zip Code 48324-3081	Transaction ID : PR2463723153723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment Gen Counsel	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Midd B. SCHICK, SUSAN, , ,	le Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1220 DENBIGH LANE			03 / D D / Y Y Y Y 03 31 2019						
City WAYNE	State PA	Zip Code 19087-4644	Transaction ID : PR2480620553723						
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Midd c. ABBOTT, CHRISTOPHER, , ,		rganization Name	Date of Receipt						
Mailing Address 12700 MUNDOMAR DR			03 / D D / Y Y Y Y 03 31 2019						
City AUSTIN	State TX	Zip Code 78739-1542	Transaction ID : PR2484541553723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		125.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 625.00	P/R Deduction (\$125.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional	al)		894.20						
TOTAL This Period (last page this line nur	nber only)								

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FOR LINE NUMBER:

PAGE 36 OF

ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)						
			for each category of the Detailed Summary Page	× 11a 11b 11c 12						
Any	information copied from such Reports and St	atements ma	y not be sold or used by any p	13 14 15 16 1 erson for the purpose of soliciting contributions to collicit contributions						
· · · · · ·		name and a	doress of any political committee	e to solicit contributions from such committee.						
	AME OF COMMITTEE (In Full) InitedHealth Group Incorporate	d PAC (l	InitedHealth Group PA	AC)						
	III Name of Individual (Last, First, Middle Init (NARR, KEVIN, , ,	ial) or Full O	ganization Name	Date of Receipt						
	ailing Address 4806 HUTCHINS PLACE NW			03 31 Y Y Y Y Y 2019						
Ci	ty /ASHINGTON	State DC	Zip Code 20007-1528	Transaction ID : PR2484542353723 Amount of Each Receipt this Period						
	EC ID number of contributing deral political committee.	С		384.60						
U	ame of Employer (for Individual) nited HealthCare Services Inc		pation (for Individual) UnitedHlth Grp	Memo Item						
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 961.50	P/R Deduction (\$192.30 Bi-Weekly)						
	III Name of Individual (Last, First, Middle Initi ROPEANO, DANIEL, , ,	ial) or Full O	ganization Name	Date of Receipt						
_	ailing Address 606 BROOKSIDE AVE			03 / D D / Y Y Y Y Y 2019						
Ci	ty /AYNE	State PA	Zip Code	Transaction ID : PR2484542853723						
			19087-4826	Amount of Each Receipt this Period						
	EC ID number of contributing deral political committee.	C		192.30						
	ame of Employer (for Individual) ited HealthCare Services Inc		ıpation (for Individual) Plan CEO	Memo Item						
Re	eceipt For:	Aggregate	Year-to-Date 🔻							
Primary General Other (specify) ▼			, 576.90	P/R Deduction (\$96.15 Bi-Weekly)						
	III Name of Individual (Last, First, Middle Initi MANDERFELD, THOMAS, , ,	Date of Receipt								
Mailing Address 3760 WEST CALHOUN PARKWAY				03 / D D / Y Y Y Y Y 2019						
Ci N	ty IINNEAPOLIS	State MN	Zip Code 55410-1118	Transaction ID : PR2486697953723 Amount of Each Receipt this Period						
	EC ID number of contributing deral political committee.	С		80.00						
U	ame of Employer (for Individual) nited HealthCare Services Inc		pation (for Individual) capital Mkt Comm	Memo Item						
	eceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 240.00	P/R Deduction (\$40.00 Bi-Weekly)						

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 37 OF

		Use separate schedule(s)				(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X	H		11b	11c	12						
Any information copied from such Reports and			erson for											
or for commercial purposes, other than using t NAME OF COMMITTEE (In Full)	ne name and a	ddress of any political committee	e to solic	it con	tridi	utions t	rom sucr	n committ	iee.					
UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group PA	AC)											
Full Name of Individual (Last, First, Middle MCMAHON, DIRK, , ,	Initial) or Full C	rganization Name	Da	Date of Receipt										
Mailing Address 60 WILDHURST ROAD				03 31 Y Y Y Y Y 03 31 2019										
City EXCELSIOR	State MN	Zip Code 55331-8461						45705372 nis Period						
FEC ID number of contributing federal political committee.	С					y		384.	60					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Grp Pres & COO		Me	mo	Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)											
Full Name of Individual (Last, First, Middle B. NATHAN, DONALD, , ,	Initial) or Full C	rganization Name	Date of Receipt											
Mailing Address 275 GREENWICH STREET			Ň	03 / D D / Y Y Y Y 2019										
City NEW YORK	State NY	Zip Code 10007-2150						45735372	-					
FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period 384.60										
Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) Chief of Staff - UHG CEO			Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)											
Full Name of Individual (Last, First, Middle SMITH, KARA, , ,	Initial) or Full C	rganization Name	Da	ite of	Red	ceipt								
Mailing Address 610 CRESTWOOD DRIVE				03	/	31		2019						
City ALEXANDRIA	State VA	Zip Code 22302-2533						17535372 nis Period						
FEC ID number of contributing federal political committee.	С			_		y .	,	384.	60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs		Me	mo	ltem								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R	Dedu	ictic	on (\$192	2.30 Bi-V	Veekly)						
SUBTOTAL of Receipts This Page (optional).						, .	,	1153.	80					
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PAGE 38 OF

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111	EMIZED RECEIPTS		for each category of the Detailed Summary Page		K 11a 13		11b	11c	12	47			
	y information copied from such Reports and Sta for commercial purposes, other than using the r				for the		pose of		contribu				
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	AC)									
A.	Full Name of Individual (Last, First, Middle Initia PURDY, PATRICIA, , ,	ll) or Full O	rganization Name	Date of Receipt									
	Mailing Address 7417 LYNNHURST STREET				03 / D D / Y Y Y Y 03 31 2019								
	City CHEVY CHASE	State MD	Zip Code 20815-3101	_					30065372 is Period				
	FEC ID number of contributing federal political committee.	С							384.	60			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) External Affairs		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initia TIERNEY, JOELLE, , ,	ll) or Full Oi	rganization Name		Date of	Re	ceipt						
	Mailing Address 5710 TAYCHOPERA RD	01-1-	7.0.0.1	Mom / D / Y									
	City MADISON	State WI	Zip Code 53705-1020				-		0075372 is Period	-			
	FEC ID number of contributing federal political committee.	С			U			384.					
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) VP Govt Affs			Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initia HOSTETLER, BRENDAN, , ,	ll) or Full Oi	rganization Name		Date of	Re	ceipt						
	Mailing Address 2309 W WINNEMAC AVE	1			^M 03	1	31) / Y	ү 2019	Y			
	City CHICAGO	State IL	Zip Code 60625-1817						5 4195372 is Period				
	FEC ID number of contributing federal political committee.	С			<u> </u>	_	y .	. ,	384.	60			
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Affs Dir		Me	emo	tem						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80]	P/R Ded	uctio	on (\$19:	2.30 Bi-W	/eekly)				
s	UBTOTAL of Receipts This Page (optional)		••••••	•			, .	.,	1153.	80			
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Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 39 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
or for commercial purposes, other than using			erson for the purpose of soliciting contributions to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle RAMSAY, RICHARD, , ,	e Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 543 E LURAY AVE			03 31 Y Y Y Y Y 03 31 2019									
City ALEXANDRIA	State VA	Zip Code 22301-1605	Transaction ID : PR2542542253723									
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	P/R Deduction (\$50.00 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. YAU, ANNE, , ,	e Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 9905 WOODLAND DRIVE	I		03 / D D / Y Y Y Y 03 31 2019									
City SILVER SPRING	State MD	Zip Code 20902-4047	Transaction ID : PR2543582553723 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		115.38									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) External Affs	P/R Deduction (\$57.69 Bi-Weekly)									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.14										
Full Name of Individual (Last, First, Middle C. DAVENPORT, ALLISON, , ,	e Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 141 PELHAM ROAD			03 / D D / Y Y Y Y 2019									
City PHILADELPHIA	State PA	Zip Code 19119-2661	Transaction ID : PR2552313653723 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)		599.98									
TOTAL This Period (last page this line num	ber only)	••••••										

FOR LINE NUMBER:

PAGE 40 OF

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)	, und u										
UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle BRYANT, JEREMY, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 4534 MYSTIQUE WAY											
City ROSWELL	State GA	Zip Code 30075-2087	Transaction ID : PR2552961353723 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		70.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clnt Mgmt NA Accts	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$35.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle COLEMAN, MICHAEL, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 3325 LACEBARK PINE S			03 / D D / Y Y Y Y 03 1 2019								
City	State	Zip Code	Transaction ID : PR2552961453723								
LAS VEGAS	NV	89129-8134	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.92								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For:	Aggregate	Year-to-Date V									
Other (specify) ▼		230.76	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. FLANNERY, SCOTT, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 8508 TRELADY CT			03 / D D / Y Y Y Y Y 2019								
City PLANO	State TX	Zip Code 75024-6827	Transaction ID : PR2552962353723 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional	l)		531.52								
TOTAL This Period (last page this line num	ber only)										

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 41 OF

116				or each category of the Detailed Summary Page	×	11a 13		11b 14	11c 15	12 16	17				
or	y information copied from such Reports and State for commercial purposes, other than using the na								soliciting		tions				
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Uni	tedHealth Group PA	C)										
A.	Full Name of Individual (Last, First, Middle Initial) JAMES, GREGORY, , ,	or Full O	Orgar	nization Name		Date of Receipt									
	Mailing Address 2323 KINGS POINT DRIVE				03 31 2019										
	City	State FL		Zip Code	-	Trans	actic	on ID :	PR25529	96325372	23				
	LARGO	ГЦ		33774-1009	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С			76.92										
	Name of Employer (for Individual) Optum Services, Inc		upat Med	ion (for Individual) Dir		Me	emo	ltem							
	Receipt For:	Agregate	Yea	r-to-Date ▼											
	Primary General Other (specify) ▼		-	230.76	F	P/R Ded	uctio	n (\$38.	46 Bi-We	ekly)					
	Full Name of Individual (Last, First, Middle Initial)	or Full O	Orgar	nization Name		Date of	Rec	eipt							
	Mailing Address 5378 BUENA VISTA DR	-				03 / D D / Y Y Y Y 03 31 2019									
	City	State		Zip Code		Trans	actio	n ID :	PR25529	6425372	3				
	FRISCO	ТХ		75034-2253		Amount	t of E	Each R	eceipt th	is Period					
	FEC ID number of contributing federal political committee.	С	;					384.60							
	Name of Employer (for Individual) Optum Services, Inc		tion (for Individual) Is Ops		Memo Item										
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
	Full Name of Individual (Last, First, Middle Initial) MATTSON, CARL, , ,	or Full O	Orgar	nization Name		Date of	Rec	eipt							
	Mailing Address 539 ROUTE 9P					03	/	D D D 31	/ Y	y y 2019	Y				
	City	State		Zip Code		Trans	actio	on ID :	PR2552	96485372	23				
	SARATOGA SPRINGS	NY		12866-7279		Amount	t of E	Each R	eceipt th	is Period	l				
	FEC ID number of contributing federal political committee.	С							, y	92.	30				
	Name of Employer (for Individual)	Оссі	upat	ion (for Individual)		M	emo	ltem							
	United HealthCare Services Inc	Dir C	CInt	Svc Acct Mgt											
	Receipt For:	Aggregate	Yea	r-to-Date 🔻											
	Other (specify)		-	276.90	F	P/R Ded	uctio	n (\$46.	15 Bi-We	ekly)					
SI	JBTOTAL of Receipts This Page (optional)			•••••					,	553.	82				
т	OTAL This Period (last page this line number only	/)		•••••	-			,	-						

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PAGE 42 OF

		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle A. STREIT, BARRY, , ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 5421 KELLOGG AVENUE			03 31 2019									
City EDINA	State MN	Zip Code 55424-1604	Transaction ID : PR2552966753723 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		153.84									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) R Reg VP of SIs	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.52	P/R Deduction (\$76.92 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. NAASZ, SCOTT, , ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 3311 WILDS RIDGE NW			03 31 2019									
City PRIOR LAKE	State MN	Zip Code 55372-4540	Transaction ID : PR2553474753723 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		76.92									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middle RAYBURN, MONICA, , ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 5127 JACKSON PONDS C	State		M M / D D / Y Y Y Y 03 / 31 2019									
City SUGAR LAND	TX	Zip Code 77479-4656	Transaction ID : PR2553475153723 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		78.00									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 234.00	P/R Deduction (\$39.00 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional).			308.76									
TOTAL This Period (last page this line number	er only)											

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PAGE 43 OF

			Use separate schedule(s)	(check on	(check only one)								
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a			11c 15	12	17				
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any p ddress of any political committe	erson for the	purpo purpo	se of so	liciting	contribu	utions				
	NAME OF COMMITTEE (In Full)												
\rangle	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group P	AC)									
Α.	Full Name of Individual (Last, First, Middle Init THOMAS, RICHARD, , ,	ial) or Full O	rganization Name	Date o	Date of Receipt								
	Mailing Address 5121 DUPONT AVENUE SOU			03	03 / D D / Y Y Y Y 2019								
	City MINNEAPOLIS	State MN	Zip Code 55419-1151		Transaction ID : PR2553475453723 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С					-y	194	.00				
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		lemo li	tem							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 582.00	P/R Dee	duction	(\$97.00	Bi-We	ekly)					
в.	Full Name of Individual (Last, First, Middle Init VOJTA, DENEEN, , ,	ial) or Full O	rganization Name	Date of Receipt									
	Mailing Address 125 WALKER AVE S				التثالثا لتنا								
	City	State	Zip Code			n ID : PR			-				
	WAYZATA	MN	55391-1724	Amour	nt of Ea	ach Rece	eipt thi	s Period	k				
	FEC ID number of contributing federal political committee.	С		384.60									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Bus Initiv Clin Aff	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Dec	P/R Deduction (\$192.30 Bi-Weekly)								
С.	Full Name of Individual (Last, First, Middle Init FLAGSTAD, KARSTEN, , ,	ial) or Full O	rganization Name	Date o	of Rece	eipt							
	Mailing Address 1002 141ST LANE NE			03	JЦ	D D D 31		2019 [°]					
	City HAM LAKE	State MN	Zip Code 55304-6770			n ID : PR ach Rece			-				
	FEC ID number of contributing federal political committee.	С			,		y	384	.60				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) nfo Tech	N	lemo l	tem							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R De	duction	ı (\$192.3	0 Bi-W	eekly)					
⊢	UBTOTAL of Receipts This Page (optional)				· · ·		9 7	963	.20				

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PAGE 44 OF

		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports and or for commercial purposes, other than using			person for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middle REIDY, GREGORY, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 4836 W SUNSET BLVD			M M / D D / Y Y Y Y Y 03 31 2019								
City TAMPA	State FL	Zip Code 33629-6448	Transaction ID : PR2554013353723 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.92								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. CLUTE, DANIEL, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 7756 N 85TH STREET			03 / D D / Y Y Y Y 03 31 2019								
City OMAHA	State NE	Zip Code 68122-1281	Transaction ID : PR2560064453723 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		76.92								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) d Dir	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify)		230.76	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. GIANCURSIO, DONALD, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 72 MIDNIGHT RIDGE DR	1		03 / D D / Y Y Y Y Y 2019								
City LAS VEGAS	State NV	Zip Code 89135-1680	Transaction ID : PR2560064953723 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) Plan CEO	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			538.44								
TOTAL This Period (last page this line numb	er only)										

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PAGE 45 OF

	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
Any information copied from such Reports an or for commercial purposes, other than using	d Statements ma	ay not be sold or used by any put	erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle KUNEMUND, GREGG, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 9040 RIVERBEND MANO	R		03 31 Y Y Y Y Y 2019								
City ALPHARETTA	State GA	Zip Code 30022-1813	Transaction ID : PR2560065353723 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle LIPPMAN, SHELDON, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 55 CLIFFIELD ROAD			03 / D D / Y Y Y Y Y 2019								
City BEDFORD	State NY	Zip Code 10506-1210	Transaction ID : PR2560065453723 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		194.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) d Dir	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 582.00	P/R Deduction (\$97.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. LOBERG, ANGELA, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 2837 EAST PARK PLACE			03 / D D / Y Y Y Y 03 31 2019								
City MILWAUKEE	State WI	Zip Code 53211-3845	Transaction ID : PR2560065553723 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		76.92								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs Acct Mgt	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			655.52								
TOTAL This Period (last page this line numb	per only)										

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FOR LINE NUMBER:

PAGE 46 OF

171			Use separate schedule(s)				(check only one)							
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page		K 11a		11b	11c	12	1 7				
	y information copied from such Reports and Sta for commercial purposes, other than using the r													
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	(C)										
 A.	Full Name of Individual (Last, First, Middle Initia LUCHT, JEFFREY, , ,	ll) or Full Or	rganization Name	Date of Receipt										
	Mailing Address 33 FOUR SEASONS DRIVE													
	City ALTON	State NH	Zip Code 03809-4872											
	FEC ID number of contributing federal political committee.	С			<u> </u>	_		1 3 5-	194.	00				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Act Underwriting		Me	emo	Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 582.00	P/R Deduction (\$97.00 Bi-Weekly)										
в.	Full Name of Individual (Last, First, Middle Initia MILICH, DAVID, , ,	ll) or Full Or	rganization Name		Date of	Re	ceipt							
	Mailing Address 2702 BIRCHMERE COURT			Mom / D = D / Y = Y = Y = Y Y										
	City KATY	State TX	Zip Code 77450-1303					PR25600 leceipt th						
	FEC ID number of contributing federal political committee.	С		384.60										
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Hlth	Memo Item											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 1153.80	F	P/R Dedu	uctio	on (\$192	2.30 Bi-W	/eekly)					
с.	Full Name of Individual (Last, First, Middle Initia NOEL, TIMOTHY, , ,	ll) or Full Or	rganization Name		Date of	Re	ceipt							
	Mailing Address 4316 FREMONT AVENUE SOL	ЛТН			03	1	31) / Y	2019 [°]	Y				
	City MINNEAPOLIS	State MN	Zip Code 55409-1721					PR2560: leceipt th						
	FEC ID number of contributing federal political committee.	С			<u> </u>		,	, ,	384.	60				
	Name of Employer (for Individual) United HealthCare Services Inc	Occu SVP	ipation (for Individual) Prd		Me	emc	tem							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)		•				, .	.,	963.	20				
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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FOR LINE NUMBER:

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PAGE 47 OF

				for each category of the Detailed Summary Page		× 11a 13		11	- H	11c 15	12	17			
or	y information copied from such Reports and State for commercial purposes, other than using the na					for the		rpos	se of	solicitin	g contrib	utions			
$\left. \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Jn	itedHealth Group PA	NC)										
A.	Full Name of Individual (Last, First, Middle Initial) CRONIN, JAMES, , ,	or Full O	nization Name		Date of Receipt										
	Mailing Address 241 WALLACE RD					M M / D D / Y									
	City BEDFORD	State NH		Zip Code 03110-5144	+										
	FFO ID number of contribution	C	ï	03110-3144	Amount of Each Receipt this Period 384.60										
	Name of Employer (for Individual) United HealthCare Services Inc	Occi	•	tion (for Individual)		1	Vemo	o Ite	em	,					
	Paggint For:			ar-to-Date ▼ 1153.80		P/R De	ducti	ion	(\$192	2.30 Bi-\	Veekly)				
в.	Full Name of Individual (Last, First, Middle Initial) THOMPSON, CHARLES, , ,	or Full O	rga	nization Name		Date	of Re	ecei	ipt						
	Mailing Address 5217 EDGEWOOD ROAD					03 / D D / Y Y Y Y Y 2019									
	City LITTLE ROCK	State AR		Zip Code 72207-5413		Transaction ID : PR2561358953723 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) VP Regl Affs					384.60 Memo Item								
	Name of Employer (for Individual) United HealthCare Services Inc														
	Receipt For: A Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$192.30 Bi-Weekly)												
	Full Name of Individual (Last, First, Middle Initial) LUND, BRIAN, , ,	or Full O	rga	nization Name	Date of Receipt										
	Mailing Address 11471 NORTH SHORE DRIVE					^M 03			D 31	/ Y	2019	Y			
	City GRANTSBURG	State WI		Zip Code 54840-8059	-						4576537				
		C				Amou	nt of	Ea	.ch R	eceipt ti		d 3.00			
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Dir T	•	tion (for Individual)			Memo	o It	em						
	Receipt For: A Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 234.00		P/R De	educti	ion	(\$39.	00 Bi-W	eekly)				
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PAGE 48 OF

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	a 🗌	11b	11c	12					
Any information copied from such Reports and	d Statements ma	ay not be sold or used by any p	erson for th	ne pui	14 rpose of	15 soliciting	16 contribut	17 ions				
or for commercial purposes, other than using	the name and a	ddress of any political committee	e to solicit	contril	outions f	rom such	n committe	ee.				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle CAVANAUGH, LARRY, , ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 520 NE 20TH ST # 1010				03 / D D / Y Y Y Y 2019								
City WILTON MANORS	State FL	Zip Code 33305-2162					21105372 is Period	3				
FEC ID number of contributing federal political committee.	C						78.0	00				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ben Govt Dntl Sls Mgr		Mem	o Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 234.00	P/R D	educt	ion (\$39.	00 Bi-We	ekly)					
Full Name of Individual (Last, First, Middle B. MACKENZIE, ANDREW, , ,	Initial) or Full O	rganization Name	Date	of R	eceipt							
Mailing Address 1912 IRVING AVE S			03 / D D / Y Y Y Y 2019									
City MINNEAPOLIS	State MN	Zip Code 55403-2823					9715372 is Period	3				
FEC ID number of contributing federal political committee.	С			384.60								
Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) Bus Segment CMO			Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle WILLSON, JOSH, , ,	Initial) or Full O	rganization Name	Date	of R	eceipt							
Mailing Address 201 ADAMS CT			M 03	3	31		2019 [°]					
Colleyville	State TX	Zip Code 76034-6811					80255372 is Period	3				
FEC ID number of contributing federal political committee.	С		Ē		y		76.9	92				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) SLS SB and Spec Ben		Mem	o Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R D	educt	ion (\$38.	.46 Bi-We	ekly)					
SUBTOTAL of Receipts This Page (optional)					, .	9	539.5	52				
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FOR LINE NUMBER:

PAGE 49 OF

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11	TEMIZED RECEIPTS		for each category of the Detailed Summary Page		X 11a		11b	11c	12						
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or	for commercial purposes, other than using the	e name and a	ddress of any political committee	e to s	solicit co	ntrik	outions	from such	n committ	ee.					
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)											
Α.	Full Name of Individual (Last, First, Middle Ini CARLSON, CHRISTOPHER, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt								
	Mailing Address 10618 WEST RIVER ROAD			03 / D D / Y Y Y 31 2019											
	City BROOKLYN PARK	State MN	Zip Code 55443-1233	_					80265372 iis Period	3					
	FEC ID number of contributing federal political committee.	С		384.60											
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Cnsmr & Cust Experience	Memo Item											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)											
в.	Full Name of Individual (Last, First, Middle Ini HANSEN, PAUL, , ,	tial) or Full O	rganization Name	Date of Receipt											
	Mailing Address 18430 62ND PLACE NORTH			03 / 31 / 2019 Transaction ID : PR2564802753723											
	City MAPLE GROVE	State MN	Zip Code 55311-4585							3					
	FEC ID number of contributing federal political committee.	С			Amoun	τοτ		receipt th	iis Period 194.	00					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Grp Controller	Memo Item											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 582.00]	P/R Ded	ucti	on (\$97.	.00 Bi-We	ekly)						
<u>с</u> .	Full Name of Individual (Last, First, Middle Ini KENNY, KATHERINE, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt								
	Mailing Address 22408 FITZGERALD DRIVE				^M 03	1	31		ү ү 2019	Y					
	City LAYTONSVILLE	State MD	Zip Code 20882-2301						80325372 iis Period	3					
	FEC ID number of contributing federal political committee.	С			<u> </u>		y	. ,	78.	00					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) /P of Acct Mgmt		M	emo	o Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 234.00	1	P/R Ded	lucti	ion (\$39	.00 Bi-We	eekly)						
s	UBTOTAL of Receipts This Page (optional)			•					656.0	50					
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PAGE 50 OF

171		Use separate schedule			(check only one)									
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12					
	y information copied from such Reports and Sta for commercial purposes, other than using the n													
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated													
A.	Full Name of Individual (Last, First, Middle Initia MARDEN, PAUL, , ,	l) or Full Or	ganization Name											
	Mailing Address 718 HICKORY HILL RD				03 / D D / Y Y Y Y 03 31 2019									
	City FRANKLIN LAKES	State NJ	Zip Code 07417-1707	Transaction ID : PR2564803353723 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С							384.	60				
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Plan CEO		Me	emo	Item							
	Receipt For: Primary General Other (specify) ▼	Year-to-Date ▼ 1153.80	F	P/R Dedu	uctio	on (\$192	2.30 Bi-W	/eekly)						
в.	Full Name of Individual (Last, First, Middle Initia MOQUIST, DARREN, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt							
	Mailing Address 5004 ARDEN AVE	1			03	1	D D D 31	/ Y	y y 2019	Y				
	City EDINA	State MN	Zip Code 55424-1314				-		0345372 is Period	3				
	FEC ID number of contributing federal political committee.	С		384.60										
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) n CEO	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 1153.80	F	P/R Dedu	uctic	on (\$192	2.30 Bi-W	/eekly)					
C.	Full Name of Individual (Last, First, Middle Initia O'HARE, TAMMY, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt							
	Mailing Address 2420 SAINT GEORGE WAY	Chata	Zin Onde		03 -	/	31		2019					
	City BROOKEVILLE	State MD	Zip Code 20833-3265						80395372 is Period	3				
	FEC ID number of contributing federal political committee.	С			<u> </u>	_	y :	, y	78.	00				
	Name of Employer (for Individual) United HealthCare Services Inc	pation (for Individual) P SIs		Me	emo	ltem								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 234.00	F	P/R Ded	uctio	on (\$39.	.00 Bi-We	eekly)					
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PAGE 51 OF

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	ME OF COMMITTEE (In Full)														
	nitedHealth Group Incorporated	PAC (L	InitedHealth Group PA	(C)											
	Name of Individual (Last, First, Middle Initia ICKS, TIMOTHY, , ,) or Full Or	ganization Name		Date of Receipt										
Mai	ling Address 3227 CASCO CIRCLE POBOX 352			03 31 2019											
City	,	State	Zip Code	Transaction ID : PR2565448653723											
	λΥΖΑΤΑ	MN	55391-9717	Amount of Each Receipt this Period											
	C ID number of contributing eral political committee.	С			<u> </u>				384.	60					
Opt	ne of Employer (for Individual) um Services, Inc		pation (for Individual) Group CFO		Me	emo	ltem								
Rec	eeipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 1153.80		P/R Ded	uctio	on (\$192	2.30 Bi-W	/eekly)						
в. <u>С</u> /	Name of Individual (Last, First, Middle Initia ARTER, WILLIAM, , ,) or Full Or	ganization Name		Date of	Re	eceipt								
	ling Address PO BOX 920679			03 / 31 / 2019 Transaction ID : PR2565448753723											
City HO	USTON	State TX	Zip Code 77292-0679						4875372						
FEG	C ID number of contributing eral political committee.	С				U	1		76.9						
	ne of Employer (for Individual) ed HealthCare Services Inc		pation (for Individual) /P SIs Acct Mgmt		Me	emo	tem								
Rec	eipt For: Primary General	Aggregate `	Year-to-Date ▼												
	Other (specify) ▼		, 230.76	F	P/R Dedu	uctio	on (\$38.	46 Bi-We	ekly)						
	Name of Individual (Last, First, Middle Initia ISS, BRUCE, , ,) or Full Or	ganization Name		Date of	Re	eceipt								
	ling Address 7425 N BEACH COURT	1			03	/	31		2019 [°]						
City FC	X POINT	State WI	Zip Code 53217-3656						30235372 is Period						
	C ID number of contributing eral political committee.	С					,	,	76.9						
	ne of Employer (for Individual) ted HealthCare Services Inc		pation (for Individual) ed Dir		Me	emc	tem								
Rec	eipt For: Primary General Other (specify)	Year-to-Date ▼ 230.76		P/R Ded	ucti	on (\$38.	.46 Bi-We	eekly)							
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PAGE 52 OF

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111	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 1	F	_	11b	11c	12				
	y information copied from such Reports and Sta for commercial purposes, other than using the r			rson for		urpc							
<u>.</u>	NAME OF COMMITTEE (In Full)												
\rangle	UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	C)									
Α.	Full Name of Individual (Last, First, Middle Initia ZAMORE, DENISE, , ,	l) or Full O	rganization Name	Date of Receipt									
	Mailing Address 180 FELT ROAD	_		03 / D D / Y Y Y Y 03 31 2019									
	City SOUTH WINDSOR	State CT	Zip Code 06074-3864	Transaction ID : PR2567129553723 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			_	- ,		-	76	.92			
	Name of Employer (for Individual) United HealthCare Services Inc	upation (for Individual) Issc Gen Counsel		Mei	mo I	ltem							
	Receipt For: Primary General Other (specify) ▼	Year-to-Date ▼ 230.76	P/R	Dedu	ctior	า (\$38.4	16 Bi-We	eekly)					
в.	Full Name of Individual (Last, First, Middle Initia ARNONE, WENDY, , ,	l) or Full O	rganization Name	Da	te of	Rece	eipt						
	Mailing Address 5243 E DESERT PARK LANE	75.0.4	M	03	/	D D 31	/ Y	2019	Y				
	City PARADISE VALLEY	State AZ	Zip Code 85253-3015						90055372	-			
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In CEO		Me	mo I	ltem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R	Dedu	ction	n (\$192.	.30 Bi-W	/eekly)				
с.	Full Name of Individual (Last, First, Middle Initia PARRILLO, CHRISTOPHER, , ,	l) or Full O	rganization Name	Da	te of	Rece	eipt						
	Mailing Address 9501 WEXCROFT DRIVE			M	03 ^M	/	D D 31	/ Y	2019 [°]	Y			
	City BRENTWOOD	State TN	Zip Code 37027-3824						7782537 nis Period				
	FEC ID number of contributing federal political committee.	С			_	y		,	154	.00			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng		Me	mo	ltem						
	Receipt For: Primary General Other (specify)	Year-to-Date ▼ 462.00	P/R	Dedu	ctior	n (\$77.(00 Bi-W	eekly)					
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PAGE 53 OF

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Any information copied from such Reports and or for commercial purposes, other than using the	Statements mane and a	l ay not be sold or used by any p ddress of any political committe	person for the purpose of soliciting contributions											
NAME OF COMMITTEE (In Full)														
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P	4C)											
Full Name of Individual (Last, First, Middle I MOYER, BRUCE, , ,	nitial) or Full C	rganization Name	Date of Receipt											
Mailing Address 4242 BROADWAY STREET #802			03 / D D / Y Y Y Y 03 31 2019											
City SAN ANTONIO	State TX	Zip Code 78209-6463	Transaction ID : PR2571778353723 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		78.00											
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 234.00	P/R Deduction (\$39.00 Bi-Weekly)											
Full Name of Individual (Last, First, Middle I B. HINTON, DUSTIN, , ,	nitial) or Full C	rganization Name	Date of Receipt											
Mailing Address W132N6475 MARACH RD			03 / D D / Y Y Y Y 2019											
City MENOMONEE FALLS	State WI	Zip Code 53051-6085	Transaction ID : PR2571978753723 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		Memo Item											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Plan CEO												
Receipt For:	Aggregate	Year-to-Date V												
Other (specify) V		1153.80	P/R Deduction (\$192.30 Bi-Weekly)											
Full Name of Individual (Last, First, Middle I CARLSON, KEVIN, , ,	,	rganization Name	Date of Receipt											
Mailing Address 4511 BROWNDALE AVENU	JE		03 31 Y Y Y Y Y 2019											
City EDINA	State MN	Zip Code 55424-1142	Transaction ID : PR2572590053723 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		192.30											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item											
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)											
SUBTOTAL of Receipts This Page (optional)			654.90											
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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PAGE 54 OF

	EWIZED RECEIPTS			etailed Summary Page	×	11a		11	b	11c		12				
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	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Unite	edHealth Group PA	C)											
/ A.	Full Name of Individual (Last, First, Middle Initial) WIFFLER, THOMAS, , ,) or Full O	Organiz	zation Name		Date of Receipt										
	Mailing Address 1421 SOMERFIELD DRIVE				03 / D D / Y Y Y Y 03 31 2019											
	City BOLINGBROOK	State IL	Z	Zip Code 60490-3207	Transaction ID : PR2572992753723 Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С			384.60											
	Name of Employer (for Individual) United HealthCare Services Inc		upatio Unit (n (for Individual) CEO		Me	emo	o Ite	em							
	Receipt For: // Primary General Other (specify) ▼	Aggregate	Year-	to-Date ▼ 1153.80	P/	/R Ded	uctio	on ((\$192	.30 Bi	-Weel	kly)				
B.	Full Name of Individual (Last, First, Middle Initial) GOETZ, MERRITT, David, ,) or Full O	Organiz	zation Name		Date of	Re	ecei	ipt							
	Mailing Address 215 MAYFAIR ROAD			03 / 31 / 2019 Transaction ID : PR2573477353723												
	City NASHVILLE	State TN		Zip Code 37205-1827		Trans: Amount							1			
	FEC ID number of contributing federal political committee.	С			384.60											
	Name of Employer (for Individual) Optum Services, Inc		•	on (for Individual) Svc Acct Mgt		Me	emo	o Ite	em							
	Receipt For: // Primary General Other (specify) ▼	Aggregate	Year-	to-Date ▼ , 1153.80	P/	R Dedu	uctic	on ((\$192.	30 Bi	-Weeł	dy)				
C.	Full Name of Individual (Last, First, Middle Initial) QUINN, PATRICK, , ,) or Full O	Organiz	zation Name		Date of	Re	ecei	ipt							
	Mailing Address 16933 TODD EVAN TRAIL	1 -				^M 03	/	L	31	1	2	019 [°]				
	City CHESTERFIELD	State MO	Ž	Zip Code 63005-4641	A	Trans						75372: Period	3			
	FEC ID number of contributing federal political committee.	С						y		. ,		192.3	0			
	Name of Employer (for Individual) United HealthCare Services Inc	n (for Individual) CEO		Me	emo	o Ite	em									
	Receipt For: // Primary General Other (specify)	Aggregate	Year-	to-Date ▼ 576.90	P	/R Ded	uctio	on	(\$96.^	15 Bi-\	Weekl	ly)				
s	UBTOTAL of Receipts This Page (optional)			•				y		,		961.5	0			
Т	OTAL This Period (last page this line number onl	y)		••••••				-		-,						

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PAGE 55 OF

	EMIZED RECEIPTS Use separate schedule(s) for each category of the												
ITEMIZED RECEIPTS	X 11a 11b 11c 12												
Any information copied from such Reports and or for commercial purposes, other than using			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full)		······											
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle GROZDANICH, PATTI, , ,	Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 12540 ROBINSON ST APT 6201			03 / D D / Y Y Y Y 03 31 2019										
City OVERLAND PARK	State KS	Zip Code 66213-1418	Transaction ID : PR2573518853723 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		76.92										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Middle B. RICHARD, DARYL, , ,	rganization Name	Date of Receipt											
Mailing Address 24 WEST RIDGE DRIVE			03 / D D / Y Y Y Y 03 31 2019										
City WEST HARTFORD	State CT	Zip Code	Transaction ID : PR2574979053723										
		06117-2065	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		76.92										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm											
Receipt For:	Aggregate	Year-to-Date V											
Other (specify) ▼		230.76	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Middle KANE, BRIAN, , ,	Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 4615 ROANOAKE ROAD			03 / D D / Y Y Y Y 2019										
City GOLDEN VALLEY	State MN	Zip Code 55422-5254	Transaction ID : PR2574979153723 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		192.30										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Comm	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)			346.14										
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PAGE 56 OF

		Use separate schedule(s)	(check only one)											
	MIZED RECEIPTS for each category of the Detailed Summary Page													
Any information copied from such Reports and or for commercial purposes, other than using th														
NAME OF COMMITTEE (In Full)														
UnitedHealth Group Incorporate	ted PAC (I	JnitedHealth Group PA	AC)											
Full Name of Individual (Last, First, Middle In MASTERS, SCOTT, , ,	nitial) or Full C	rganization Name	Date of Receipt											
Mailing Address 1894 VILLAGE GLEN DRIV	Ε		Model / 2019 Transaction ID : PR2574979653723 Amount of Each Receipt this Period 777.00											
City SAINT JOHNS	State FL	Zip Code 32259-9215												
FEC ID number of contributing federal political committee.	С													
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clms	Memo Item											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 231.00	P/R Deduction (\$38.50 Bi-Weekly)											
Full Name of Individual (Last, First, Middle In SIMPSON, TRENT, , ,	nitial) or Full C	rganization Name	Date of Receipt											
Mailing Address 3111 NORCREST AVE N			03 / D D / Y Y Y Y 2019											
City	State	Zip Code	Transaction ID : PR2574985053723											
STILLWATER	MN	55082-1779	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		76.92											
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item											
Receipt For:	Aggregate	Year-to-Date V												
Primary General Other (specify) ▼		230.76	P/R Deduction (\$38.46 Bi-Weekly)											
Full Name of Individual (Last, First, Middle In C. CIANFROCCO, HEATHER, , ,	nitial) or Full C	rganization Name	Date of Receipt											
Mailing Address 4478 MIDDLE ROAD			03 / D D / Y Y Y Y 2019											
City ALLISON PARK	State PA	Zip Code 15101-1110	Transaction ID : PR2574986253723 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		384.60											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CEO	Memo Item											
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)											
SUBTOTAL of Receipts This Page (optional)			538.52											
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PAGE 57 OF

	-	Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements ma	l ay not be sold or used by any ddress of any political committe	person for the purpose of soliciting contributions the to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P	AC)
Full Name of Individual (Last, First, Middle A. KAPLAN-LEWIS, DEBRA, , ,	e Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 41 WILDWOOD DR			03 / D D / Y Y Y Y 2019
City SOUTHBOROUGH	State MA	Zip Code 01772-1989	Transaction ID : PR2574986953723 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		384.60
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle B. BURNETT, JAMIE, , ,	e Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 4625 EWING AVENUE SC			03 / 0 0 / Y Y Y Y 2019
City MINNEAPOLIS	State MN	Zip Code 55410-1745	Transaction ID : PR2574988253723
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) IT	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 234.00	P/R Deduction (\$39.00 Bi-Weekly)
Full Name of Individual (Last, First, Middle LANG, HEATHER, , ,	e Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 11382 MOUNT CURVE R			M M / D D / Y Y Y Y 03 / 31 2019
City EDEN PRAIRIE	State MN	Zip Code 55347-2918	Transaction ID : PR2574991453723 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		76.92
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) uty Gen Counsel Mgr	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)
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PAGE 58 OF

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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle A. ALLAZETTA, DAVID, , ,	Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 7127 E RANCHO VISTA R 2009			03 / D D / Y Y Y Y Y 2019										
City SCOTTSDALE	State AZ	Zip Code 85251-1389					9545372	3					
FEC ID number of contributing federal political committee.	С				y		96.1	5					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		/lemo	Item								
Receipt For: Primary General Other (specify) ▼	Year-to-Date ▼ 480.75	P/R Dec	ductio	on (\$96.′	15 Bi-We	ekly)							
Full Name of Individual (Last, First, Middle B. SJOBLAD, BETHANY, , ,	rganization Name	Date o	of Red	ceipt									
Mailing Address 10730 PERRY DRIVE NO			Model Control Control <thcontrol< th=""> <thcontrol< th=""> <thcon< td=""></thcon<></thcontrol<></thcontrol<>										
City BROOKLYN PARK	State MN	Zip Code 55443-4700					09153723 is Period	3					
FEC ID number of contributing federal political committee.	С		384.60										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Quality	Memo Item										
Receipt For:	Aggregate	Year-to-Date ▼											
Primary General Other (specify) ▼		1153.80	P/R Dec	ductio	n (\$192	.30 Bi-W	eekly)						
Full Name of Individual (Last, First, Middle FRIDELL, CATHERINE, , ,	Initial) or Full O	rganization Name	Date o	of Ree	ceipt								
Mailing Address 11 E STONEWALL DRIVE			03		31		ү ү 2019						
City MIDDLETOWN	State DE	Zip Code 19709-3810			-		2755372 is Period	3					
FEC ID number of contributing federal political committee.	С				, .	, ,	76.9	92					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clms		/lemo	ltem								
Receipt For: Primary General Other (specify)	Year-to-Date ▼ 230.76	P/R De	ductic	on (\$38.4	46 Bi-We	ekly)							
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PAGE 59 OF

		or each category of the Detailed Summary Page		_	11a 13] 11 14	- F	\neg	11c 15	12	17											
	y information copied from such Reports and State for commercial purposes, other than using the na					fo	r the		pos	se of		liciting	contrib	utions									
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Jni	itedHealth Group PA	C)																		
A.	Full Name of Individual (Last, First, Middle Initial) DUNCAN, MICHELE, , ,	or Full O	rgai	nization Name		Da	ate of	Re	ecei	ipt													
	Mailing Address 3038 FAIRWAY CIRCLE	Otata		Zin Oode	03 31 2019 Transaction ID : PR2575029653723																		
	City CHASKA	State MN		Zip Code 55318-3408	\vdash																		
		С	ï		Amount of Each Receipt this Period 384.60																		
	Name of Employer (for Individual) United HealthCare Services Inc	Inited HealthCare Services Inc VP Compli								Memo Item													
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 576.90		P/R	R Ded	uctio	on	(\$192	2.3	0 Bi-W	eekly)										
B.	Full Name of Individual (Last, First, Middle Initial) O'BRIEN, JENNIFER, , ,	or Full O	rgai	nization Name		Da	ate of	Re	ecei	ipt													
	Mailing Address 395 WOODLAWN AVE	1	03 / D D / Y Y Y Y Y 2019																				
	City SAINT PAUL	State MN		Zip Code 55105-1339					-				345537 s Perio										
	FEC ID number of contributing federal political committee.	С				Ę			,			-9-	384	.60									
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) compli Off		ŀ	Me	emo	o Ite	em													
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 1153.80	F	P/R	Dedu	uctic	on ((\$192	2.3(0 Bi-We	eekly)										
с.	Full Name of Individual (Last, First, Middle Initial) JONCZYK, MICHAEL, , ,	or Full O	rgai	nization Name		Da	ate of	Re	ecei	ipt													
	Mailing Address 6336 URBANDALE LANE NORTI	Η					03	/	E	31	>	/ Y	y y 2019	Y									
	City MAPLE GROVE	State MN		Zip Code 55311-1384									387537										
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	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP T		tion (for Individual) Isury			M	emo	o Ite	em													
	Receipt For: A Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 230.76		P/F	R Ded	uctio	on	(\$38.	.46	8 Bi-We	ekly)										
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PAGE 60 OF

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	LED RECEIPTS for each category of the Detailed Summary Page													
			13 14 15 16 1' erson for the purpose of soliciting contributions e to solicit contributions from such committee.											
NAME OF COMMITTEE (In Full)														
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)											
Full Name of Individual (Last, First, Middle MADDOX, JEFFREY, , ,	Initial) or Full O	rganization Name	Date of Receipt											
Mailing Address 5610 PURDUE AVE			03 / D D / Y Y Y Y 2019											
City DALLAS	State TX	Zip Code 75209-4431	Transaction ID : PR2575039553723 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		76.92											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)											
Full Name of Individual (Last, First, Middle ALLENBURG, THOMAS, , ,	Initial) or Full O	rganization Name	Date of Receipt											
Mailing Address 6224 LOCH MOOR DR	1		M M / D D / Y											
City	State	Zip Code	Transaction ID : PR2575039853723											
EDINA	MN	55439-1618	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		76.92											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg	Memo Item											
Receipt For:	Aggregate	Year-to-Date V												
Other (specify) ▼		230.76	P/R Deduction (\$38.46 Bi-Weekly)											
Full Name of Individual (Last, First, Middle JORDAN, GARELL, , ,	Initial) or Full O	rganization Name	Date of Receipt											
Mailing Address 6104 S 64TH DRIVE			03 / D D / Y Y Y Y 2019											
City LAVEEN	State AZ	Zip Code 85339-2917	Transaction ID : PR2575050253723 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		192.30											
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item											
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)											
SUBTOTAL of Receipts This Page (optional)			346.14											
TOTAL This Period (last page this line numb	per only)													

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 61 OF

		Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12										
Any information copied from such Reports and or for commercial purposes, other than using the	Statements mane and a	l ay not be sold or used by any p Iddress of any political committer	13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full)													
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle I A. LINDSAY, VIVIAN, , ,	nitial) or Full C	organization Name	Date of Receipt										
Mailing Address 14930 SW 39 ST			03 31 2019										
City DAVIE	State FL	Zip Code 33331-2767	Transaction ID : PR2575054953723 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		384.60										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ops	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle I CLACKO, MARY ANN, , ,	nitial) or Full C	organization Name	Date of Receipt										
Mailing Address 6358 COTEAU TRAIL			03 / D D / Y Y Y Y Y 2019										
City EDEN PRAIRIE	State MN	Zip Code 55344-5205	Transaction ID : PR2575057953723 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		76.92										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Compli	Memo Item										
Receipt For:	Aggregate	Year-to-Date ▼											
Other (specify) ▼		230.76	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Middle I C. MCCARTY, CARY, , ,	nitial) or Full C	organization Name	Date of Receipt										
Mailing Address 8800 RUMFIELD RD			03 / D D / Y Y Y Y 2019										
City NORTH RICHLAND HILLS	State TX	Zip Code 76182-6131	Transaction ID : PR2575059453723 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		78.00										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 234.00	P/R Deduction (\$39.00 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)			539.52										
TOTAL This Period (last page this line numbe	r only)												

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 62 OF

111			for each category of the Detailed Summary Page	X 11a 11b 11c 12										
	y information copied from such Reports and Staterr for commercial purposes, other than using the nam													
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated P													
Α.	Full Name of Individual (Last, First, Middle Initial) c ALLEN, MARK, , ,	or Full Orç	ganization Name	Date of Receipt										
	Mailing Address 11359 ENTREVAUX DRIVE			03 / D / Y Y Y Y 2019										
		State	Zip Code	Transaction ID : PR2575060253723										
	EDEN PRAIRIE	MN	55347-2862	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.)		76.92										
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) en Mgmt	Memo Item										
	Receipt For: Aa		′ear-to-Date ▼											
	Primary General Other (specify) ▼	groguto	230.76	P/R Deduction (\$38.46 Bi-Weekly)										
в.	Full Name of Individual (Last, First, Middle Initial) c ZAETTA, CHRISTOPHER, , ,	or Full Org	ganization Name	Date of Receipt										
	Mailing Address 5840 RIDGE ROAD			03 31 Y Y Y Y 2019										
		State	Zip Code	Transaction ID : PR2575068353723										
	EXCELSIOR	MN	55331-8153	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.)		384.60										
	Name of Employer (for Individual) United HealthCare Services Inc		oation (for Individual) Segment Gen Counsel	Memo Item										
	Receipt For: Ag Primary General Other (specify) ▼	gregate Y	′ear-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
	Full Name of Individual (Last, First, Middle Initial) c	or Full Org	ganization Name	Date of Receipt										
	Mailing Address 9916 DUSTY WINDS AVE			03 31 2019										
	5	State	Zip Code	Transaction ID : PR2575068953723										
	LAS VEGAS	NV	89117-5986	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.			76.92										
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) or Technology	Memo Item										
	Receipt For: Ag Primary General Other (specify)	gregate Y	′ear-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			538.44										
	OTAL This Period (last page this line number only).													

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 63 OF

		Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12										
			13 14 15 16 17 erson for the purpose of soliciting contributions										
or for commercial purposes, other than using t	he name and a	address of any political committe	e to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P	AC)										
Full Name of Individual (Last, First, Middle ISMERT, JENNY , , ,	Initial) or Full C	organization Name	Date of Receipt										
Mailing Address 8494 E HAWAII LN			03 / D D / Y Y Y Y Y 2019										
City DENVER	State CO	Zip Code 80231-2732	Transaction ID : PR2575070053723 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		76.92										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Middle B. CHRISTIAN, DENISE, , ,	Initial) or Full C	organization Name	Date of Receipt										
Mailing Address 5 WINGATE COURT			03 / D D / Y Y Y Y 2019										
City FLOURTOWN	State PA	Zip Code 19031-1117	Transaction ID : PR2575071453723 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		384.60										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Clin Ops	Memo Item										
Receipt For:	Aggregate	Year-to-Date ▼											
Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle NICHOLS, SANDRA, , ,	Initial) or Full C	organization Name	Date of Receipt										
Mailing Address 12706 YOUNG LANE			03 / D D / Y Y Y Y Y 2019										
City NORTH POTOMAC	State MD	Zip Code 20878-6112	Transaction ID : PR2575074553723 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		384.60										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 Natl Inptnt Care Mgmt	Memo Item										
Receipt For: Primary General Other (specify)	P/R Deduction (\$192.30 Bi-Weekly)												
SUBTOTAL of Receipts This Page (optional).			846.12										
TOTAL This Period (last page this line number	er only)												

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 64 OF

		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements ma g the name and a	I ay not be sold or used by any p Iddress of any political committe	person for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group P/	AC)									
Full Name of Individual (Last, First, Middl A. CALAMIA, EDITH, , ,	e Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 22 ROYAL OAK DRIVE			M M / D D / Y Y Y Y 03 31 2019									
City FAR HILLS	State NJ	Zip Code 07931-2569	Transaction ID : PR2575076653723 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) <i>N</i> ed Dir	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middl B. UPCHURCH, KAREN, , ,	e Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 5023 OAKMONT PLACE			03 / D D / Y Y Y Y Y 2019									
City WESTERVILLE	State OH	Zip Code 43082-8781	Transaction ID : PR2575084453723 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		76.92									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middl C. HEROLD, STACI, , ,	e Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 15008 GREEN OAKS TR			03 / D D / Y Y Y Y 2019									
City PRIOR LAKE	State MN	Zip Code 55372-2159	Transaction ID : PR2575093053723 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		76.92									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Technology	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optiona	I)		538.44									
TOTAL This Period (last page this line num	ber only)											

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 65 OF

	EMIZED RECEIPTS			r each category of the etailed Summary Page	[X 11a		11	b	11c	12				
				etallou cummuly rugo		13		14		15	16	1			
	information copied from such Reports and Stat for commercial purposes, other than using the n														
\backslash	NAME OF COMMITTEE (In Full)														
\rangle	UnitedHealth Group Incorporated				(C)										
۹.	Full Name of Individual (Last, First, Middle Initia CARTER, JOCELYN, , ,	l) or Full O	rgan	ization Name		Date of Receipt									
	Mailing Address 1471 COOPER ROAD					M 03	1	/	31	/ Y	2019	Ŷ			
		State		Zip Code		Tran	sact	tion	ID : P	R2575	1419537	/23			
	SCOTCH PLAINS	NJ		07076-2833	_	Amour	nt of	Ea	ch Re	ceipt th	nis Peric	d			
	FEC ID number of contributing federal political committee.	С						-		-	38	4.60			
	Name of Employer (for Individual) United HealthCare Services Inc			on (for Individual) i CEO		N	lemo	o Ite	əm						
	Paggint For:	Aggregate													
	Primary General Other (specify) ▼		100	1153.80		P/R Dec	ducti	ion	(\$192.	30 Bi-V	Veekly)				
	Full Name of Individual (Last, First, Middle Initia DEWALL, PATRICK, , ,	l) or Full O	rgan	ization Name		Date o	of Re	ecei	pt						
	Mailing Address 7662 RIDGEVIEW WAY					03 31 2019									
	City	State		Zip Code	1	Trans	sact	tion	ID : P	R2575	1453537	23			
	CHANHASSEN	MN		55317-4507		Amour	nt of	f Ea	ch Re	ceipt th	nis Peric	d			
	FEC ID number of contributing federal political committee.	С				192.30									
	Name of Employer (for Individual) Dptum Services, Inc		•	on (for Individual) Gen Counsel Mgr		Ν	1emo	o Ite	əm						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year	-to-Date ▼ 576.90		P/R Deduction (\$96.15 Bi-Weekly)									
	Full Name of Individual (Last, First, Middle Initia PETERSOHN, PATRICK, , ,	l) or Full O	rgan	ization Name		Date c	of Re	ecei	pt						
	Mailing Address 16413 BIRCH STREET					03	/	/	31	/ Y	2019	Ŷ			
	City	State		Zip Code		Tran	sact	tion	ID : F	R2575	148353	723			
	OVERLAND PARK	KS		66085-7842	_	Amour	nt of	Ea	ch Re	ceipt th	nis Peric	d			
	FEC ID number of contributing federal political committee.	С						,		9	38	4.60			
	Name of Employer (for Individual)	Осси	upati	on (for Individual)		N	lemo	o Ite	əm						
	United HealthCare Services Inc	M&R	R Re	g VP of Sls											
	Receipt For: Primary General Other (specify)	Aggregate	Year	-to-Date ▼ 1153.80		P/R De	ducti	tion	(\$192.	30 Bi-V	Veekly)				
	JBTOTAL of Receipts This Page (optional)			r			-			5	96 [.]	1.50			

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 66 OF

		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1									
			erson for the purpose of soliciting contributions to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)	0											
UnitedHealth Group Incorpo	orated PAC (l	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Mide JONES, RON, , ,	lle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 10066 ESCAMBIA BAY	СТ		03 / D D / Y Y Y Y 03 31 2019									
City NAPLES	State FL	Zip Code 34120-4621	Transaction ID : PR2575163553723									
			Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		250.00									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 CInt Relationship	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Primary General Other (specify) ▼		750.00	P/R Deduction (\$125.00 Bi-Weekly)									
			1									
Full Name of Individual (Last, First, Mide B. HAMANN, CHAD, , ,	lle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 7638 RIDGEVIEW WAY			03 31 2019									
City	State	Zip Code	Transaction ID : PR2575170153723									
CHANHASSEN	MN	55317-4507	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Tax	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Primary General Other (specify) ▼		, 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Midd C. MCGUIRE, THOMAS, , ,	lle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 41 CUMBERLAND ROA	D		03 31 2019									
City	State	Zip Code	Transaction ID : PR2575185453723									
WEST HARTFORD	СТ	06119-1121	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Peputy Gen Counsel	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify)		1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (option	al)		1019.20									
TOTAL This Period (last page this line nur	,											

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 67 OF

		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports and or for commercial purposes, other than using the	Statements mane and a	l ay not be sold or used by any p ddress of any political committer	erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle I A. REICHLING, KRISTIN, , ,	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 6516 TINGDALE AVENUE			03 31 Y Y Y Y Y 2019									
City EDINA	State MN	Zip Code 55439-1440	Transaction ID : PR2575186853723 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		1000.00									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Human Capital Svcs	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	P/R Deduction (\$1000.00 Bi-Weekly)									
Full Name of Individual (Last, First, Middle I B. DEMARIS, PETER, , ,	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 2301 OLIVER AVE S			03 31 Y Y Y Y Y 2019									
City MINNEAPOLIS	State MN	Zip Code 55405-2448	Transaction ID : PR2575191853723									
	_	55405-2440	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg eComm	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle I GRANBERG, MITCHELL, , ,	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 6721 GALWAY DRIVE			03 / D D / Y Y Y Y Y 2019									
City EDINA	State MN	Zip Code 55439-1313	Transaction ID : PR2575196153723									
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 384.60									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) uty Gen Counsel	Memo Item									
Receipt For: Primary General Other (specify)	P/R Deduction (\$192.30 Bi-Weekly)											
SUBTOTAL of Receipts This Page (optional)			1769.20									
TOTAL This Period (last page this line numbe	r only)											

SCHEDULE A (FEC Form 3X) DEOEIDTO

FOR LINE NUMBER:

PAGE 68 OF

		Use separate schedule(s)	(check only one)											
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17											
Any information copied from such Reports and or for commercial purposes, other than using	d Statements mathematic mathematical statements and a	A not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions											
NAME OF COMMITTEE (In Full)														
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	4C)											
Full Name of Individual (Last, First, Middle A. CONDON, CRAIG, , ,	Initial) or Full C	rganization Name	Date of Receipt											
Mailing Address 268 OAK LANDING WAY			03 31 2019											
City	State	Zip Code	Transaction ID : PR2575203153723											
SEVERNA PARK	MD	21146-3116	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	C		384.60											
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item											
United HealthCare Services Inc	Bus	Unit CEO	_											
Receipt For:	Aggregate	Year-to-Date ▼	D/D Deduction (\$102.20 Bi Marchite)											
Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)											
			-											
Full Name of Individual (Last, First, Middle FRANCIS , KEVIN, , ,		rganization Name	Date of Receipt											
Mailing Address 15815 MINNETONKA BLVI			03 / D D / Y Y Y Y Y 2019											
	State MN	Zip Code 55345-1410	Transaction ID : PR2575203353723											
MINNETONKA	_	00040-1410	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	C		384.60											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Chief Actuary	Memo Item											
Receipt For:	Aggregate	Year-to-Date V												
Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)											
Full Name of Individual (Last, First, Middle C. CARRIS, DONNA, , ,	Initial) or Full C	rganization Name	Date of Receipt											
Mailing Address 5 PARK PLACE UNIT # 130			03 31 2019											
City ANNAPOLIS	State MD	Zip Code 21401-3392	Transaction ID : PR2575212553723											
		21701-3332	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	C		76.92											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item											
Receipt For: Primary General Other (specify)	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)												
SUBTOTAL of Receipts This Page (optional).			846.12											
TOTAL This Period (last page this line number	er only)	······												

FOR LINE NUMBER:

PAGE 69 OF

		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
			person for the purpose of soliciting contributions be to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Midd A. STORDAHL, PAUL, , ,	le Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 7001 W 175TH AVENUE			M M / D D / Y									
City EDEN PRAIRIE	State MN	Zip Code 55346-2161	Transaction ID : PR2575213053723 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Actuary	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Midd B. MEYERHOFER, JEFFREY, , ,	le Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 6624 IROQUOIS TRAIL			03 / D D / Y Y Y Y 03 31 2019									
City EDINA	State MN	Zip Code 55439-1065	Transaction ID : PR2575214653723 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		76.92									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Bundled Payment Svs	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Midd C. KOENIG, ERICA, , ,	le Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 9000 WARREN COURT			M M / D D / Y Y Y Y Y 03 31 2019									
City VICTORIA	State MN	Zip Code 55386-4578	Transaction ID : PR2575215053723 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9, Talent	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optiona	al)		846.12									
TOTAL This Period (last page this line num	nber only)											

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 70 OF

ITEMIZED RECEIPTS		for each category of the	≭ 11a ☐ 11b ☐ 11c ☐ 12
		Detailed Summary Page	
			erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
UnitedHealth Group Incorpo	orated PAC (UnitedHealth Group PA	.C)
Full Name of Individual (Last, First, Midd SHORS, MATTHEW, , ,	lle Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 4649 EWING AVENUE	1		03 / D D / Y Y Y Y 2019
City	State	Zip Code	Transaction ID : PR2575222353723
MINNEAPOLIS	MN	55410-1745	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		384.60
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Deputy Gen Counsel	Memo Item
Receipt For:		. ,	
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Midd 3. KRUTA, DARLENE, , ,	lle Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 9243 GREEN BRIAR RD)		03 31 2019
City	State	Zip Code	Transaction ID : PR2575232553723
BLOOMINGTON	MN	55437-1939	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		76.92
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)
Full Name of Individual (Last, First, Midd C. GRUNDHOEFER, BRYAN, , ,		Organization Name	Date of Receipt
Mailing Address 1500 STAG MEADOW			03 / D D / Y Y Y Y 03 31 2019
City	State	Zip Code	Transaction ID : PR2575232753723
SAN ANTONIO	ТХ	78248-1346	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		384.00
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) D Med Grp Non Physn	Memo Item
Receipt For: Primary General Other (specify)	I	Year-to-Date ▼ 1152.00	P/R Deduction (\$192.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optionation) TOTAL This Period (last page this line nur	,	F	845.52

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 71 OF

		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle A. KIRKPATRICK, SUSAN, , ,	Initial) or Full C	Organization Name	Date of Receipt									
Mailing Address 417 STERLING STREET			M M / D D / Y Y Y Y Y 03 31 2019									
City LANCASTER	State MA	Zip Code 01523-1847	Transaction ID : PR2575233653723 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		76.92									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Gen Mgmt	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middle CHOATE, THOMAS, , ,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 8222 STONE MASON CT			03 / D D / Y Y Y Y Y 2019									
City WINDERMERE	State FL	Zip Code 34786-5624	Transaction ID : PR2575247853723 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		76.92									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) gn CEO	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middle DARRAH, JACQUELINE, , ,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 16942 HUBBARD TRAIL			03 / D D / Y Y Y Y Y 2019									
City LAKEVILLE	State MN	Zip Code 55044-5846	Transaction ID : PR2575248553723 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		76.92									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ssc Gen Counsel	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional).			230.76									
TOTAL This Period (last page this line number	er only)											

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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PAGE 72 OF

				Detailed Summary Page		X 11a		1	1b		11c		12		
				Jotaneu Jummary Faye		13		1	4		15		16	17	
or	y information copied from such Reports and Sta for commercial purposes, other than using the														
\backslash	NAME OF COMMITTEE (In Full)				C 1										
	UnitedHealth Group Incorporate				(C)										
۹.	Full Name of Individual (Last, First, Middle Initia BRANT, PAUL, , ,	al) or Full O	rga	nization Name		Date of	Re	ece	eipt						
	Mailing Address 17 ROCKY BROOK ROAD					^M 03	1	l	D 31	D	/ Y)19	Y	
		State CT		Zip Code		Trans	acti	io	ו ID :	P	R2575	2502	25372	3	
	WILTON		_	06897-1919	_	Amount	of	Ea	ach F	Rec	eipt th	is P	eriod		
	FEC ID number of contributing federal political committee.	С					_	,			-	_	76.9	92	
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) /P SIs Acct Mgt		M	emc	o l'	em						
	Receipt For:	Aggregate													
	Primary General Other (specify) ▼		,	230.76		P/R Ded	uctio	on	(\$38	.46	8 Bi-We	eekly	/)		
	Full Name of Individual (Last, First, Middle Initiation KORF, GRETCHEN, , ,	al) or Full O	rga	nization Name		Date of	Re	ece	eipt						
	Mailing Address 3180 CYPRESS CIRCLE S					03	/	ľ	D 31	- 1	/ Y		19	Y	
	City	State		Zip Code		Trans	acti	ior	DID :	PF	R25752	2522	5372:	3	
	MEDINA	MN		55340-8807		Amount	of	Ea	ach F	Rec	eipt th	is P	eriod		
	FEC ID number of contributing federal political committee.	С				384.60									
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) ernal Affs		M	emc	o l'	em						
	Receipt For: Primary General Other (specify) ▼	Year-to-Date ▼ P/R Deduction (\$192.30 Bi-Week								/eek	ly)				
	Full Name of Individual (Last, First, Middle Initia BACHMANN, ANITA, , ,	al) or Full O	rga	nization Name		Date of	Re	ece	eipt						
	Mailing Address 815 NORTHERN SHORES PO	DINT				03	/	ľ	31		/ Y		19	Y	
	City	State		Zip Code		Trans	act	io	n ID :	: P	R2575	2584	15372	3	
	GREENSBORO	NC		27455-3459		Amount	of	Ea	ach F	Rec	eipt th	is P	eriod		
	FEC ID number of contributing federal political committee.	С						,			9		153.8	36	
	Name of Employer (for Individual)	Occi	Jpa	ion (for Individual)		M	emo	o I	tem						
	United HealthCare Services Inc		•	n CEO											
	Receipt For:	Aggregate	Yea	ur-to-Date ▼											
	Primary General Other (specify)		- -	461.58		P/R Ded	ucti	ion	(\$76	6.93	3 Bi-We	eekl	/)		
s	JBTOTAL of Receipts This Page (optional)			•				,			9		615.3	88	

SCHEDULE A (FEC Form 3X) DEAEIDTA

FOR LINE NUMBER:

PAGE 73 OF

	-	Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using			person for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle REICHEL, RANDI, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 331 TUSCANY ROAD			03 31 Y Y Y Y Y 2019							
City BALTIMORE	State MD	Zip Code 21210-2934	Transaction ID : PR2575259953723 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		76.92							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. BROOMFIELD, ROBERT, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 12501 WEST 156TH STRE			03 / D D / Y Y Y Y Y 2019							
City OVERLAND PARK	State KS	Zip Code 66221-2662	Transaction ID : PR2575260453723							
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 276.90	P/R Deduction (\$46.15 Bi-Weekly)							
Full Name of Individual (Last, First, Middle ZARN, MARY, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 11192 BLUESTEM LANE			03 / D D / Y Y Y Y Y 2019							
City EDEN PRAIRIE	State MN	Zip Code 55347-4731	Transaction ID : PR2575269153723 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.			76.92							
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:		upation (for Individual) Gen Mgmt	Memo Item							
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			246.14							
TOTAL This Period (last page this line numb	er only)									

FOR LINE NUMBER:

PAGE 74 OF

	Use separate schedule(s)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
			person for the purpose of soliciting contributions te to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)								
/ Full Name of Individual (Last, First, Middle A. HAMBLIN, JILLIAN, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 3103 BEACON GROVE S	Г		03 31 2019								
City SPRING	State TX	Zip Code 77389-4348	Transaction ID : PR2575290353723 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.92								
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Dir,	upation (for Individual) Health Plan Operations	Memo Item								
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. MUELLER, STEVEN, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 6895 LAKE HARRISON CI			03 / D D / Y Y Y Y 03 31 2019								
City CHANHASSEN	State MN	Zip Code 55317-4589	Transaction ID : PR2575294553723 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.92								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Ops	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle HEWITT, SCOTT, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 1443 RAYMOND AVE			03 / D D / Y Y Y Y 2019								
City SAINT PAUL	State MN	Zip Code 55108-1430	Transaction ID : PR2575296753723 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		135.40								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 396.19	P/R Deduction (\$67.70 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			289.24								
TOTAL This Period (last page this line numb	er only)										

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 75 OF

	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middl CUEVAS, BRANDON, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 8 CLOISTER COURT			M = M / D = D / Y = Y = Y Y 03 31 2019							
City LADERA RANCH	State CA	Zip Code 92694-1556	Transaction ID : PR2575305653723 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n CEO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middl B. HUNT, BRADLEY, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 6636 W SHORE DR			03 / D D / Y Y Y Y 2019							
City EDINA	State MN	Zip Code	Transaction ID : PR2575310453723							
		55435-1529	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CMO	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼]							
Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middl C. DRAWZ, MATTHEW, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 4848 SPARROW ROAD	Ototo	Zin Oode	03 / D D / Y Y Y Y 31 2019							
City MINNETONKA	State MN	Zip Code 55345-3219	Transaction ID : PR2575315953723 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		76.92							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus Dev	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optiona	l)		846.12							
TOTAL This Period (last page this line num	nber only)									

Use separate schedule(s)

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PAGE 76 OF

	Use separate schedule(s)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
			13 14 15 16 1 erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpor	ated PAC (JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle GOLDBERG, JEFFREY, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 3410 BRADLEY LANE			03 31 Y Y Y Y Y 2019						
City CHEVY CHASE	State MD	Zip Code 20815-3262	Transaction ID : PR2575326953723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		78.00						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Business Development Exe	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 234.00	P/R Deduction (\$39.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. PEEL, CHAD, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 7185 GUNFLINT TRAIL	01-1-	7. 0.1	03 / D D / Y Y Y Y 2019						
City CHANHASSEN	State MN	Zip Code 55317-4743	Transaction ID : PR2575329853723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Prd	Memo Item						
Receipt For: Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$40.00 Bi-Weekly)						
Other (specify) v		240.00	1						
Full Name of Individual (Last, First, Middle C. VAN HAM, COLLEEN, , ,	,	organization Name	Date of Receipt						
Mailing Address 727 N EVERGREEN AVE	State	Zip Code	03 31 2019 Transaction ID : PR2575341953723						
ARLINGTON HEIGHTS	IL	60004-5566	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:		upation (for Individual) Plan CEO	Memo Item						
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional))		542.60						
TOTAL This Period (last page this line numb	per only)								

Use separate schedule(s)

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PAGE 77 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
or for commercial purposes, other than usin			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Mide WHITE, WAYNE, , ,		rganization Name	Date of Receipt								
Mailing Address 8727 W BUCKHORN TF	RL State	Zip Code	03 / D D / Y Y Y Y 2019								
PEORIA	AZ	85383-4852	Transaction ID : PR2575342353723 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Cust Svs	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Midd TELESKY, MICHAEL, , ,	dle Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 2602 PENNINGTON PL	ACE		03 / D D / Y Y Y Y 03 31 2019								
City VALPARAISO	State IN	Zip Code 46383-9163	Transaction ID : PR2575350953723 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		78.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) SIs SB KA	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 234.00	P/R Deduction (\$39.00 Bi-Weekly)								
Full Name of Individual (Last, First, Mido C. CUNNINGHAM, BRIAN, , ,	dle Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 1711 ROLLING HILLS F	RD.		03 / D D / Y Y Y Y Y 2019								
City CHARLESTON	State WV	Zip Code 25314-2215	Transaction ID : PR2575375953723 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.92								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Proj Mgmt	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)								
SUBTOTAL of Receipts This Page (option	al)		231.84								
TOTAL This Period (last page this line nu	mber only)	•••••									

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PAGE 78 OF

	Use separate schedule(s)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
Any information copied from such Reports and or for commercial purposes, other than using t			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle DOLL, KATHLEEN, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 3184 MULLIGAN LANE			03 31 Y Y Y Y Y 2019						
City CHASKA	State MN	Zip Code 55318-3226	Transaction ID : PR2575385153723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) CInt Svc Acct Mgt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. FENLON, STEVEN, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 4925 DREW AVE S			03 / D D / Y Y Y Y Y 2019						
City MINNEAPOLIS	State MN	Zip Code 55410-1743	Transaction ID : PR2575392053723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		192.30						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) buty Gen Counsel	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. BRATTEBO, CRAIG, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 10202 HARMONY CIRCLE			03 / D D / Y Y Y Y Y 2019						
City EDEN PRAIRIE	State MN	Zip Code 55347-5019	Transaction ID : PR2575397253723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	e la								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) uty Gen Counsel Mgr	Memo Item						
Receipt For: Primary General Other (specify)									
SUBTOTAL of Receipts This Page (optional).			461.52						
TOTAL This Period (last page this line number	er only)								

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 79 OF

	EMIZED RECEIPTS			or each category of the Detailed Summary Page	×			11	-	11c	F	12	
	y information copied from such Reports and State for commercial purposes, other than using the nar								se of				
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Uni	tedHealth Group PA	C)								
A.	Full Name of Individual (Last, First, Middle Initial) UNDERWOOD, JEFFREY, , ,	or Full O	Orgar	nization Name		Date o	of Re	ecei	ipt				
	Mailing Address 14625 SW SUNRISE LN	<u></u>		7. 0. 1		^M 03		L	31			ү ү 2019	_
	City TIGARD	State OR		Zip Code 97224-1209								33537	
	FFO ID number of contribution	C				AMOU	IL OF	⊨a	ich R	eceipt	ιΠIS	Period 153	
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) n CEO	_	N	1emo	o Ite	em				
	Pagaint For:	ggregate	Yea	r-to-Date ▼ 461.52	P	/R De	ducti	ion	(\$76.	92 Bi-'	Nee	kly)	
B.	Full Name of Individual (Last, First, Middle Initial) GOTHARD, CAROL, , ,	or Full O	rgar	nization Name		Date c	of Re	ecei	ipt				
	Mailing Address 16492 BROOKLANE BOULEVAR					M M M J D J Y							
	City NORTHVILLE	State MI		Zip Code 48168-8417									
	FEC ID number of contributing federal political committee.	C					76.36						
	Name of Employer (for Individual) United HealthCare Services Inc	Occ Dir		ion (for Individual)		N	lemo	o Ite	em				
	Receipt For: A Primary General Other (specify) ▼	Aggregate Year-to-Date ▼						on	(\$38.	18 Bi-\	Vee	kly)	
C.	Full Name of Individual (Last, First, Middle Initial) MCGAVICK, KEVIN, , ,	or Full O	Orgar	nization Name		Date o	of Re	ecei	ipt				
	Mailing Address 705 NOTTINGHAM COURT					03		L	31	J L		2019	_
	City CRANBERRY TOWNSHIP	State PA		Zip Code 16066-6527	-							2 19537	
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Peri					.92			
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Dir E		ion (for Individual) Dvlp		N	/lemo	o It	em				
	Receipt For: A Primary General Other (specify)	aggregate	P	P/R De	ducti	ion	(\$38.	.46 Bi-'	Wee	kly)			
s	UBTOTAL of Receipts This Page (optional)			•••••	_			,		. ,		307	.12
т	OTAL This Period (last page this line number only	/)		•••••			i.	-,-					

Use separate schedule(s)

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PAGE 80 OF

	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12							
			13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)	-									
> UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Midd	le Initial) or Full C	rganization Name								
A. O'HARA, KARIN, , ,			Date of Receipt							
Mailing Address 1431 HENRY COURT			03 31 2019							
City	State	Zip Code	Transaction ID : PR2575428753723							
CHANHASSEN	MN	55317-2200	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		76.92							
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item							
United HealthCare Services Inc	VP.	Acctng								
Receipt For:	Aggregate	Year-to-Date ▼	D/D Doduction (*28.46 Di Waakhu)							
Other (specify) ▼		230.76	P/R Deduction (\$38.46 Bi-Weekly)							
			-							
Full Name of Individual (Last, First, Midd B. <u>CASTILLO, EFREM, , ,</u>	le Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 307 JOLIET AVE			03 / D D / Y Y Y Y 2019							
City SAN ANTONIO	State TX	Zip Code 78209-5243	Transaction ID : PR2575441353723							
· · · · · · · · · · · · · · · · · · ·		78209-3243	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		384.60							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) n Care Initiv	Memo Item							
	Aggregate	Year-to-Date ▼								
Primary General Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Midd C. SPILKER, TIMOTHY, , ,	le Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 32 FITCH LANE			03 / D D / Y Y Y Y 03 31 2019							
	State CT	Zip Code	Transaction ID : PR2575446353723							
NEW CANAAN		06840-5051	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		384.60							
Name of Employer (for Individual)		upation (for Individual)	Memo Item							
United HealthCare Services Inc Receipt For:		n CEO Year-to-Date ▼								
Primary General Other (specify)	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional	al)		846.12							
TOTAL This Period (last page this line num	nber only)									

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 81 OF

IIEMIZED	KEUEIP I S		for each category Detailed Summary		X 11a 11b 11c 12 13 14 15 16 17					
or for commerci	al purposes, other than using the				on for the purpose of soliciting contributions o solicit contributions from such committee.					
	OMMITTEE (In Full) ealth Group Incorporate	d PAC (l	JnitedHealth G	Froup PAC)					
	f Individual (Last, First, Middle Initi ROBERT, , ,	al) or Full C	rganization Name		Date of Receipt					
	ess 16632 HANSON BLVD NW				03 / D D / Y Y Y Y 2019					
City ANDOVER		State MN	Zip Code 55304-2089	-	Transaction ID : PR2575447253723					
FEC ID num	ber of contributing cal committee.	С			Amount of Each Receipt this Period 384.60					
Name of Em Optum Servic	ployer (for Individual) ces, Inc		upation (for Individual Gen Mgmt)	Memo Item					
Receipt For: Primary Other (y General (specify) ▼	Aggregate	Year-to-Date ▼ 1	153.80	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of B. FLOCCO	f Individual (Last, First, Middle Initi , LOUIS, , ,	al) or Full C	rganization Name		Date of Receipt					
	ess 3281 S VINE STREET				M M / D D / Y					
City CHANDLER		State AZ	Zip Code 85248-3845		Transaction ID : PR2575448653723 Amount of Each Receipt this Period					
	ber of contributing cal committee.	С			200.00					
	ployer (for Individual) Care Services Inc		upation (for Individua Underwriting	l)	Memo Item					
Receipt For: Primary Other (y General (specify) ▼	Aggregate	Year-to-Date V	600.00	P/R Deduction (\$100.00 Bi-Weekly)					
	f Individual (Last, First, Middle Initi CH, THOMAS, , ,	al) or Full C	rganization Name		Date of Receipt					
	5380 YELLOWSTONE TRAIL				03 / D D / Y Y Y Y 2019					
City MINNETRIS	ТА	State MN	Zip Code 55331-9163	-	Transaction ID : PR2575448853723 Amount of Each Receipt this Period					
	ber of contributing cal committee.	С			384.60					
United Health	ployer (for Individual) nCare Services Inc		upation (for Individual Underwriting)	Memo Item					
Receipt For: Primary Other (y General (specify)	Aggregate	Year-to-Date ▼	153.80	P/R Deduction (\$192.30 Bi-Weekly)					
SUBTOTAL of	Receipts This Page (optional)			····· ►	969.20					
TOTAL This Pe	eriod (last page this line number c	only)								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 82 OF

	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
			person for the purpose of soliciting contributions the to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	4C)						
Full Name of Individual (Last, First, Middle MCGLINCH, THOMAS, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 910 MIDWEST TRAIL NOF	RTH		03 31 Y Y Y Y Y 03 31 2019						
City LAKE ELMO	State MN	Zip Code 55042-9658	Transaction ID : PR2575451653723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Treasury	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. MURPHY, ERIC, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 5201 BLAKE ROAD			03 31 2019						
City EDINA	State MN	Zip Code 55436-1127	Transaction ID : PR2575453753723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		384.60						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. SADUSKE, NANETTE, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 4276 NICOLET DRIVE			03 / D D / Y Y Y Y 03 31 2019						
City GREEN BAY	State WI	Zip Code 54311-9798	Transaction ID : PR2575470253723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.52						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Compli	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 229.56	P/R Deduction (\$38.26 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			538.04						
TOTAL This Period (last page this line numb	er only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 83 OF

	TEMIZED RECEIPTS for each category of the Detailed Summary Page							11b		11c	12	<u> </u>			
	y information copied from such Reports and State for commercial purposes, other than using the na														
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	JnitedHealth Group	o PAC	C)										
A.	Full Name of Individual (Last, First, Middle Initial) STARMANN, LYNN, , ,) or Full C	Organization Name	Date of Receipt											
	Mailing Address 11701 WEMBLEY RD	1				^M 03	1		31	/ Y	ү ү 2019	Y			
	City LOS ALAMITOS	State CA	Zip Code 90720-4235								49455372				
	FEC ID number of contributing federal political committee.	С	90120-4233		Amount of Each Receipt this Period 76.92										
	Name of Employer (for Individual)	Occ	upation (for Individual)		Ì	Me	emo) Iten	n						
	Optum Services, Inc	Dir	Med Clin Ops												
	Receipt For: // Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	6	P/R Deduction (\$38.46 Bi-Weekly)										
B.	Full Name of Individual (Last, First, Middle Initial) HOWELL, NICHOLAS, , ,) or Full C	organization Name		D	ate of	Re	ceipt	t						
	Mailing Address 300 ORANGE GROVE AVENUE		03 31 / Y Y Y Y 03 31 2019												
	City SOUTH PASADENA	State CA	Zip Code 91030-1616		Transaction ID : PR2575510053723 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С				-		-y	384	.60					
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Advisory Svc			Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	0	P/F	R Dedu	uctic	on (\$	192.3	0 Bi-W	'eekly)				
с.	Full Name of Individual (Last, First, Middle Initial) SHAPIRO, SHEILA, , ,) or Full C	organization Name		D	ate of	Re	ceipt	t						
	Mailing Address 1727 EAST MYRTLE AVENUE	1				03	1		31	/ Y	2019	Y			
	City PHOENIX	State AZ	Zip Code 85020-5529								51205372				
	FEC ID number of contributing federal political committee.	С				mount	of	Eacr	n Rec	eipt th	iis Perioc 76	_			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops		[Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76		P/I	R Dedi	uctio	on (\$	38.46	∂ Bi-We	ekly)				
s	UBTOTAL of Receipts This Page (optional)			►						9	538.	44			
т	OTAL This Period (last page this line number onl	y)		▶	Ī			-		-					

SCHEDULE A (FEC Form 3X) DEAEIDTA

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FOR LINE NUMBER:

PAGE 84 OF

		Use separate schedule(s)	(check only one)						
II EIVIIZED RECEIPIO		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using	d Statements mathematic mathematical statements and a	I ay not be sold or used by any p uddress of any political committe	erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle A. KELLY, MARGARET, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 23420 COVELLO STREET			03 / D D / Y Y Y Y 2019						
City WEST HILLS	State CA	Zip Code 91304-5333	Transaction ID : PR2575518053723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		92.30						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP SIs Acct Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 276.90	P/R Deduction (\$46.15 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. JOSEPH, MOLLY, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 9209 GRAND SUMMIT BL			03 / D D / Y Y Y Y Y 03 31 2019						
City DRIPPING SPRINGS	State TX	Zip Code 78620-2882	Transaction ID : PR2575521753723						
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual)	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1152.00	P/R Deduction (\$192.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. DI RE, BERNADETTE, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 1 NORFOLK LANE			M M / D D / Y Y Y Y Y 03 31 2019						
City HOLLISTON	State MA	Zip Code 01746-2362	Transaction ID : PR2575522553723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			553.22						
TOTAL This Period (last page this line number	er only)								

SCHEDULE A (FEC Form 3X) _____ _

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FOR LINE NUMBER:

PAGE 85 OF

		Use separate schedule(s)	(check only o	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	11b 11c	12	<u> </u>				
Any information copied from such Reports and or for commercial purposes, other than using t										
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle CROCKETT, DOUGLAS, , ,	Initial) or Full C	rganization Name	Date of F	leceipt						
Mailing Address 5938 DEER HOLLOW COURT			03	/ D D / 31	Y Y Y 2019	Y				
City PITTSBORO	State IN	Zip Code 46167-9583		ction ID : PR257 of Each Receipt		}				
FEC ID number of contributing federal political committee.			- 7 - 1- 7 -	115.3	8					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Men	no Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.14	P/R Deduc	tion (\$57.69 Bi-\	Veekly)					
Full Name of Individual (Last, First, Middle B. COHEN, SANFORD, , ,	Initial) or Full C	rganization Name	Date of F	leceipt						
Mailing Address 28 CRESCENT LANE			03 / D D / Y Y Y Y Y 03 31 2019							
City LEVITTOWN	State NY	Zip Code 11756-2506		tion ID : PR257		l				
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) O, Clinical Policy	Mem	no Item						
Receipt For:	Aggregate	Year-to-Date ▼		1						
Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle BASS, JOHN, , ,	Initial) or Full C	rganization Name	Date of F	leceipt						
Mailing Address 265 CAVE LN	Ototo	7. 0.4	03							
City SAN ANTONIO	State TX	Zip Code 78209-2242		ction ID : PR257 of Each Receipt		5				
FEC ID number of contributing federal political committee.	С			76.92						
United HealthCare Services Inc		upation (for Individual) RVP SIs	Men	no Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduc	tion (\$38.46 Bi-\	Weekly)					
SUBTOTAL of Receipts This Page (optional).				y y	576.9	0				
TOTAL This Period (last page this line number	er only)									

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 86 OF

	-	Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12					
			13 14 15 16 17 person for the purpose of soliciting contributions se to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)	9							
UnitedHealth Group Incorpo	prated PAC (I	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Mide HERNANDEZ, MAYRENE, , ,	dle Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 850 SW 189TH AVENU	1		03 31 Y Y Y Y 2019					
City PEMBROKE PINES	State FL	Zip Code 33029-6047	Transaction ID : PR2575529253723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		76.92					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) <i>N</i> ed Dir	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)					
Full Name of Individual (Last, First, Mide B. HOLOVNIA, KRISTEN, , ,	dle Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 4610 LAKEVIEW DRIVE			03 / D D / Y Y Y Y 03 31 2019					
City	State MN	Zip Code	Transaction ID : PR2575533053723					
		55424-1518	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) outy Gen Counsel	Memo Item					
Receipt For: Primary General	Aggregate	Year-to-Date ▼						
Other (specify)		1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Mide C. HILL, JANE, , ,	lle Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 34301 299TH PLACE			03 / D D / Y Y Y Y 2019					
City AITKIN	State MN	Zip Code 56431-5914	Transaction ID : PR2575533153723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		76.92					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Compli	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)					
SUBTOTAL of Receipts This Page (option	al)		538.44					
TOTAL This Period (last page this line nu	mber only)							

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 87 OF

		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
			erson for the purpose of soliciting contributions to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Midd A. MULLANEY, SUSAN, , ,	le Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 169 HUNNEWELL STRE			03 / D D / Y Y Y Y Y 03 31 2019								
City	State MA	Zip Code	Transaction ID : PR2575535153723								
NEEDHAM FEC ID number of contributing federal political committee.	C	02494-1421	Amount of Each Receipt this Period 76.92								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Midd B. HAMLIN, THOMAS , , ,	le Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 2800 NEWMAN	03 / D D / Y Y Y Y 03 31 2019										
City HOUSTON	State TX	Zip Code 77098-1408	Transaction ID : PR2575536253723 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.92								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Behvrl Med Dir	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Midd C. SUN, TONY, , ,	le Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 8408 ENSLEY PLACE			03 / D D / Y Y Y Y Y 2019								
City LEAWOOD	State KS	Zip Code 66206-1402	Transaction ID : PR2575540253723 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.92								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ied Dir	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional	al)		230.76								
TOTAL This Period (last page this line nur	nber only)										

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 88 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
or for commercial purposes, other than using			erson for the purpose of soliciting contributions e to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)				
Full Name of Individual (Last, First, Middle ROSENZWEIG, MARTIN , ,	Initial) or Full C	organization Name	Date of Receipt				
Mailing Address 116 DAVID RD	State	Zip Code	03 / D D / Y Y Y Y 2019				
BALA CYNWYD	PA	19004-2315	Transaction ID : PR2575540653723				
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) wrl CMO	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 260.85	P/R Deduction (\$86.95 Bi-Weekly)				
Full Name of Individual (Last, First, Middle STEINBRECHER, HOLLY, , ,	Initial) or Full C	Organization Name	Date of Receipt				
Mailing Address 2101 LILAC LANE			03 / D D / Y Y Y Y 03 31 2019				
City FRISCO	State TX	Zip Code 75034-3652	Transaction ID : PR2575544553723 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		384.60				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)				
Full Name of Individual (Last, First, Middle C. STAFFORD, JEFF, , ,	Initial) or Full C	organization Name	Date of Receipt				
Mailing Address 9413 W 131ST STREET			03 / D D / Y Y Y Y Y 2019				
City OVERLAND PARK	State KS	Zip Code 66213-3079	Transaction ID : PR2575561253723 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		115.40				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Health Plan Operations	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 346.20	P/R Deduction (\$57.70 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional)			673.90				
TOTAL This Period (last page this line numb							

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 89 OF

		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports and or for commercial purposes, other than using t			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorpora	ted PAC (JnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, Middle I A. MOCK, CURTIS, , ,	nitial) or Full C	organization Name	Date of Receipt					
Mailing Address 23 KELTON STREET			M M / D D / Y Y Y Y 03 31 2019					
City REHOBOTH	State MA	Zip Code 02769-2530	Transaction ID : PR2575579253723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		192.30					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)					
Full Name of Individual (Last, First, Middle I B. WINSOR, ELIZABETH, , ,	nitial) or Full C	organization Name	Date of Receipt					
Mailing Address 57 WILDERS PASS			03 / D D / Y Y Y Y 03 31 2019					
City CANTON	State CT	Zip Code 06019-2259	Transaction ID : PR2575582853723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) gn CEO	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼						
Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle I HARRIS, EUGENE, , ,	nitial) or Full C	organization Name	Date of Receipt					
Mailing Address 2832 HARBORSIDE WAY	01-1-	7. 0.4	M M / D D / Y Y Y Y Y 03 31 2019					
City SOUTHPORT	State NC	Zip Code 28461-8373	Transaction ID : PR2575585453723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		76.92					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) R Reg VP of Brkr Sls	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)	·		653.82					
TOTAL This Period (last page this line numbe	er only)							

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 90 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)					
I LIVILLU KEULITIS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
			13 14 15 16 17 person for the purpose of soliciting contributions te to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	rated PAC (l	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Middl A. SOLLER, BRIAN, , ,	e Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 17210 62ND AVE NORT	4		03 / D D / Y Y Y Y 03 31 2019					
City MAPLE GROVE	State MN	Zip Code 55311-6406	Transaction ID : PR2575586753723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		384.60					
Name of Employer (for Individual) Optum Services, Inc	Occi VP I	upation (for Individual) T	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middl B. GISCH, SHAWNA, , ,	e Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 320 PRESERVE COURT			03 / D D / Y Y Y Y 2019					
City CHANHASSEN	State MN	Zip Code 55317-8717	Transaction ID : PR2575592153723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middl C. MILLER, MICHAEL, , ,	e Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 1 CANAL STREET 410	01-1-	7.004	03 / D D / Y Y Y Y Y 31 2019					
City BOSTON	State MA	Zip Code 02114-2019	Transaction ID : PR2575595653723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Business Development Exe	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optiona	l)		1153.80					
TOTAL This Period (last page this line num	ber only)							

Use separate schedule(s)

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PAGE 91 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)					
II EIVIIZED KEGEIPIJ		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 11					
			13 14 15 16 1 berson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (l	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Mide A. IVERSON, LISA, , ,	dle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 13341 CARRACH AVEN	NUE		03 31 2019					
City ROSEMOUNT	State MN	Zip Code 55068-4774	Transaction ID : PR2575603253723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CFO	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Mide B. MCNUTT, DIANE, , ,	lle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 90 CLAY CLIFFE DRIVE			03 / D D / Y Y Y Y 2019					
City EXCELSIOR	State MN	Zip Code 55331-9509	Transaction ID : PR2575604553723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Human Capital	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Mide C. COSTA, JOEL, , ,	dle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 775 WESTCHESTER A	1		03 / D D / Y Y Y Y 03 31 2019					
City SHAKOPEE	State MN	Zip Code 55379-4557	Transaction ID : PR2575605853723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		230.76					
Name of Employer (for Individual) United HealthCare Services Inc	Occu VP F	upation (for Individual) Fin	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 692.28	P/R Deduction (\$115.38 Bi-Weekly)					
SUBTOTAL of Receipts This Page (option	al)		999.96					
TOTAL This Period (last page this line nu	mber only)							

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 92 OF

	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16						
			erson for the purpose of soliciting contributions to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle KING, SARAH, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 116 CUTLER ROAD			M M / D D / Y Y Y Y 03 31 2019						
City GREENWICH	State CT	Zip Code 06831-2511	Transaction ID : PR2575612853723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) SIs SVP OptumI	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. STOCKHOWE, MARK, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 2108 MANOR DRIVE			03 / D D / Y Y Y Y 2019						
City BURNSVILLE	State MN	Zip Code 55337-2036	Transaction ID : PR2575619953723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Director, Advisory Svcs	Memo Item						
Receipt For: Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$38.46 Bi-Weekly)						
Other (specify) V		, 230.76							
Full Name of Individual (Last, First, Middle C. WAULTERS, SCOTT, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 4 HEMLOCK COURT			03 / D D / Y Y Y Y Y 2019						
City MANALAPAN	State NJ	Zip Code 07726-4254	Transaction ID : PR2575622153723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
United HealthCare Services Inc VI		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)		846.12						
TOTAL This Period (last page this line num	ber only)								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 93 OF

		Use separate schedule(s)	(check only one)						
I EIVILED RECEIPIS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
Any information copied from such Reports and									
or for commercial purposes, other than using th	ne name and a	address of any political committee	e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	UnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle I THOMPSON, BRIAN, , ,	nitial) or Full C	Organization Name	Date of Receipt						
Mailing Address 17829 63RD AVE N			M M / D D / Y Y Y Y 03 31 2019						
City MAPLE GROVE	State MN	Zip Code 55311-4650	Transaction ID : PR2575634653723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I MILSON, STEPHEN, , ,	nitial) or Full C	Organization Name	Date of Receipt						
Mailing Address 2420 DURHAM MANOR DR	IVE		03 / D D / Y Y Y Y 03 31 2019						
City FRANKLIN	State TN	Zip Code 37064-5266	Transaction ID : PR2575636153723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		153.84						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Plan CEO	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	7						
Other (specify) ▼		461.52	P/R Deduction (\$76.92 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I C. CLARK, TERRENCE, , ,	nitial) or Full C	Organization Name	Date of Receipt						
Mailing Address 8 COOPER AVENUE			03 / D D / Y Y Y Y Y 2019						
City EDINA	State MN	Zip Code 55436-1315	Transaction ID : PR2575636953723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.			384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef Marketing Officer	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			923.04						
TOTAL This Period (last page this line numbe	r only)								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 94 OF

17			Use separate schedule(s)	(check only one)						
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
	y information copied from such Reports and Sta for commercial purposes, other than using the r									
$\overline{)}$	NAME OF COMMITTEE (In Full)									
	UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	C)						
A.	Full Name of Individual (Last, First, Middle Initia CABANILLAS, MARIA, , ,	al) or Full O	rganization Name	Date of Receipt						
	Mailing Address 2411 WORDSWORTH ST			M M / D D / Y Y Y Y Y 03 31 2019						
	City	State	Zip Code	Transaction ID : PR2575637353723						
	HOUSTON	ТХ	77030-1833	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		192.30						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)						
В.	Full Name of Individual (Last, First, Middle Initia DAVIS, BENTON, , ,	al) or Full O	rganization Name	Date of Receipt						
Mailing Address 9825 NORTH 53RD PLACE				03 / D D / Y Y Y Y Y 2019						
	City PARADISE VALLEY	State AZ	Zip Code 85253-1634	Transaction ID : PR2575639253723 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		384.60						
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) GM Clin Comnty Ntwk	Memo Item						
	Receipt For:	Aggregate	Year-to-Date V	1						
	Primary General Other (specify) ▼		769.20	P/R Deduction (\$192.30 Bi-Weekly)						
С.	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name	Date of Receipt						
	Mailing Address 155 MEADOWVIEW LANE			03 / D D / Y Y Y Y 03 31 2019						
	City MEDINA	State MN	Zip Code 55340-4510	Transaction ID : PR2575648653723 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		115.40						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) /Iktg	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 346.20	P/R Deduction (\$57.70 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)		•••••	692.30						
т	OTAL This Period (last page this line number of	nly)	••••••							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 95 OF

IT.			Use separate schedule(s)	(ch	(check only one)						
	EIVILLED KEGEIPIS		for each category of the Detailed Summary Page	×	11a		11b	11c	12	Г	 ا
	ny information copied from such Reports and Sta for commercial purposes, other than using the n										
$\overline{\langle}$	NAME OF COMMITTEE (In Full)										
\rangle	UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group P/	AC)							
A.	Full Name of Individual (Last, First, Middle Initia HERMAN, CRAIG, , ,	l) or Full Or		Date of Receipt							
	Mailing Address 9609 WYOMING CIRCLE				03	1	D D D 31	/ Y	y y 2019	Y]
	City BLOOMINGTON	State MN	Zip Code 55438-1628					PR25756 eceipt th			
	FEC ID number of contributing federal political committee.						.		38	4.60	
	Name of Employer (for Individual) Optum Services, Inc	Occu VP A		Me	emo	ltem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80] F	9/R Ded	uctio	on (\$192	2.30 Bi-W	/eekly)		
в.	Full Name of Individual (Last, First, Middle Initia SJODIN, CARA, , ,	l) or Full Or		Date of	Re	ceipt					
	Mailing Address 1751 HAMPSHIRE AVENUE				03 / D D / Y Y Y Y 2019						
	City	State MN	Zip Code	Transaction ID : PR2575652453723							
	SAINT PAUL	Occupation (for Individual) VP Product			Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.				192.30						
	Name of Employer (for Individual) United HealthCare Services Inc				Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P	/R Dedu	uctic	on (\$96. ⁻	15 Bi-We	ekly)		
C.	Full Name of Individual (Last, First, Middle Initia	l) or Full Or	organization Name		Date of	Re	ceipt				
	Mailing Address 18925 24TH AVENUE NORTH	Chata		03 / D D / Y Y Y Y 2019							
	City PLYMOUTH	State MN	Zip Code 55447-2072					PR25750 eceipt th			
	FEC ID number of contributing federal political committee.	С					9	,		4.60	
Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) Regn CEO			Me	emo	Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80]	P/R Ded	uctio	on (\$192	2.30 Bi-W	/eekly)		
s	UBTOTAL of Receipts This Page (optional)			•			9		96	1.50	
т	OTAL This Period (last page this line number or	ıly)		•			,			-	

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 96 OF

	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
Any information copied from such Reports and or for commercial purposes, other than using			13 14 15 16 17 erson for the purpose of soliciting contributions from such committee						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle PIZZANO, KATHRYN, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 387 DEPOT HILL ROAD			03 / D D / Y Y Y Y 2019						
City POUGHQUAG	State NY	Zip Code 12570-5763	Transaction ID : PR2575662153723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		153.84						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Health Plan Operations	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.52	P/R Deduction (\$76.92 Bi-Weekly)						
Full Name of Individual (Last, First, Middle ZIGLER, JANICE, , ,	Initial) or Full C	Date of Receipt							
Mailing Address 21 TREVINO CIRCLE	04-1	Zin Ond	03 / D D / Y Y Y Y 03 31 2019						
City ANGEL FIRE	State NM	Zip Code 87710	Transaction ID : PR2575665653723						
		07710	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) gn Pres Ntwk Mgmt	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle ALLEN, CARL, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 8675 AZURE SKY DRIVE	State	Zin Code	03 / D D / Y Y Y Y 03 31 2019						
City LAS VEGAS	State NV	Zip Code 89129-2227	Transaction ID : PR2575669353723 Amount of Each Receipt this Period						
Southwest Medical Assoc. Inc. Sr			78.00						
		upation (for Individual) 1ed Dir	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 234.00	P/R Deduction (\$39.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			616.44						
TOTAL This Period (last page this line numb	er only)								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 97 OF

	Use separate schedule(s)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12				
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group P	AC)				
Full Name of Individual (Last, First, Midd BOGATYRENKO, VICTORIA, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name BOGATYRENKO, VICTORIA, , ,						
Mailing Address 1 FRANKLIN STREET APT 2C			03 / D D / Y Y Y Y 2019				
City EXETER	State NH	Zip Code 03833-2816	Transaction ID : PR2575675453723 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		115.18				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 345.54	P/R Deduction (\$57.59 Bi-Weekly)				
Full Name of Individual (Last, First, Midd B. MITCHELL, JILL, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name MITCHELL, JILL, , ,						
Mailing Address 11499 ASHLEY COURT	M M / D D / Y Y Y Y 03 31 2019						
City INVER GROVE HEIGHTS	State MN	Zip Code 55077-5251	Transaction ID : PR2575678353723 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	ů – Li – L						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) buty Gen Counsel Mgr	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)				
Full Name of Individual (Last, First, Midd C. SIMONSON, KELLY, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name						
	Mailing Address 6284 CLOVIS POINT ST						
City LAS VEGAS	State NV	Zip Code 89135-1496	Transaction ID : PR2575682353723 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		92.30				
Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) Gen Mgmt	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 276.90	P/R Deduction (\$46.15 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optiona	al)		284.40				
TOTAL This Period (last page this line nun	nber only)	······					

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 98 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17			
or for commercial purposes, other than us			erson for the purpose of soliciting contributions e to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)	orated PAC (I	JnitedHealth Group PA	4C)			
Full Name of Individual (Last, First, Mic A. STIDMAN, CHRISTOPHER, , ,	ll Name of Individual (Last, First, Middle Initial) or Full Organization Name TIDMAN, CHRISTOPHER, , ,					
Mailing Address 6504 CHEROKEE TRA	03 / D D / Y Y Y Y Y 2019					
City EDINA	State MN	Zip Code 55439-1109	Transaction ID : PR2575683853723			
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 384.60			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In Pres Ntwk Mgmt	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$192.30 Bi-Weekly)				
Full Name of Individual (Last, First, Mic OCHIPINTI, JOSEPH, , ,	Date of Receipt					
Mailing Address 2751 MEETING PLACE	03 31 / Y Y Y Y Y 2019					
City ORLANDO	State FL	Zip Code 32814-6136	Transaction ID : PR2575685753723 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	ů l					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Plan CEO	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)			
Full Name of Individual (Last, First, Mic C. FINE, BRETT, , ,	Idle Initial) or Full C	organization Name	Date of Receipt			
	Mailing Address 707 STONINGTON ROAD					
City SILVER SPRING	State MD	Zip Code 20902-1549	Transaction ID : PR2575692853723 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		384.60			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ? Corp Strat	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)			
SUBTOTAL of Receipts This Page (optio	nal)		1153.80			
TOTAL This Period (last page this line nu						

FOR LINE NUMBER:

PAGE 99 OF

	Use separate schedule(s)		(check only one)	
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17	
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions	
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (JnitedHealth Group P	AC)	
Full Name of Individual (Last, First, Middle I A. FARRELL, STEPHEN, , ,	nitial) or Full C	organization Name	Date of Receipt	
Mailing Address 50 MAJOR DOANE RD			03 31 Y Y Y Y Y	
City WELLFLEET	State MA	Zip Code 02667-7836	Transaction ID : PR2575696253723 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		76.92	
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) I Plan CEO	Memo Item	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)	
Full Name of Individual (Last, First, Middle I B. PROKOCKI, ELIZABETH, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name PROKOCKI, ELIZABETH, , ,			
Mailing Address 9746 SUNSET HILL DR			M M / D D / Y Y Y Y 03 31 2019	
City LONE TREE	State CO	Zip Code 80124-6720	Transaction ID : PR2575705853723 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		384.60	
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Gen Mgmt	Memo Item	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)	
Full Name of Individual (Last, First, Middle I WILSON, D ELLEN, , ,	nitial) or Full C	organization Name	Date of Receipt	
Mailing Address 400 STUART STREET 25D City	State	Zip Code	03 / 0 / Y Y Y Y 03 / 31 2019 Transaction ID : PR2575708853723	
BOSTON	MA	02116-5011	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		384.60	
Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) EVP Human Capital		Memo Item	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)	
SUBTOTAL of Receipts This Page (optional)			846.12	
TOTAL This Period (last page this line numbe	er only)			

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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FOR LINE NUMBER:

PAGE 100 OF

17		Use separate schedule(s)		(ch	neck only	/ or	ne)					
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page		× 11a		11b	11c	12			
	y information copied from such Reports and Sta for commercial purposes, other than using the r											
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	AC)								
A.	Full Name of Individual (Last, First, Middle Initia VOLLRATH, MICHELLE, , ,	ll) or Full Or	rganization Name		Date of	Re	eceipt					
	Mailing Address 7647 MARKER ROAD				м м 03	/	D D 31) / Y	ү ү 2019	Y		
	City SAN DIEGO	State CA	Zip Code 92130-5616						7 1985372 is Period	3		
	FEC ID number of contributing federal political committee.	С			<u> </u>				115.	38		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 5 Dir Client Mngt		Me	emo	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.14		P/R Dedu	uctio	on (\$57.	.69 Bi-We	ekly)			
в.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name KNORR, MOLLY, , ,					Re	eceipt					
	Mailing Address 1144 PROSPECT AVENUE						03 / D D / Y Y Y Y Y Y 2019					
	City HARTFORD	State CT	Zip Code 06105-1124						3545372	3		
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period					92			
	Name of Employer (for Individual) United HealthCare Services Inc	upation (for Individual) P Risk Adjustment		Me	emo	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 230.76		P/R Dedu	uctio	on (\$38.	46 Bi-We	ekly)			
с.	Full Name of Individual (Last, First, Middle Initia GROSKLAGS, JEFFREY, , ,	l) or Full Or	rganization Name		Date of	Re	eceipt					
	Mailing Address 3233 TIMBERWOLF CIRCLE				03	/	31) / Y	2019	Y		
	City PRIOR LAKE	State MN	Zip Code 55372-3272		Transaction ID : PR2575735753723 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С			<u> </u>		, .	. ,	192.	30		
	Name of Employer (for Individual) Optum Services, Inc	Occu VP F	ipation (for Individual) ïn		Me	emc	tem					
	Receipt For: Primary General Other (specify)	Aggregate		P/R Ded	ucti	on (\$96.	.15 Bi-We	ekly)				
s	UBTOTAL of Receipts This Page (optional)			•			7		384.	60		
т	OTAL This Period (last page this line number or	וy)	••••••	-			-	1.45				

SCHEDULE A (FEC Form 3X) DEAEIDTA

FOR LINE NUMBER:

PAGE 101 OF

		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b	11c	12	_		
Any information copied from such Reports a or for commercial purposes, other than using								
NAME OF COMMITTEE (In Full)	,							
UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group PA	C)					
Full Name of Individual (Last, First, Middl KRAL, JESSICA, , ,	e Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 4358 COOLIDGE AVE			03 / D 31		2019	Y		
City SAINT LOUIS PARK	State MN	Zip Code 55424-1020	Transaction ID Amount of Each I					
FEC ID number of contributing federal political committee.	С				384.6	0		
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$19	12.30 Bi-W	/eekly)			
Full Name of Individual (Last, First, Middl MURRAY, THOMAS, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name MURRAY, THOMAS, , ,							
Mailing Address 10 CIRCLE WEST			03 / D 31		2019	Ŷ		
City EDINA	State MN	Zip Code 55436-1313	Transaction ID : Amount of Each F					
FEC ID number of contributing federal political committee.	384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment COO	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼	P/R Deduction (\$192.30 Bi-Weekly)					
Primary General Other (specify) ▼		1153.80						
Full Name of Individual (Last, First, Middl CESARETTI, GINA, , ,	e Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 5020 CIRCLE DOWN	Ototo	Zin Onde	03 / 31		үүү 2019			
City GOLDEN VALLEY	State MN	Zip Code 55416-1304	Transaction ID Amount of Each F			i		
FEC ID number of contributing federal political committee.	С		, .	. ,	384.6	0		
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) uty Gen Counsel Mgr	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$1	92.30 Bi-W	Veekly)			
SUBTOTAL of Receipts This Page (optiona	I)		, .	. ,	1153.8	0		
TOTAL This Period (last page this line num	iber only)							

FOR LINE NUMBER:

PAGE 102 OF

	Use separate schedule(s)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle PINERSKI, JENNIFER, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 3424 BRYANT AVE S #2 			03 31 2019						
City MINNEAPOLIS	State MN	Zip Code 55408-4110	Transaction ID : PR2575752853723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. LAMOINE , DAVID, , ,	Date of Receipt								
Mailing Address 6075 LINCOLN DR APT 110			03 / D D / Y Y Y Y Y 2019						
City EDINA	State MN	Zip Code 55436-1649	Transaction ID : PR2575755153723						
FEC ID number of contributing	_	33430-1043	Amount of Each Receipt this Period						
federal political committee.	°								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Director Technology	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	P/R Deduction (\$38.46 Bi-Weekly)						
Other (specify) ▼		230.76							
Full Name of Individual (Last, First, Middle C. JOHNSON, KURT , , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 8351 E REDFIELD RD			03 31 2019						
City SCOTTSDALE	State AZ	Zip Code 85260-3535	Transaction ID : PR2575758353723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		77.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Director Data Science	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 231.00	P/R Deduction (\$38.50 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			230.84						
TOTAL This Period (last page this line number	er only)								

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 103 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
	y information copied from such Reports and Sta for commercial purposes, other than using the							
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	AC)						
A.	Full Name of Individual (Last, First, Middle Initia EKLO, BENJAMIN, , ,	al) or Full C	rganization Name	Date of Receipt				
	Mailing Address 3942 CAMPELLO CURVE	03 / D D / Y Y Y Y 2019						
	City CHASKA	State MN	Zip Code 55318-4639	Transaction ID : PR2575761853723				
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 384.60				
	Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) Fin	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)				
B.	Full Name of Individual (Last, First, Middle Initia CUNNINGHAM, MICHAEL, , ,	ull Name of Individual (Last, First, Middle Initial) or Full Organization Name						
	Mailing Address 50 SOUTH 16TH STREET UNIT 4706	03 / D D / Y Y Y Y 03 31 2019						
	City PHILADELPHIA	State PA	Zip Code 19102-2534	Transaction ID : PR2575767853723 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		384.60				
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) O NA Acct					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)				
с.	Full Name of Individual (Last, First, Middle Initia PAIK, JESSICA, , ,	ull Name of Individual (Last, First, Middle Initial) or Full Organization Name PAIK, JESSICA, , ,						
	Mailing Address 18 BUTTONWOOD LANE EAS	-		03 / D D / Y Y Y Y Y 2019				
	City RUMSON	State NJ	Zip Code 07760-1010	Transaction ID : PR2575783153723				
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 384.60				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ? Clnt Mgmt Svc	Memo Item				
	Receipt For: Primary General Other (specify)		Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)				
s	UBTOTAL of Receipts This Page (optional)			1153.80				
т	OTAL This Period (last page this line number of	nly)	•					

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FOR LINE NUMBER:

PAGE 104 OF

		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	≭ 11a 11b 11c 12						
Any information copied from such Reports and or for commercial purposes, other than using			13 14 15 16 1 verson for the purpose of soliciting contributions e to solicit contributions from such committee						
NAME OF COMMITTEE (In Full)		duress of any pointed commute							
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle BERGDOLL, JENNIFER, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 523 LOS DOLCES ST			03 31 2019						
City LAS VEGAS	State NV	Zip Code 89138-4559	Transaction ID : PR2575793753723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		76.92						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Human Capital Partner	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. JELINEK, TROY, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 16601 S MOUNTAIN STON	NE TRAIL		03 / D D / Y Y Y Y 03 31 2019						
City PHOENIX	State AZ	Zip Code 85048-2080	Transaction ID : PR2575795653723						
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P CInt Relationship	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle MAURER, CARRIE, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2899 EDGEWATER COVE	1		03 / D D / Y Y Y Y 2019						
City WOODBURY	State MN	Zip Code 55125-8705	Transaction ID : PR2575798153723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		384.60						
Name of Employer (for Individual) United HealthCare Services Inc	Occi VP I	upation (for Individual) Mktg	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			538.44						
TOTAL This Period (last page this line numb	er only)								

FOR LINE NUMBER:

PAGE 105 OF

	Use separate schedule(s)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Middle A. WIX, LACOSTA, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 910 MANILA ST			M M / D D / Y Y Y Y 03 31 2019					
City NASHVILLE	State TN	Zip Code 37206-3437	Transaction ID : PR2575800053723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		76.92					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. GALIAN, SANDRA, , ,	Date of Receipt							
Mailing Address 120 SEQUAMS LANE WES	Т		03 / D D / Y Y Y Y Y 2019					
City WEST ISLIP	State NY	Zip Code 11795-4549	Transaction ID : PR2575803253723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	ů – Elektrik – Elektri							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)					
Full Name of Individual (Last, First, Middle LEVINE, CAROL, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 9100 LARKSPUR LANE	Ototo	7. 0.1	03 / D D / Y Y Y Y Y 03 31 2019					
City EDEN PRAIRIE	State MN	Zip Code 55347-2004	Transaction ID : PR2575803353723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional).			538.44					
TOTAL This Period (last page this line number	er only)							

FOR LINE NUMBER:

PAGE 106 OF

	Use separate schedule(s)			(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11b	11c	12	47		
Any information copied from such Reports and or for commercial purposes, other than using t										
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle HJERPE, ADAM, , ,	Initial) or Full O	rganization Name	Date of	of Re	eceipt					
Mailing Address 13932 UTAH AVE S			03	M /	D D 31	/ Y	2019	Y		
City SAVAGE	State MN	Zip Code 55378-2159					30625372 is Period	3		
FEC ID number of contributing federal political committee.	С						384.6	60		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ? Gen Mgmt		Nemc	tem					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. PRICCO, CHRISTOPHER, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name PRICCO, CHRISTOPHER, , ,				eceipt					
Mailing Address 9441 RIVER ROCK DRIVE		03 / D D / Y Y Y Y Y 03 31 2019								
City CHANHASSEN	State MN	Zip Code 55317-2304			-		0845372: is Period	3		
FEC ID number of contributing federal political committee.	FEC ID number of contributing						384.6	60		
Name of Employer (for Individual) Optum Services, Inc	Occ VP		Nemc	tem						
Receipt For:	Aggregate	Year-to-Date V		1						
Other (specify) ▼		1153.80				P/R Deduction (\$192.30 Bi-Weekly)				
Full Name of Individual (Last, First, Middle RUSSELL, LAURIE, , ,	Initial) or Full O	rganization Name	Date of	of Re	eceipt					
Mailing Address 3108 SONIA DRIVE	0	Zin Onde	03		31		2019			
City LAS VEGAS	State NV	Zip Code 89107-3246					31215372 is Period	3		
FEC ID number of contributing federal political committee.	С				,		78.0	00		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) t Affs Dir		Vemo	ttem					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 234.00	P/R De	ducti	on (\$39.	00 Bi-We	ekly)			
SUBTOTAL of Receipts This Page (optional).					, .	,	847.2	20		
TOTAL This Period (last page this line number	er only)									

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PAGE 107 OF

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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		X 11a		1b	11c	12		
	y information copied from such Reports and Sta						se of s				
	for commercial purposes, other than using the n NAME OF COMMITTEE (In Full)	ame and ad	doress of any political com	imittee to	SOUCIT COL	Itributi	ons m	om such	Commit	lee.	
\rangle	UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group	p PAC)						
A.	Full Name of Individual (Last, First, Middle Initia SCHENEMAN, STEPHEN, , ,	l) or Full Or	rganization Name		Date of	Rece	eipt				
	Mailing Address 428 8TH ST				03	/	D D 31	/ Y	y y 2019	Y	
	City HUNTINGTON BEACH	State CA	Zip Code 92648-4629						1345372 is Period		
	FEC ID number of contributing federal political committee.	С						- 7	76.	92	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clin Affordability		Me	emo It	em				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	6	P/R Ded	uction	(\$38.4	6 Bi-We	ekly)		
в.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name SHAPIRO, DAVID, , ,					Rece	eipt				
	Mailing Address 5215 MORGAN AVENUE SOUTH						D D 31	/ Y	2019	Y	
	City MINNEAPOLIS	State MN	Zip Code 55419-1026	-					1425372 is Period	-	
	FEC ID number of contributing federal political committee.	Occupation (for Individual) VP Gen Mgmt			Amount of Each Receipt this Period 384.60						
	Name of Employer (for Individual) United HealthCare Services Inc				Me	emo It	em				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.8	0	P/R Dedu	uction	(\$192.	30 Bi-W	eekly)		
C.	Full Name of Individual (Last, First, Middle Initia SEXTON, ELLEN, , ,	l) or Full Or	rganization Name		Date of	Rece	eipt				
	Mailing Address 14750 CRESTWOOD COURT				03	/	D D D 31	/ Y	2019	Y	
	City ELM GROVE	State WI	Zip Code 53122-1603						32325372 is Period		
	FEC ID number of contributing federal political committee.			,		9	384.	60			
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) Hith Plan CEO			M	emo It	tem				
	Receipt For: Primary General Other (specify)	Aggregate	0	P/R Ded	uction	(\$192	.30 Bi-W	/eekly)			
s	UBTOTAL of Receipts This Page (optional)			►		.,		9	846.	12	
т	OTAL This Period (last page this line number on	ly)		····· Þ				-			

FOR LINE NUMBER:

PAGE 108 OF

		Use separate schedule(s)	(check only one)					
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports and or for commercial purposes, other than using	I Statements mathematic mathematical statements and a	L ay not be sold or used by any p Iddress of any political committe	person for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Middle A. MCNATT, RICHARD, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 1120 KENSINGTON COUF	RT		03 31 2019					
City ALPHARETTA	State GA	Zip Code 30022-6274	Transaction ID : PR2575824953723					
FEC ID number of contributing			Amount of Each Receipt this Period					
federal political committee.	C		76.92					
Name of Employer (for Individual)		upation (for Individual)	Memo Item					
United HealthCare Services Inc Receipt For:		SIs Ops	_					
Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$38.46 Bi-Weekly)					
Other (specify)		230.76						
Full Name of Individual (Last, First, Middle B. KAUFMAN, PHILIP, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 1580 BOHNS POINT ROAL)		03 31 2019					
City	State	Zip Code	Transaction ID : PR2575829853723					
WAYZATA	MN	55391-9309	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼						
Primary General Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. VERITY, CLAIRE, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 3220 NE 94TH STREET			03 31 2019					
City SEATTLE	State WA	Zip Code 98115-3656	Transaction ID : PR2575830253723					
FEC ID number of contributing		30113-3030	Amount of Each Receipt this Period					
federal political committee.	C		434.78					
Name of Employer (for Individual)		upation (for Individual)	Memo Item					
United HealthCare Services Inc Receipt For:		Plan CEO Year-to-Date ▼						
Primary General Other (specify)		652.17	P/R Deduction (\$217.39 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional).			896.30					
TOTAL This Period (last page this line number	er only)	······						

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 109 OF

	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	≭ 11a 11b 11c 12						
			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middl A. HUNTLEY, MICHELLE, , ,	le Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 19503 HARMONY AVE			03 31 Y Y Y Y Y 2019						
City ROGERS	State MN	Zip Code 55374-4843	Transaction ID : PR2575832053723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) uty Gen Counsel	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middl B. JERDE, MARY, , ,	le Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 304 EAST VERA LANE	ailing Address 304 EAST VERA LANE								
City TEMPE	State AZ	Zip Code 85284-4036	Transaction ID : PR2575837453723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middl C. BEESON, MARY JANE, , ,	le Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 204 BLUE INDIGO CT	1		03 / D D / Y Y Y Y 2019						
City PONTE VEDRA BEACH	State FL	Zip Code 32082-6543	Transaction ID : PR2575839553723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		192.30						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optiona	al)		653.82						
TOTAL This Period (last page this line nun	nber only)								

FOR LINE NUMBER:

PAGE 110 OF

		Use separate schedule(s)	(check only one)
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
UnitedHealth Group Incorporat	ted PAC (I	JnitedHealth Group PA	AC)
Full Name of Individual (Last, First, Middle Ir BOROCH, BLAIR, , ,	nitial) or Full C	rganization Name	Date of Receipt
Mailing Address 800 BELFRY DRIVE			03 / D D / Y Y Y Y 2019
City BLUE BELL	State PA	Zip Code 19422-1210	Transaction ID : PR2575849953723 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		80.00
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Health Plan Operations	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P/R Deduction (\$40.00 Bi-Weekly)
Full Name of Individual (Last, First, Middle Ir GOLDEN, WILLIAM, , ,	nitial) or Full C	rganization Name	Date of Receipt
Mailing Address 106 SOUND COURT			03 / D D / Y Y Y Y Y 2019
City	State	Zip Code	Transaction ID : PR2575859353723
NORTHPORT	NY	11768-3527	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		192.30
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) D E&I Regions & Growth	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)
Full Name of Individual (Last, First, Middle Ir C. COTTINGTON, NYLE BRENT, ,		rganization Name	Date of Receipt
Mailing Address 15050 47TH STREET NE			03 / D D / Y Y Y Y 2019
City SAINT MICHAEL	State MN	Zip Code 55376-1613	Transaction ID : PR2575865353723 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		115.38
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Acctng	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 346.14	P/R Deduction (\$57.69 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)			387.68
TOTAL This Period (last page this line number	r only)		

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

FOR LINE NUMBER:

PAGE 111 OF

			Use separate schedule(s)	(check on	ly on	e)				
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a		11b	11c	12		
	y information copied from such Reports and Sta for commercial purposes, other than using the r				purp					
$\overline{\langle}$	NAME OF COMMITTEE (In Full)									
\rangle	UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	C)						
Α.	Full Name of Individual (Last, First, Middle Initia ROSS, CHRISTY, , ,	al) or Full O	rganization Name	Date c	of Red	ceipt				
	Mailing Address 211 JIM CANNON RD			M N 03	1 /	D D D 31	/ Y	2019	Y	
	City VAN ALSTYNE	State TX	Zip Code 75495-2803			on ID : Pl Each Rec		37335372: is Period	3	
	FEC ID number of contributing federal political committee.	С				y	-	77.(00	
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP (upation (for Individual) Ops		1emo	Item				
	Receipt For: Primary General Other (specify) ▼	Year-to-Date ▼ 231.00	P/R Dec	ductio	n (\$38.50) Bi-We	ekly)			
в.	Full Name of Individual (Last, First, Middle Initia PEZHMAN, PAYMAN, , ,	al) or Full O	rganization Name	Date c	of Red	ceipt				
	Mailing Address 3016 GROVELAND SCHOOL R					D D D 31	/ Y	2019	Y	
	City WAYZATA	State MN	Zip Code 55391-2816					83553723	3	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 384.60						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment Gen Counsel		lemo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Dec	ductio	n (\$192.3	30 Bi-W	'eekly)		
С.	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name	Date c	of Red	ceipt				
	Mailing Address 405 MEADOW LANE			03		D D D 31		2019		
	City BENSON	State MN	Zip Code 56215-1033			-		38505372 is Period	3	
	FEC ID number of contributing federal political committee.	С					J	194.0	00	
	Name of Employer (for Individual) Optum Services, Inc	Occu VP I	upation (for Individual) T		Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 582.00	P/R Dec	ductio	on (\$97.00	0 Bi-We	ekly)		
s	UBTOTAL of Receipts This Page (optional)						4	655.6	60	
т	OTAL This Period (last page this line number or	nly)				,	-			

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 112 OF

	MIZED RECEIPTS			or each category of the Detailed Summary Page		x	11a		11	b	11c		12	
				, ,			13		14		15		16	1
or fo	information copied from such Reports and Stat or commercial purposes, other than using the n													
	IAME OF COMMITTEE (In Full)				\sim									
/ '	JnitedHealth Group Incorporated	PAC (Un	ItedHealth Group PA	(C)									
	ull Name of Individual (Last, First, Middle Initia MARGHERIO, MICHAEL, , ,	l) or Full O		Date of Receipt										
Ν	lailing Address 6412 JEFFERSON STREET				E	03	/		31	/		ү ү 2019	Y	
		State MO		Zip Code			Trans	acti	ion	ID :	PR257	591	635372	3
_	(ANSAS CITY	MO		64113-1542	_	A	mount	t of	Ea	ch Re	eceipt	this	Period	
	EC ID number of contributing ederal political committee.	С							-		1.4		76.	92
	lame of Employer (for Individual) Inited HealthCare Services Inc		•	tion (for Individual) VP SIs Acct Mgt			M	emo) Ite	em				
_	loopint For:			ar-to-Date V										
	Primary General Other (specify) ▼	Aggregate	100	230.76	I.	P/F	R Ded	uctio	on ((\$38.4	46 Bi-\	Veel	kly)	
	ull Name of Individual (Last, First, Middle Initia ZITZER, CHRISTOPHER, , ,	l) or Full O		Date of Receipt										
N	lailing Address 2848 FRANCE AVE S					Γ	м м 03	/		31	1		y y 2019	Y
C	ity	State Zip Code						acti	ion	ID : I	PR257	593	335372	3
	ST LOUIS PARK	MN		55416-4204		A	mount	t of	Ea	ch Ro	eceipt	this	Period	
	FEC ID number of contributing federal political committee.							76.92						
	lame of Employer (for Individual) nited HealthCare Services Inc	Occupation (for Individual) VP Compli							Memo Item					
F	eceipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.76						P/R Deduction (\$38.46 Bi-Weekly)						
	ull Name of Individual (Last, First, Middle Initia MATTERA, RICHARD, , ,	l) or Full O	Drga	nization Name		Date of Receipt								
N	lailing Address 483 HIGHCROFT ROAD				03 31 2019					Y				
	ity	State		Zip Code		_	Trans	sacti	ion	ID :	PR257	593	845372	23
_	NAYZATA	MN		55391-1548	_	A	mount	t of	Ea	ch Re	eceipt	this	Period	
	EC ID number of contributing deral political committee.	С							,		. ,		384.	60
N	lame of Employer (for Individual)	Occi	upa	tion (for Individual)		1	М	emo	o It∉	əm				
(Optum Services, Inc	Mkt Group Gen Counsel												
	Primary General Other (specify)	Aggregate Year-to-Date ▼ 1153.80					P/R Deduction (\$192.30 Bi-Weekly)							
SU	BTOTAL of Receipts This Page (optional)			•	I	ļ			,	+	. ,	_	538.	44
то	TAL This Period (last page this line number on	ly)		••••••		L			-	_		_		

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PAGE 113 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
or for commercial purposes, other than using			erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middl A. RILEY, FELICITY, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 2315 BEVERLY ROAD			03 / D D / Y Y Y Y Y 2019						
City SAINT PAUL	State MN	Zip Code 55104-5003	Transaction ID : PR2575943353723						
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period						
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) Tax	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)						
Full Name of Individual (Last, First, Middl B. NEFF, WAYNE, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1158 DESERT ROCK DR			03 / D D / Y Y Y Y 2019						
City REXBURG	State ID	Zip Code 83440-3697	Transaction ID : PR2575961853723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Sales	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middl C. SALVO, GIANCARLO, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1027 SW 149 LANE			03 / D D / Y Y Y Y Y 2019						
City SUNRISE	State FL	Zip Code 33326-1957	Transaction ID : PR2575964953723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) R Reg SIs Dir	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optiona	l)		346.14						
TOTAL This Period (last page this line num	ber only)								

SCHEDULE A (FEC Form 3X) DEAEIDTA

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FOR LINE NUMBER:

PAGE 114 OF

	-	Use separate schedule(s)	(check c	only o	ne)	L							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	۱ <u> </u>	11b	11c	12						
Any information copied from such Reports and	d Statements ma	ay not be sold or used by any p	erson for th	ne pur	14 pose of	15 soliciting	16 contribut	17 ions					
or for commercial purposes, other than using													
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle SIEBERT, GREGORY, , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt								
Mailing Address 46 VIA BELLEZA			M 03		31) / Y	ү ү 2019	Y					
City SAN CLEMENTE	State CA	Zip Code 92673-6910					97965372 is Period	3					
FEC ID number of contributing federal political committee.	C				-g-		200.0	00					
Name of Employer (for Individual) United HealthCare Services Inc	United HealthCare Services Inc VP Ntwk Contrctng				o Item								
					ion (\$100	0.00 Bi-W	/eekly)						
Full Name of Individual (Last, First, Middle B. RICHARDS, ALISON, , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt								
Mailing Address 257 WEST GRANTLEY	Mailing Address 257 WEST GRANTLEY					03 / D D / Y Y Y Y 03 31 2019							
City ELMHURST	State IL	Zip Code 60126-2237					8795372	3					
FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period 384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P NA Strat Initiv		Memo	o Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle SCHULTZ, STACY, , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt								
Mailing Address 4012 S XERXES AVENUE	1		0:	3	31		2019						
City MINNEAPOLIS	State MN	Zip Code 55410-1146					99095372 is Period	3					
FEC ID number of contributing federal political committee.	ederal political committee. Iame of Employer (for Individual) Optum Services, Inc Occupation (for Individual) Deputy Gen Counsel				y 1		76.9	92					
Name of Employer (for Individual) Optum Services, Inc					o Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R D	educt	ion (\$38	.46 Bi-We	eekly)						
SUBTOTAL of Receipts This Page (optional).					, .	. ,	661.5	52					
TOTAL This Period (last page this line numb	er only)												

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FOR LINE NUMBER:

PAGE 115 OF

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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		1 1a		11b	11c	12	/
	y information copied from such Reports and Sta for commercial purposes, other than using the n									
	NAME OF COMMITTEE (In Full)		duress of any pointear committee	10 30					Commu	
\rangle	UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	C)						
A.	Full Name of Individual (Last, First, Middle Initia CHAMBUNDABONGSE, KUNJORN, , ,	l) or Full O	rganization Name		Date of	Re	ceipt			
	Mailing Address 9128 WOODLAND DRIVE				м м 03	1	31) / Y	y y 2019	Y
	City MINNETRISTA	State MN	Zip Code 55375-4515	_					00025372 nis Period	3
	FEC ID number of contributing federal political committee.	С						1.95	76.	92
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) External Affs		Me	emo	ltem			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	F	P/R Dedu	uctio	on (\$38	.46 Bi-We	eekly)	
в.	Full Name of Individual (Last, First, Middle Initia BRIGGS, MARC, , ,	l) or Full O	rganization Name		Date of	Re	ceipt			
	Mailing Address 13534 TUSCALEE HILL CIR				03	1	31) / Y	ү ү 2019	Y
	City DRAPER	State UT	Zip Code 84020-5653						00165372	3
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period						
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Hlth	_	Me	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
c.	Full Name of Individual (Last, First, Middle Initia SANN, DAVID, , ,	l) or Full O	rganization Name		Date of	Re	ceipt			
	Mailing Address 8326 ELKO DRIVE				03	/	31		2019	Y
	City ELLICOTT CITY	State MD	Zip Code 21043-6913						02645372 nis Period	3
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .	. ,	92.	30
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Aed Clin Ops	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 276.90	F	P/R Dedu	uctio	on (\$46	.15 Bi-We	eekly)	
s	UBTOTAL of Receipts This Page (optional)		•				, .	. ,	553.8	32
т	OTAL This Period (last page this line number or	ıly)	••••••	-			-			

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FOR LINE NUMBER:

PAGE 116 OF

		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middle I A. ADAMS, GAYLE, , ,	nitial) or Full O	rganization Name	Date of Receipt								
Mailing Address 39 CANYON RIDGE DRIVE			03 31 2019								
City SANDIA PARK	State NM	Zip Code 87047-8509	Transaction ID : PR2576040353723 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		192.30								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Strategic Acct Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I B. BYRNES, CHRISTOPHER, , ,	nitial) or Full O	rganization Name	Date of Receipt								
Mailing Address 3920 GLENWOOD STREET		03 / D D / Y Y Y Y Y 2019									
City DULUTH	State MN	Zip Code 55804-1403	Transaction ID : PR2576042853723 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Ops	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I C. KANDALAFT, KEVIN, , ,	nitial) or Full O	rganization Name	Date of Receipt								
Mailing Address 4189 WINDSOR POINT PL			03 / D D / Y Y Y Y Y 2019								
City EL DORADO HILLS	State CA	Zip Code 95762-3797	Transaction ID : PR2576043653723 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		192.30								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)	·		769.20								
TOTAL This Period (last page this line numbe	er only)										

FOR LINE NUMBER:

PAGE 117 OF

		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorporat	ted PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle Ir A. MONICAL, KENT, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 9795 E PIEDRA DRIVE			03 31 Y Y Y Y Y 2019						
City SCOTTSDALE	State AZ	Zip Code 85255-9231	Transaction ID : PR2576051353723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P, Medicare STARS	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle Ir B. HUANG, JAMES, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 6838 IDLEWOOD WAY			03 / D D / Y Y Y Y Y 2019						
	State MN	Zip Code	Transaction ID : PR2576059953723						
EDEN PRAIRIE	IVIIN	55346-3519	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For:	Aggregate	Year-to-Date V	1						
Other (specify) ▼		230.76	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle Ir C. REX, JOHN, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 503 HARRINGTON ROAD			03 / D D / Y Y Y Y Y 03 31 2019						
City WAYZATA	State MN	Zip Code 55391-1512	Transaction ID : PR2576060053723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) G CFO	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			846.12						
TOTAL This Period (last page this line number	r only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 118 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than us		ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (UnitedHealth Group	PAC)
Full Name of Individual (Last, First, Mid MCEWAN, JOSHUA, , ,	dle Initial) or Full Organization Name	Date of Receipt
Mailing Address 4711 WEST 28TH STR		03 / D D / Y Y Y Y 2019
City SAINT LOUIS PARK	State Zip Code MN 55416-1927	Transaction ID : PR2576085753723
	1010 55416-1927	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	384.60
Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) VP Tax	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1153.80	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Mid B. DUDA, MICHAEL, , ,	dle Initial) or Full Organization Name	Date of Receipt
Mailing Address 5208 RICHWOOD DRIV	/E	03 31 2019
City EDINA	StateZip CodeMN55436-2322	Transaction ID : PR2576089953723 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	192.30
Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) VP Fin	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)
Full Name of Individual (Last, First, Mid C. JOHNSON, DARRIN, , ,	dle Initial) or Full Organization Name	Date of Receipt
Mailing Address 417 ROSENBERGER I	DRIVE	03 31 YYYY 03 31 2019
City	State Zip Code	Transaction ID : PR2576103753723
MIDDLETOWN	DE 19709-9916	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	384.60
Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) VP Ops	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)
SUBTOTAL of Receipts This Page (option	nal)) 961.50
TOTAL This Period (last page this line nu	imber only)	

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 119 OF

171			Use separate schedule(s)	(check only one)						
111			for each category of the Detailed Summary Page	X 11a	11b	11c 15	12	17		
	y information copied from such Reports and Sta for commercial purposes, other than using the			erson for the	purpose of s	oliciting	contrib	outions		
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	.C)						
A.	Full Name of Individual (Last, First, Middle Initia DIAMOND, TIFFANY, , ,	al) or Full O	rganization Name	Date of	f Receipt					
	Mailing Address 5 HARVEY DRIVE			М М 03	/ D D 31	/ Y	ү ү 2019	Y		
	City GOFFSTOWN	State NH	Zip Code 03045-2315		action ID : P					
	FEC ID number of contributing federal political committee.	С						6.92		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	M	emo Item					
	Receipt For: Primary General Other (specify) ▼	Year-to-Date ▼ 230.76	P/R Ded	uction (\$38.4	6 Bi-We	ekly)				
в.	Full Name of Individual (Last, First, Middle Initia MELNICK, BRADLEY, , ,	al) or Full O	rganization Name	Date of	f Receipt					
	Mailing Address 5185 KELSEY TERRACE			03 / D D / Y Y Y Y 03						
	City EDINA	State MN	Zip Code 55436-1174		action ID : P					
	FEC ID number of contributing federal political committee.	С	33430-1174	Amount of Each Receipt this Period 384.60						
	Name of Employer (for Individual)		upation (for Individual)	Memo Item						
	United HealthCare Services Inc	VP	Ops							
	Receipt For:	Aggregate	Year-to-Date ▼		·: (\$100	00 D. 14				
	Other (specify) ▼		, 1153.80	P/R Ded	uction (\$192.	30 BI-W	eekiy)			
с.	Full Name of Individual (Last, First, Middle Initia WEDIN, JEFF, , ,	al) or Full O	rganization Name	Date of	f Receipt					
	Mailing Address 115 EAGLE COVE			М _ М 03	/ D D 31	/ Y	2019	Y		
	City	State MS	Zip Code		action ID : F					
	MADISON FEC ID number of contributing	C	39110-6629	Amount	t of Each Re	ceipt th		d 3.84		
	federal political committee.	U			y y	9				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	М	emo Item					
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Total			Year-to-Date ▼ 461.52	P/R Ded	luction (\$76.9	92 Bi-We	ekly)			
s	UBTOTAL of Receipts This Page (optional)						615	5.36		
т	OTAL This Period (last page this line number o	nly)				-				

FOR LINE NUMBER:

PAGE 120 OF

Use separate schedule(s)		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using t	Statements make he name and a	ay not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle A. BOADO, ANDREA, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 14924 PONDVIEW CIRCLE	: 		03 / D D / Y Y Y Y 2019						
City WAYZATA	State MN	Zip Code 55391-2249	Transaction ID : PR2576144653723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Deputy Gen Counsel	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. NELSON, STEVEN, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 640 LOCUST HILLS DRIVE			03 31 / Y Y Y Y 03 31 2019						
City WAYZATA	State MN	Zip Code 55391-1973	Transaction ID : PR2576144853723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P UHC CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. FRIDNER, JOHN , , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 782 PENFIELD DR	01-1-	7.0.4	03 / D D / Y Y Y Y 2019						
City CAROL STREAM	State IL	Zip Code 60188-4738	Transaction ID : PR2576147553723 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		78.00						
Name of Employer (for Individual) United HealthCare Services Inc	Occ SB I	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 234.00	P/R Deduction (\$39.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			847.20						
TOTAL This Period (last page this line number	er only)								

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PAGE 121 OF

ıт.	EMIZED RECEIPTS		Use separate schedule(s)	(ch	eck only	y or	ne)	L						
11			for each category of the Detailed Summary Page		1 1a		11b	11c	12					
	y information copied from such Reports and S for commercial purposes, other than using the													
	NAME OF COMMITTEE (In Full)			5 10 30				Ioni Suci	r commu					
	UnitedHealth Group Incorporate	ed PAC (l	UnitedHealth Group PA	AC)	.C)									
Α.	Full Name of Individual (Last, First, Middle Init PAUNOVICH, VUKASIN, , ,	ial) or Full O	Organization Name		Date of	Re	ceipt							
	Mailing Address 1209 KEITH RD				^M 03	1	D D D 31	/ Y	2019	Y				
	City WAKE FOREST	State NC	Zip Code 27587-7301	Transaction ID : PR2576306753723 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С			<u> </u>				384.6	30				
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ef Tech Off		Me	emo	tem							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80]	P/R Ded	uctio	on (\$192	2.30 Bi-W	/eekly)					
в.	Full Name of Individual (Last, First, Middle Init BENSON, JEAN, , ,	ial) or Full O	Organization Name	Date of Receipt										
	Mailing Address 14951 HIGHLAND COURT NE		M M / D / Y											
		State MN	Zip Code 55372-4109							3				
		IVIIN	_	Amount	: of	Each R	eceipt th	is Period						
	FEC ID number of contributing federal political committee.	C		384.60										
	Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) Fin	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$192.30 Bi-Weekly)											
с.	Full Name of Individual (Last, First, Middle Init LONG, PAUL, , ,	ial) or Full O	Organization Name		Date of	Re	ceipt							
	Mailing Address 12352 PRINCETON AVE	1			03 ^M	1	D 31	/ Y	2019	Y				
	City EDEN PRAIRIE	State MN	Zip Code 55347-1936						73495372 is Period	3				
	FEC ID number of contributing federal political committee.	С			Ē		y :	. <u>,</u>	76.9	92				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		M	emc	tem							
	Receipt For: Primary General Other (specify)	Aggregate]	P/R Deduction (\$38.46 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			•			,	, , , , , , , , , , , , , , , , , , ,	846.1	2				
т	OTAL This Period (last page this line number of	only)		•				-						

Use separate schedule(s)

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PAGE 122 OF

		Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17										
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P	AC)										
Full Name of Individual (Last, First, Middle A. EGELAND, DANIEL, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 2659 E LAKE OF THE ISLE	S PKWY		Model Joseph Year Year										
City MINNEAPOLIS	State MN	Zip Code 55408-1052											
FEC ID number of contributing federal political committee.	С		384.60										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus Dev	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle B. ASNER, BARTLEY, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 25 OFFSHORE			03 / D D / Y Y Y Y 2019										
City NEWPORT BEACH	State CA	Zip Code 92657-2162	Transaction ID : PR2578819453723 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		384.60										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) O Med Grp Physn	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle DUFFEY, KRISTY, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 42095 N 109TH PLACE	01-1-		M M / D D / Y Y Y Y 31 2019										
City SCOTTSDALE	State AZ	Zip Code 85262-3293	Transaction ID : PR2578823253723 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		384.60										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) of Clin Off	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional).			1153.80										
TOTAL This Period (last page this line number	er only)												

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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PAGE 123 OF

			Detailed Summa		×	11a	\square	111	-	11c	12					
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	for commercial purposes, other than using the na															
\backslash	NAME OF COMMITTEE (In Full)		الالمحالية مالا		\sim											
/	UnitedHealth Group Incorporated				(U)											
Α.	Full Name of Individual (Last, First, Middle Initial) CIAVOLA, LAURA, , ,	or Full O	rganization Name			Date of Receipt										
	Mailing Address 6958 DELOACH COURT			M M / D D / Y Y Y Y Y												
	City	State	Zin Codo	03 31 2019												
	City FRISCO	State TX	Zip Code 75034-7436	Transaction ID : PR2578824353723 Amount of Each Receipt this Period												
	FEC ID number of contributing					anount	01					_				
	federal political committee.	С				_		7		-9-	384.	60				
	Name of Employer (for Individual)		upation (for Individua	al)	11	Me	emo	o Ite	em							
	United HealthCare Services Inc	Bus	Segment COO													
	Receipt For: A	Aggregate	Year-to-Date V			ם <u>ה</u> י		o '	(¢400	 م	loolder					
	Other (specify) V			1153.80	P/	r Dedi	uctic	on (φ192.	30 Bi-V	veeкiy)					
			7	- 48	<u> </u>											
B	Full Name of Individual (Last, First, Middle Initial) BUSBEE, NATHANAEL, , ,	or Full O	rganization Name		Date of Receipt											
	Mailing Address 611 ORPINGTON RD															
			03 31 2019													
		State MD	Zip Code		Transaction ID : PR2578826753723											
	BALTIMORE		21229-2128		Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С			76.92											
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individu Bus Process	al)		Me	emo	o Ite	em							
		Aggregate	Year-to-Date 🔻													
	Primary General Other (specify) V		A A	230.76	P/I	R Dedu	uctio	on (S	\$38.4	6 Bi-We	eekly)					
			, ,													
с.	Full Name of Individual (Last, First, Middle Initial) MILLER, TRACI, , ,	or Full O	rganization Name			Date of	Ree	•ceip	pt							
	Mailing Address 729 PINE TRAIL				ſ	м м 03	/	D	31	/ Y	2019	Y				
	City	State	Zip Code			Trans	acti	ion	ID : F	R2578	82995372	23				
	ARNOLD	MD	21012-1628		A	mount	of	Eac	ch Re	ceipt th	nis Period					
	FEC ID number of contributing federal political committee.	С					_	y		y	115.	38				
	Name of Employer (for Individual)	Occu	upation (for Individua	al)		Me	emo	o Ite	əm							
	Optum Services, Inc	VP N	led Clin Ops		_ `											
	Receipt For: A	Aggregate	Year-to-Date 🔻						/ ^ ~	0.0.147	- -					
	Other (specify)		9F I I 9F I		P/R Deduction (\$57.69 Bi-Weekly)											
s	UBTOTAL of Receipts This Page (optional)				[_				576.	90				
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Т	OTAL This Period (last page this line number only	y)		••••••	- L		_	-	_							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 124 OF

		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports and or for commercial purposes, other than using th			person for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorporation	ted PAC (l	JnitedHealth Group P.	AC)									
Full Name of Individual (Last, First, Middle In	nitial) or Full O	rganization Name										
A. FARMER, RACHEL, , ,			Date of Receipt									
Mailing Address 1846 SOUTH COLUMBINE	STREET		M M / D J Y									
City	State	Zip Code										
BATON ROUGE	LA	70808-5227	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		115.38									
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item									
United HealthCare Services Inc	Dir	Govt Affs										
Receipt For:	Aggregate	Year-to-Date 🔻										
Other (specify) ▼		346.14	P/R Deduction (\$57.69 Bi-Weekly)									
			1									
Full Name of Individual (Last, First, Middle I	nitial) or Full O	rganization Name										
B. LONIGRO, ANTHONY, , , Mailing Address 3186 WEST CANYON AVE			Date of Receipt									
Maining Address 3166 WEST CANTON AVE			03 31 2019									
City	State	Zip Code	Transaction ID : PR2595225853723									
SAN DIEGO	CA	92123-5426	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		76.92									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Primary General	33 3 3 4 4		P/R Deduction (\$38.46 Bi-Weekly)									
Other (specify) v		230.76										
Full Name of Individual (Last, First, Middle In C. SNYDER, MARY, , ,	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 1075 BOSTON POST RD			M = M / D = D / Y = Y = Y = Y									
			03 31 2019									
City MADISON	State CT	Zip Code 06443-3363	Transaction ID : PR2595229353723									
FEC ID number of contributing			Amount of Each Receipt this Period									
federal political committee.	C		384.60									
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item									
United HealthCare Services Inc	Hlth	Plan CEO										
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify)		1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			576.90									
TOTAL This Period (last page this line numbe	r only)											

FOR LINE NUMBER:

PAGE 125 OF

		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 11									
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle I SHORT, MARIANNE, , ,	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 2215 SUMMIT AVENUE			M M M J D D J 2019 Transaction ID : PR2601133553723 Amount of Each Receipt this Period									
City SAINT PAUL	State MN	Zip Code 55105-1002										
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ? Gen Counsel	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle I PERERA, SUSAN, , ,	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 1201 UNITY AVE N			03 31 / Y Y Y Y 03 31 2019									
City GOLDEN VALLEY	State MN	Zip Code 55422-4735	Transaction ID : PR2601168853723 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		76.92									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) buty Gen Counsel	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Primary General Other (specify) ▼		230.76	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middle I C. RODRIGUEZ, ROGER, , ,	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 4825 DAVIS ROAD	I		03 / D D / Y Y Y Y Y 2019									
City MIAMI	State FL	Zip Code 33143-6141	Transaction ID : PR2601176853723 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			846.12									
TOTAL This Period (last page this line numbe	r only)											

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 126 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
or for commercial purposes, other than using	nd Statements may not be sold or used by any point of the name and address of any political committee								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	rated PAC (UnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle MCBEATH, ROBERT, , ,	e Initial) or Full Organization Name	Date of Receipt							
Mailing Address 2537 RED ARROW DRIV		03 / D D / Y Y Y Y 2019							
City LAS VEGAS	State Zip Code NV 89135-1628	Transaction ID : PR2605708953723							
	09133-1020	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C	384.60							
Name of Employer (for Individual) Optum Services, Inc	Occupation (for Individual) CEO Med Grp Physn	Memo Item							
Receipt For:	Aggregate Year-to-Date ▼								
Primary General Other (specify) ▼	1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. HUTCHINS, LEIGH, , ,	e Initial) or Full Organization Name	Date of Receipt							
Mailing Address 16786 RAINY VALE AVE		M M / D / Y							
City	State Zip Code	Transaction ID : PR2605717853723							
RIVERSIDE	CA 92503-6535	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C	76.92							
Name of Employer (for Individual) Primecare Medical Network, Inc	Occupation (for Individual) CEO Med Grp Non Physn	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. DAVIS, KELLY, , ,	e Initial) or Full Organization Name	Date of Receipt							
Mailing Address 905 N LEBANON ST		03 / D D / Y Y Y Y 03 31 2019							
City	State Zip Code	Transaction ID : PR2605734253723							
ARLINGTON	VA 22205-1433	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C	192.30							
Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) Govt Affs Dir	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)							
)ber only)	653.82							

FOR LINE NUMBER:

PAGE 127 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)									
I LIVILLED RECEIPIO		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
			erson for the purpose of soliciting contributions to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (JnitedHealth Group P/	4C)									
Full Name of Individual (Last, First, Middle A. MALONE, TRACY, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 900 S 22ND ST			M = M / D = D / Y = Y = Y Y 03 31 2019									
City ARLINGTON	State VA	Zip Code 22202-2625	Transaction ID : PR2605736953723 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P External Affs	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle B. WEISSEL, MICHAEL, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 99 HAGEN ROAD			03 / D D / Y Y Y Y Y 2019									
City NEWTON	State MA	Zip Code 02459-2731	Transaction ID : PR2606842953723 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) um Exec	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle MATECZUN, JOHN, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 1908 HARBOURSIDE DR UNIT 403	IVE	Zip Code	03 31 2019									
City LONGBOAT KEY	FL	34228-4207	Transaction ID : PR2606845153723 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) : M&V	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			1153.80									
TOTAL This Period (last page this line num	per only)											

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 128 OF

	EMIZED RECEIPTS			for each category of the Detailed Summary Page		_	11a 13		11 14	1b 4		11c 15		2	17
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the n	ements ma ame and a	ay n addre	not be sold or used by any pe ess of any political committee	erson to s	fo	r the	pur ntrib	pos	se of	sc fror	oliciting	cont	ributi	ons
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	Uni	itedHealth Group PA	C)										
A.	Full Name of Individual (Last, First, Middle Initial FICKER, MARK, , ,) or Full C	Drgai	nization Name		D	ate of	f Re	ece	ipt					
	Mailing Address 173 LAURELWOOD DRIVE	1				03 / D D / Y Y Y Y 03 31 2019									
	City NOVATO	State CA		Zip Code 94949-8427	Transaction ID : PR2607806753723										
	FEC ID number of contributing federal political committee.	C			Amount of Each Receipt this Period										
	Name of Employer (for Individual) Optum Services, Inc		cupat Ops	tion (for Individual)		l	М	emc	o It	em					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 230.76		P/F	R Ded	uctio	on	(\$38	.46	8 Bi-We	ekly)		
В.	Full Name of Individual (Last, First, Middle Initial LANDO, LISA, , ,) or Full C	Orgai	nization Name		D	ate of	f Re	ece	ipt					
	Mailing Address 60 PINEAPPLE STREET APT 3J					03 / D D / Y Y Y Y Y 2019									
	City BROOKLYN	State NY		Zip Code 11201-6839								R26080 ceipt thi			
	FEC ID number of contributing federal political committee.	С		76.92											
	Name of Employer (for Individual) United HealthCare Services Inc			tion (for Individual) Mgmt		l	M	emc	o It	em					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	F	P/R Deduction (\$38.46 Bi-Weekly)										
С.	Full Name of Individual (Last, First, Middle Initial FLYNN, VIRGINIA, , ,) or Full C	Drgai	nization Name		D	ate of	f Re	ece	ipt					
	Mailing Address 30 VAN TERRACE	1		1		L	03 ^M	1	L	31			201		
	City SPARKILL	State NY		Zip Code 10976-1406	-				-			R26080			8
	FEC ID number of contributing federal political committee.	С					noun		⊑ <i>c</i>		iec	eipt thi	s re	76.9	2
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SCHEDULE A (FEC Form 3X) DEAEIDTA

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PAGE 129 OF

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	11b	11c	12	<i>,</i>						
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UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P/	C)										
Full Name of Individual (Last, First, Middle FERGUSON, SANDRA, , ,		rganization Name	Date of Receipt										
Mailing Address 710 SOUTH SHERATON D			03	/ D D 31	/ Y	ү ү 2019	Y						
City AKRON	State OH	Zip Code 44319-1918	Transaction ID : PR2608061953723 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С				-9-	76.9	2						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Med Clin Ops	Mei	mo Item									
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Mailing Address 18710 34TH AVENUE NOR	1		M = M / D = D / Y = Y = Y = Y Y 03 31 2019 2019 Transaction ID : PR2609811353723 2019 2019										
City PLYMOUTH	State MN	Zip Code 55447-1000					1						
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 384.60										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Ops	Memo Item										
Receipt For:		Year-to-Date ▼											
Other (specify) ▼		1153.80	P/R Deduc	ction (\$192.3	30 Bi-W	eekly)							
Full Name of Individual (Last, First, Middle WRIGHT, NORMAN, , ,	Initial) or Full C	rganization Name	Date of	Receipt									
Mailing Address 5205 KELSEY TERRACE	a : :		03	/ D D 31		2019							
City EDINA	State MN	Zip Code 55436-1172		of Each Red			3						
FEC ID number of contributing federal political committee.	С			, .		384.6	0						
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SCHEDULE A (FEC Form 3X) DEAEIDTA

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PAGE 130 OF

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or	for commercial purposes, other than using the	name and a	ddress of any political committee	e to s	solicit co	n committ	ee.								
\backslash	NAME OF COMMITTEE (In Full)		Inited Lealth Crown D/												
	UnitedHealth Group Incorporate														
/	Full Name of Individual (Last, First, Middle Init	tial) or Full O	rganization Name												
Α.	PATEL, KETAN, , ,			_	Date of	f Re	eceipt								
	Mailing Address 4682 WARNER AVE #C304				M M 03	1	31) / Y	2019	Y					
	City	State	Zip Code			act		PR26125	52335372	3					
	HUNTINGTON BEACH	CA	92649-3990		Amount	t of	Each R	leceipt th	is Period						
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	federal political committee.	U				-	-	-	10.						
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item											
	Optum Services, Inc	Dir I	Pharm Ops												
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υ.	Mailing Address 93 CONSERVATION ROAD			M M / D D / Y Y Y Y Y											
					03		31		2019						
	City	State	Zip Code						2855372	3					
	SUFFIELD	СТ	06078-2442	_	Amount	t of	Each R	leceipt th	is Period						
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	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Tech Proj-Prgm Mgmt	Memo Item											
	Receipt For:	Aggregate	Year-to-Date ▼												
	Primary General			114	P/R Ded	ucti	on (\$38.	46 Bi-We	ekly)						
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C.	Full Name of Individual (Last, First, Middle Inite BAKER, MICHAEL, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt								
	Mailing Address 2383 HIGHOVER TRAIL				M M	/	D . D) / Y	YY	Y					
		Otata	Zin Oada		03	Ι.	31		2019						
	City CHANHASSEN	State MN	Zip Code 55317-4744				-		53055372 is Period	3					
	FEC ID number of contributing														
	federal political committee.	C					y	9	384.0	50					
	Name of Employer (for Individual)	Occ	upation (for Individual)		М	emo	ttem								
	United HealthCare Services Inc		P Ops												
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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PAGE 131 OF

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	y information copied from such Reports and Sta for commercial purposes, other than using the r															
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (I	JnitedHealt	th Group PA	C)											
Α.	Full Name of Individual (Last, First, Middle Initia CORCORAN, SUSAN, , ,	al) or Full C	rganization Narr	16	C	ate of	Re	ceipt								
	Mailing Address 4 DONBUSH ROAD				03 / D D / Y Y Y Y Y 2019											
		State MN	Zip Code	Transaction ID : PR2613385353723 Amount of Each Receipt this Period												
	NORTH OAKS		55127-20	95	_ A	mount	of	Each	Red	ceipt th	is Period					
	FEC ID number of contributing federal political committee.	С			76.92											
	Name of Employer (for Individual) Optum Services, Inc		upation (for Indiv Acctng	vidual)		Me	emo	Item								
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В.	Full Name of Individual (Last, First, Middle Initia	al) or Full C	rganization Nam	le		Date of	Re	ceipt								
	Mailing Address 57 ATKINSON LANE				03 31 YYYYY 03 31 2019											
	City	State	Zip Code			Trans	acti	on ID	: Pf	R26133	38895372	3				
	SUDBURY	MA	01776-193	38	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С		115.38												
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Indiv Mktg Bus Dev		Me	emo	Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	P/R Deduction (\$57.69 Bi-Weekly)												
С.	Full Name of Individual (Last, First, Middle Initia BURKHOLDER, CHAD, , ,	al) or Full C	rganization Narr	ne		ate of	Re	ceipt								
	Mailing Address 2423 DUBONNET DRIVE				1	^M 03	/	D 3		/ Y	ү 2019	Y				
	City	State	Zip Code			Trans	acti	ion ID	: P	R2615	07345372	23				
	MACUNGIE	PA	18062-885	57	A	mount	of	Each	Red	ceipt th	is Period					
	FEC ID number of contributing federal political committee.	С						9		9	384.	60				
	Name of Employer (for Individual) Optum Services, Inc	Occ VP (upation (for Indiv Ops	vidual)		Me	emo	ltem								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date V	1153.80	P/	R Ded	uctio	on (\$1	92.3	30 Bi-W	/eekly)					
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PAGE 132 OF

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111			for each category of the Detailed Summary Page		X 11a 13		11b 14	11c	12	17				
	y information copied from such Reports and Sta for commercial purposes, other than using the r				for the		oose of	soliciting	g contribu	tions				
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	AC)										
Α.	Full Name of Individual (Last, First, Middle Initia OCONNOR, THOMAS, , ,	l) or Full Or	rganization Name		Date of Receipt									
	Mailing Address 1510 JAMES STREET				03 / D D / Y Y Y Y 03 31 2019									
	City DURHAM	State NC	Zip Code 27707-1514		Transaction ID : PR2615082053723 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С						-	384.	60				
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Plan CEO		Me	emo	Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80		P/R Dedi	uctio	on (\$192	2.30 Bi-W	/eekly)					
в.	Full Name of Individual (Last, First, Middle Initia SOLOMON, RANDALL, , ,	l) or Full Or	rganization Name	Date of Receipt										
	Mailing Address 760 HAIGHT STREET				03	/	31	/ Y	y y 2019	Y				
	City SAN FRANCISCO	State CA	Zip Code 94117-3317						67155372					
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period										
	Name of Employer (for Individual) Optum Services, Inc	Occu Sr B	Memo Item											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 230.76]	P/R Dedu	uctic	on (\$38.	46 Bi-We	eekly)					
с.	Full Name of Individual (Last, First, Middle Initia BIRNBAUM, MICHAEL, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt							
	Mailing Address 55 DEAN STREET		1		03	/	31	/ Y	2019	Y				
	City BROOKLYN	State NY	Zip Code 11201-6245				-		67165372 iis Period	-				
	FEC ID number of contributing federal political committee.	С					y .	, ,	384.	60				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ilthcare Econ		Me	emo	tem							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80]	P/R Ded	uctio	on (\$19:	2.30 Bi-W	Veekly)					
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PAGE 133 OF

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116	EMIZED RECEIPTS		for each category of the Detailed Summary Page		X 11a	11b	11c	12			
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<u> </u>	for commercial purposes, other than using the na	ame and ad	iddress of any political commit	ttee to s	solicit con	tributions	from suc	n committe	3 0.		
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group I	PAC)							
	Full Name of Individual (Last, First, Middle Initial KNUTSON, DIANE, , ,) or Full Or	organization Name		Date of	Receipt					
	Mailing Address 701 Pennsylvania Ave, NW Suite 200				03 31 2019						
	City Washington	State DC	Zip Code 20004-3610				: PR2615 Receipt th	92395372: nis Period	3		
	FEC ID number of contributing federal political committee.	С				- 1		76.9	92		
	Name of Employer (for Individual) UHC International Services Inc		upation (for Individual) Ntwk Pricing		Me	mo Item					
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	Full Name of Individual (Last, First, Middle Initial TRAW, KEVIN, , ,) or Full Or	organization Name		Date of	Receipt					
Mailing Address 518 13TH ST					м м 03	/ D 3 [/]		2019	Y		
	City HUNTINGTON BEACH	State CA	Zip Code 92648-4038			365653723 nis Period	3				
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) Dir Bus Process				-		76.9	92		
	Name of Employer (for Individual) Optum Services, Inc				Me	mo Item					
		Aggregate	Year-to-Date V		7						
	Other (specify) ▼		230.76		P/R Deduction (\$38.46 Bi-Weekly)						
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	Mailing Address 8687 RILEY CURVE	1			03	/ D 3		y y 2019	Y		
-	City CHANHASSEN	State MN	Zip Code 55317-4822				: PR2617 Receipt th	93395372 nis Period	3		
	FEC ID number of contributing federal political committee.	С				9	, ,	92.3	30		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		Me	emo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 276.90		P/R Dedu	uction (\$4	6.15 Bi-W	eekly)			
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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PAGE 134 OF

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$\Big\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (UnitedHealth Group PA	C)								
Α.	Full Name of Individual (Last, First, Middle Initial) BROWN, ROGER, , ,	or Full C	Drganization Name	Date of Receipt								
	Mailing Address 512 EAST STATE AVE			03 / D D / Y Y Y Y 03 31 2019 Transaction ID : PR2622557953723								
	5	State AZ	Zip Code 85020-4940								3	
				Amount of Each Receipt this Period 384.60							60	
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Mktg Bus Dev	Memo Item								
	Receipt For: Ag Primary General Other (specify) ▼		e Year-to-Date ▼ 1153.80	P/	R Ded	uctio	on ((\$192.	30 Bi-W	/eekly)		
	Full Name of Individual (Last, First, Middle Initial) OLSON, MARK, , ,	or Full C	Drganization Name	Date of Receipt								
	Mailing Address 891 14TH ST UNIT 1210 City						D	31	/ Y	y y 2019	Y	
	City : DENVER	State CO	Zip Code 80202-3259				-			6165372 is Period	3	
	FEC ID number of contributing federal political committee.	C					-		-9	76.	92	
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) VP SIs Acct Mgmt	Memo Item								
	Receipt For: Ag Primary General Other (specify) ▼	ggregate	e Year-to-Date ▼ 230.76	P/	R Ded	uctic	on (\$38.4	6 Bi-We	ekly)		
C.	Full Name of Individual (Last, First, Middle Initial) MOURAS, DENNIS, , ,	or Full C	Drganization Name		Date of	Re	eceip	pt				
	Mailing Address 6376 MARSH ROAD				03 31 Y Y Y Y 2019							
	City SCOTTRELLVILLE	State MI	Zip Code 48039-1314							70295372	3	
		C			anoun		=a0		ceipt th	is Period 384.	60	
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) n Plan CEO		M	emo	o Ite	em				
	Receipt For: Ag Primary General Other (specify)	ggregate	e Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
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PAGE 135 OF

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	UnitedHealth Group Incorporate	ed PAC (I	JnitedHealth Group PA	AC)							
A.	Full Name of Individual (Last, First, Middle Init MULES, REBECCA, , ,	tial) or Full C	rganization Name		Date of Receipt						
	Mailing Address 1136 BATTERY AVENUE				м м 03	/	31	D / Y	ү ү 2019	Y	
	City BALTIMORE	State MD	Zip Code 21230-4112						4265372 is Period	3	
	FEC ID number of contributing federal political committee.		С						384.0	60	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs		M	emo	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80		P/R Ded	ucti	on (\$19	2.30 Bi-W	/eekly)		
в.	Full Name of Individual (Last, First, Middle Inite STALLWOOD, GREGG, , ,	tial) or Full C	rganization Name		Date of	f Re	eceipt				
	Mailing Address 4842 JUNIPER DR				03 / D D / Y Y Y Y 2019					Y	
	City PALM HARBOR	State FL	Zip Code						9905372	3	
	FEC ID number of contributing federal political committee.	C						Receipt th	384.0	60	
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	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Init COLLETTE, CHRISTOPHER, , ,	tial) or Full C	rganization Name		Date of	f Re	eceipt				
	Mailing Address 4776 MANITOU ROAD				03		31		2019		
	City EXCELSIOR	State MN	Zip Code 55331-9400						49955372 is Period	3	
	FEC ID number of contributing federal political committee.	С			Ľ.		y	,	384.0	60	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 UnitedHIth Grp		M	emo	o Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80		P/R Ded	lucti	on (\$19	2.30 Bi-W	/eekly)		
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PAGE 136 OF

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		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
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NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorporat	ed PAC (I	JnitedHealth Group PA	AC)					
Full Name of Individual (Last, First, Middle Ir A	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 5120 MIRROR LAKES DRIV	Έ		03 31 2019					
City EDINA	State MN	Zip Code 55436-1342	Transaction ID : PR2625501953723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Grp Chief Mktg Off	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle Ir B. SMITH, LISA, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 5040 INTERLACHEN BLUFF			03 / D D / Y Y Y Y 2019					
City EDINA	State MN	Zip Code 55436-1360	Transaction ID : PR2625503753723					
		33430-1300	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼						
Primary General Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle Ir c. LAWTON, MICHAEL, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 1720 CROSS PINES DR			03 31 2019					
City	State	Zip Code	Transaction ID : PR2625505453723					
FLEMING ISLAND	FL	32003-4915	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			1153.80					
TOTAL This Period (last page this line number	r only)							

SCHEDULE A (FEC Form 3X) DEOEIDTO

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 137 OF

		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ated PAC (I	UnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle CULHANE, DEBORAH, , ,	Initial) or Full C	Organization Name	Date of Receipt							
Mailing Address 100 COVE WAY UNIT 301			03 31 2019							
City	State	Zip Code	Transaction ID : PR2626356053723							
QUINCY	MA	02169-5857	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle HINES, GREGORY, , ,	Initial) or Full C	Organization Name	Date of Receipt							
Mailing Address 3660 SILVERWOOD RD			03 / D D / Y Y Y Y Y 2019							
City WEST SACRAMENTO	State CA	Zip Code 95691-5403	Transaction ID : PR2626886553723 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle STOCKSTAD, LYNNE, , ,	Initial) or Full C	Organization Name	Date of Receipt							
Mailing Address 5190 MEADVILLE STREET			03 / D D / Y Y Y Y 03 31 2019							
City EXCELSIOR	State MN	Zip Code 55331-8790	Transaction ID : PR2626915553723 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Grp Chief Mktg Off	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			1153.80							
TOTAL This Period (last page this line number	er only)									

SCHEDULE A (FEC Form 3X) DEAEIDTA

FOR LINE NUMBER:

PAGE 138 OF

		Use separate schedule(s)		(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a		11b	11c	12			
Any information copied from such Reports and										
or for commercial purposes, other than using	the name and a	ddress of any political committee	e to solicit c	ontrib	outions f	rom such	o committe	90.		
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle GRABSKI, BENJAMIN, , ,	Initial) or Full C	organization Name	Date	of Re	eceipt					
Mailing Address 5520 UPTON AVE S				03 31 2019						
City MINNEAPOLIS	State MN	Zip Code 55410-2406				PR26277 eceipt thi	3165372 is Period	3		
FEC ID number of contributing federal political committee.	C				ар. I		76.9	2		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Memo	tem					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle RUSH, ROBERT, , ,	Initial) or Full C	organization Name	Date	of Re	eceipt					
Mailing Address 4735 BYWOOD CT						/ Y	y y 2019	Y		
City COLORADO SPRINGS	State CO	Zip Code 80906-5936			PR26277 eceipt thi	43853723 is Period	5			
FEC ID number of contributing federal political committee.	s l					-	76.9	2		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng		Memo	tem					
Receipt For:	Aggregate	Aggregate Year-to-Date ▼								
Other (specify) ▼		230.76	P/R De	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. VAN DER WALDE, LAMBERT,		organization Name	Date	of Re	eceipt					
Mailing Address 45 AUDUBON CAUSEWA	1		03		31	/ Y	ү ү 2019	Y		
City LANTANA	State FL	Zip Code 33462-4756				PR26283 eceipt thi	33235372 is Period	3		
FEC ID number of contributing federal political committee.	С				, .	9	384.6	60		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9, Govt Research		Memo	o Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R De	educti	on (\$19)	2.30 Bi-W	/eekly)			
SUBTOTAL of Receipts This Page (optional)					9		538.4	4		
TOTAL This Period (last page this line numb	er only)									

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 139 OF

			Use separate schedule(s)	(ch	neck only	y on	ne)				
			for each category of the Detailed Summary Page		K 11a 13		11b	11c	12	Г	17
	nation copied from such Reports and Stat mercial purposes, other than using the n				for the		oose of	soliciting	g contri	ibutio	ns
	of COMMITTEE (In Full) edHealth Group Incorporated	PAC (U	nitedHealth Group PA	AC)							
	me of Individual (Last, First, Middle Initial NHAUSER, MICHAEL, , ,) or Full Org	anization Name		Date of	Re	ceipt				
Mailing	Address 180 SUMMIT LANE				03 31 Y Y Y Y Y 2019]	
City BALA	CYNWYD	State PA	Zip Code 19004-2931					PR26283 eceipt th			
FEC ID number of contributing federal political committee.							.	-	1'	15.92	
United	of Employer (for Individual) HealthCare Services Inc	Occup Sr Me		M	emo	Item					
	t For: Primary General Dther (specify) ▼	Aggregate Y	P/R Deduction (\$57.96 Bi-Weekly)								
Full Na	me of Individual (Last, First, Middle Initial) or Full Org	anization Name		Date of	Re	ceipt				
	Address 6430 POLARIS LANE N	1		03	/	D D D 31	/ Y	2019	ү ү Э]	
City MAPLE	EGROVE	State MN	Zip Code 55311-4320	Transaction ID : PR2628 Amount of Each Receipt							
) number of contributing political committee.	C				76.92					
	of Employer (for Individual) HealthCare Services Inc	Occupation (for Individual) Dir Found/Social Resp			Memo Item						
	t For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)							
	me of Individual (Last, First, Middle Initial MPSON, BRUCE, , ,) or Full Org	anization Name		Date of	Re	ceipt				
	Address 2826 HEDGEROW DRIVE	Otata	Zin Oode		03	/	31		2019	Э	
City DALLA	AS	State TX	Zip Code 75235-7590					PR26288 eceipt th			
) number of contributing political committee.	С			<u> </u>		y	, ,	38	84.60	
United	of Employer (for Individual) HealthCare Services Inc	Occup VP CI	pation (for Individual) ms		М	emo	tem				
	rimary General Other (specify)	Aggregate Year-to-Date ▼ 1153.80					P/R Deduction (\$192.30 Bi-Weekly)				
SUBTOT	AL of Receipts This Page (optional)		•	•			, .	9	57	77.44	
TOTAL T	his Period (last page this line number on	ly)		•	Γ.					-	

FOR LINE NUMBER:

PAGE 140 OF

			Use separate schedule(s)	(check only one)					
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page	▼ 11a 11b 11c 12					
	y information copied from such Reports and Sta for commercial purposes, other than using the r								
<u>.</u>	NAME OF COMMITTEE (In Full)								
\rangle	UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	NC)					
A.	Full Name of Individual (Last, First, Middle Initia WONG, MING, , ,	al) or Full O	rganization Name	Date of Receipt					
	Mailing Address 21066 ASHLEY LANE	_		03 31 Y Y Y Y Y 03 31 2019					
	City LAKE FOREST	State CA	Zip Code 92630-5867	Transaction ID : PR2629556853723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.				120.00					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 360.00	P/R Deduction (\$60.00 Bi-Weekly)					
в.	Full Name of Individual (Last, First, Middle Initia TITA, MARYBETH, , ,	al) or Full O	organization Name	Date of Receipt					
	Mailing Address 16 BEACH WOOD ROAD			03 / D D / Y Y Y Y 2019					
	City FERNANDINA BEACH	State FL	Zip Code 32034-6504	Transaction ID : PR2632077853723 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		76.92					
	Name of Employer (for Individual) United HealthCare Services Inc	Occi Dir I	upation (for Individual) Fin	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)					
с.	Full Name of Individual (Last, First, Middle Initia SAYEED, OMER, , ,	al) or Full O	organization Name	Date of Receipt					
	Mailing Address 2239 HOLLISTON AVE	1		03 / D D / Y Y Y Y 03 31 2019					
	City ALTADENA	State CA	Zip Code 91001-3213	Transaction ID : PR2632078253723 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		76.92					
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Advisory Svc	Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)		••••••	. 273.84					
т	OTAL This Period (last page this line number or	וy)	•						

FOR LINE NUMBER:

PAGE 141 OF

		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorporation	ted PAC (I	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Middle II OTTESON, WILLIAM, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 4545 OXFORD AVE			03 31 2019					
City EDINA	State MN	Zip Code 55436-1405	Transaction ID : PR2632082553723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) uty Gen Counsel	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle II B. MILLIGAN JR, CHARLES, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 6901 RIM ROCK CIRCLE N		1	03 / D D / Y Y Y Y 2019					
City ALBUQUERQUE	State NM	Zip Code 87120-3196	Transaction ID : PR2632083553723					
		07120-3190	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С	80.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼	-					
Primary General Other (specify) ▼		240.00	P/R Deduction (\$40.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle In C. GORSUCH, KIRSTEN, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 2780 COUNTRYSIDE DRIV	E WEST		M M / D D / Y Y Y Y 03 31 2019					
City ORONO	State MN	Zip Code 55356-9676	Transaction ID : PR2632087853723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			849.20					
TOTAL This Period (last page this line numbe	r only)							

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 142 OF

		Use separate schedule(s)	(check	only	one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11		11b	11c	12			
Any information copied from such Reports and or for commercial purposes, other than using t				the pu						
NAME OF COMMITTEE (In Full)				conti	IDULIONS			ee.		
UnitedHealth Group Incorpora	ited PAC (l	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle TUFFIN, MICHAEL, , ,	Initial) or Full O	rganization Name	Dat	e of F	Receipt					
Mailing Address 5904 ASHBY MANOR PLA	CE			03 31 / Y Y Y Y 2019						
City ALEXANDRIA	State VA	Zip Code 22310-2267				: PR2632 Receipt th		3		
FEC ID number of contributing federal political committee.	С	C					384.0	50		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 Public Affairs		Men	no Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. TEMPLE, MARTHA, , ,	Initial) or Full O	rganization Name	Dat	e of F	Receipt					
Mailing Address 194 LITTLE LANE				03 / D D / Y Y Y Y 2019						
City DURHAM	State Zip Code CT 06422-1303					: PR26328 Receipt th		3		
FEC ID number of contributing federal political committee.	С			Juni C			384.0	50		
Name of Employer (for Individual) Optum Services, Inc	Occupation (for Individual) VP Gen Mgmt			Men	no Item					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1153.80				P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. WALTHOUR, JOHN, , ,	Initial) or Full O	rganization Name	Dat	e of F	Receipt					
Mailing Address 5049 COLFAX AVE S			_	03	/ D 3	1	ү ү 2019			
City MINNEAPOLIS	State MN	Zip Code 55419-1145				: PR2632 Receipt th		3		
FEC ID number of contributing federal political committee.	С			_	7	. ,	76.9	92		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Rsch	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R	Deduc	ction (\$3	8.46 Bi-Wo	eekly)			
SUBTOTAL of Receipts This Page (optional).					, ,		846.′	2		
TOTAL This Period (last page this line number	er only)									

FOR LINE NUMBER:

PAGE 143 OF

		Use separate schedule(s)	(check only one)						
			for each category of the Detailed Summary Page	▲ 11a □ 11b □ 11c □ 12					
Ar	y information copied from such Reports and Sta	itements ma	ay not be sold or used by any p	13 14 15 16 17 erson for the purpose of soliciting contributions a to call at a c					
or	for commercial purposes, other than using the r	name and a	adress of any political committee	e to solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	AC)					
A.	Full Name of Individual (Last, First, Middle Initia PLATT, LAWRENCE, , ,	al) or Full O	rganization Name	Date of Receipt					
	Mailing Address 3830 KING STREET			03 31 / Y Y Y Y 2019					
	City ALEXANDRIA	State VA	Zip Code 22302-1906	Transaction ID : PR2632880753723 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		384.60					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
B.	Full Name of Individual (Last, First, Middle Initia HAPGOOD, WADE, , ,	al) or Full O	rganization Name	Date of Receipt					
	Mailing Address 330 NW 82ND			03 / D D / Y Y Y Y Y 2019					
	City TOPEKA	State KS	Zip Code 66617-2223	Transaction ID : PR2634167053723					
		1.5	00017-2223	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	115.38							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.14	P/R Deduction (\$57.69 Bi-Weekly)					
— с.	Full Name of Individual (Last, First, Middle Initia ROALDI, MICHAEL, , ,	al) or Full O	rganization Name	Date of Receipt					
	Mailing Address 4720 HARRIET AVE			03 / D D / Y Y Y Y 03 31 2019					
	City MINNEAPOLIS	State MN	Zip Code 55419-5434	Transaction ID : PR2634169553723					
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 231.00	P/R Deduction (\$38.50 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)			576.98					
т	OTAL This Period (last page this line number or	nly)	· · · · · · · · · · · · · · · · · · ·						

FOR LINE NUMBER:

PAGE 144 OF

	Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports and or for commercial purposes, other than using t	Statements mathematic here have a statements and a	L ay not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Middle A. PRIBLE, JOHN, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 1923 SHIVER DR			M M / D D / Y Y Y Y 03 31 2019					
City ALEXANDRIA	State VA	Zip Code 22307-1629	Transaction ID : PR2634656653723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. SCHEID, ADREAN, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 2915 CATHEDRAL AVENU	ENW		M M / D D / Y Y Y Y 03 31 2019					
City WASHINGTON	State DC	Zip Code 20008-3406	Transaction ID : PR2634880453723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	s l							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) External Affs	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle PESCATELLO, SARA, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 2149 CALIFORNIA STREE APT #D City	T NW	Zip Code	03 31 2019 Transaction ID : PR2634888553723					
WASHINGTON	DC	20008-1834	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional).			1153.80					
TOTAL This Period (last page this line number	er only)							

SCHEDULE A (FEC Form 3X) DEAEIDTA

FOR LINE NUMBER:

PAGE 145 OF

	-	Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12					
Any information copied from such Reports an or for commercial purposes, other than using			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)								
> UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, Middle A. POWER, ROBERT, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 20 SMITH LANE			03 31 2019					
City SAINT JAMES	State NY	Zip Code 11780-3810	Transaction ID : PR2634892853723					
		11760-3610	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		76.92					
Name of Employer (for Individual) Optum360 Services Inc	Occ VP	upation (for Individual) Fin	Memo Item					
Receipt For:	Aggregate	Year-to-Date V	P/R Deduction (\$38.46 Bi-Weekly)					
Other (specify)		230.76						
Full Name of Individual (Last, First, Middle B. PAYET, KEITH, , ,	Date of Receipt							
Mailing Address 405 ENCLAVE CT			03 31 2019					
City	State	Zip Code	Transaction ID : PR2635440053723					
BRENTWOOD	TN	37027-7894	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item					
Receipt For:		Year-to-Date ▼	P/R Deduction (\$192.30 Bi-Weekly)					
Primary General Other (specify) ▼		1153.80						
Full Name of Individual (Last, First, Middle C. NGUYEN, ANTHONY, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 17816 PORTO MARINA			M = M / D = D / Y = Y = Y = Y					
City	State	Zip Code	03 31 2019 Transaction ID : PR2635444053723					
PACIFIC PALISADES	CA	90272-4154	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		76.92					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Population HIth	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			538.44					
TOTAL This Period (last page this line numb								

FOR LINE NUMBER:

PAGE 146 OF

	-	Use separate schedule(s)	(check only one)					
II EIVIIZED REGEIPIJ		for each category of the Detailed Summary Page						
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, Midd EICHENLAUB, MANDIE, , ,	le Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 6607 CINDY LANE			M M / D D / Y Y Y Y Y 03 31 2019					
City HOUSTON	State TX	Zip Code 77008-5110	Transaction ID : PR2635448553723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		76.92					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Prgms	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)					
Full Name of Individual (Last, First, Midd ROOS, THOMAS, , ,	le Initial) or Full C	Date of Receipt						
Mailing Address 3199 KAGEN AVE NE	0	7. 0.4	03 / D D / Y Y Y Y 03 / 31 / 2019					
City SAINT MICHAEL	State MN	Zip Code 55376-3416	Transaction ID : PR2635451253723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Chief Acctng Off	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Midd LIST, CHRISTINE, , ,	le Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 340 DAVIS ST			03 / D D / Y Y Y Y Y 2019					
City NORTHBOROUGH	State MA	Zip Code 01532-2420	Transaction ID : PR2637694653723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		76.92					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional	al)		538.44					
TOTAL This Period (last page this line nur	nber only)							

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

FOR LINE NUMBER:

PAGE 147 OF

			Use separate schedule(s)	(check only one)					
			for each category of the Detailed Summary Page	¥ 11a ☐ 11b ☐ 11c ☐ 12					
	y information copied from such Reports and Sta		ay not be sold or used by any p						
or	for commercial purposes, other than using the r	name and a	ddress of any political committee	e to solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	AC)					
A.	Full Name of Individual (Last, First, Middle Initia LOGAN, BRETT, , ,	al) or Full O	rganization Name	Date of Receipt					
	Mailing Address 121 3RD STREET NE			03 31 Y Y Y Y Y 03 31 2019					
	City WASHINGTON	State DC	Zip Code 20002-7313	Transaction ID : PR2638112753723 Amount of Each Receipt this Period					
United HealthCare Services Inc				76.20					
			upation (for Individual) c Dir Regl Affs	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 228.60	P/R Deduction (\$38.10 Bi-Weekly)					
в.	Full Name of Individual (Last, First, Middle Initia HAUSCHILDT, TODD, , ,	al) or Full O	Date of Receipt						
	Mailing Address 111 4TH AVE N UNIT 703			03 / D D / Y Y Y Y 03 31 2019					
	City MINNEAPOLIS	State MN	Zip Code 55401-1538	Transaction ID : PR2638114753723					
			55401-1536	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		76.92					
	Name of Employer (for Individual) Optum Services, Inc	Occi VP	upation (for Individual) IT	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)					
С.	Full Name of Individual (Last, First, Middle Initia ZEGLINSKI, MICHAEL, , ,	al) or Full O	rganization Name	Date of Receipt					
	Mailing Address 1 TRIMONT LANE #610A			03 / D D / Y Y Y Y Y 03 31 2019					
	City PITTSBURGH	State PA	Zip Code 15211-1206	Transaction ID : PR2639701853723 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		384.60					
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)			537.72					
т	OTAL This Period (last page this line number or	nly)							

FOR LINE NUMBER:

PAGE 148 OF

ITEMIZED RECEIPTS		Use separate schedule(s)		(check only one)							
11			for each category of the Detailed Summary Page	×			11b	11c	12		
	y information copied from such Reports and S for commercial purposes, other than using the										
\rangle		ed PAC (l	JnitedHealth Group PA	AC)							
Α.	EDWARDS, MICHAÈL, , ,	tial) or Full O	rganization Name	[Date of	f Re	eceipt				
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate Full Name of Individual (Last, First, Middle Initi EDWARDS, MICHAEL, , , Mailing Address 379 DURHAM ROAD City WYCKOFF FEC ID number of contributing federal political committee. Name of Employer (for Individual) Optum Services, Inc Receipt For: Primary General Other (specify) ▼				03 / D D / Y Y Y Y 03 31 2019						
		State NJ	Zip Code 07481-1018	A					70205372 nis Period		
	•	С					-		384.	60	
	Optum Services, Inc		upation (for Individual) SIs SVP OptumI		М	emo	ttem				
	Primary General	Aggregate	Year-to-Date ▼ 1153.80	P/	′R Ded	ucti	on (\$19	02.30 Bi-V	Veekly)		
в.		tial) or Full O	rganization Name		Date of	f Re	eceipt				
					03 / D D / Y Y Y Y 2019						
	•	State MA	Zip Code 01532-1686						70835372		
	FEC ID number of contributing	C		Amount of Each Receipt this Period 384.60							
			upation (for Individual) Pharmacy Programs	Ī	Memo Item						
	Primary General		Year-to-Date ▼ 1153.80	P/	R Ded	ucti	on (\$19	2.30 Bi-V	Veekly)		
С.	Full Name of Individual (Last, First, Middle Init SMITH, ANTHONY, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt				
	Mailing Address 1 ROCKAWAY AVE				03	J.	31		2019		
	City MARBLEHEAD	State MA	Zip Code 01945-1726	A			-		74625372 nis Period	-	
	FEC ID number of contributing federal political committee.	С			_		,	. ,	76.	92	
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Cint Svc Acct Mgt		M	emo	tem Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P	/R Ded	lucti	on (\$38	3.46 Bi-W	eekly)		
⊢	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number of					_	y	· ·	846.	12	

SCHEDULE A (FEC Form 3X) -

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FOR LINE NUMBER:

PAGE 149 OF

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			for each category of the Detailed Summary Page	×	- 1		- H-	11c	12	
					for the p	ourpo	se of s			
$\left\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group P	AC)						
	Full Name of Individual (Last, First, Middle Initia FLEMING, SUSAN, , ,	al) or Full Or	rganization Name		Date of	Rece	əipt			
	Mailing Address 2016 N HOWE ST UNIT 1S				^M ^M 03	/	D D D	/ Y	y y 2019	Y
	City CHICAGO	State IL	Zip Code 60614-4414							3
	FEC ID number of contributing federal political committee.	С				-,		-9-	384.	60
	Name of Employer (for Individual) Optum Services, Inc			Me	mo l	tem				
	Receipt For: Primary General Other (specify) ▼	CEIPTS for each category of the Detailed Summary Page Image: Image		.30 Bi-W	eekly)					
	Full Name of Individual (Last, First, Middle Initia DUTTA, SUMIT, , ,	al) or Full Or	rganization Name		Date of	Rece	əipt			
	Mailing Address 1112 W WRIGHTWOOD AVE				/		/ Y	2019	Y	
	City CHICAGO									3
	FEC ID number of contributing federal political committee.	Occupation (for Individual)			384.60					
	Name of Employer (for Individual) Optum Services, Inc				Me	mo l	tem			
	Receipt For: Primary General Other (specify) ▼	Aggregate		P	/R Dedu	iction	(\$192.	30 Bi-W	eekly)	
C.	NELSON, ELLEN, , ,	al) or Full Or	rganization Name		Date of	Rece	eipt			
	Mailing Address 11882 TILDEN PLACE	State	Zin Code		03	/	31		2019 20535372	
	WELLINGTON									.5
	FEC ID number of contributing federal political committee.	С				,		9	384.	60
	Name of Employer (for Individual) Optum Services, Inc		· · · · · ·		Me	emo I	ltem			
	Receipt For: Primary General Other (specify)	Aggregate	1153.80] F	9/R Dedu	uction	n (\$192	.30 Bi-W	'eekly)	
S	UBTOTAL of Receipts This Page (optional)					,		9	1153.	80
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SCHEDULE A (FEC Form 3X)

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PAGE 150 OF

ITEMIZED RECEIPTS		Use separate schedule(s)			(check only one)					
11			for each category of the Detailed Summary Page		× 11a		11b	11c	12	_ _
	y information copied from such Reports and St for commercial purposes, other than using the									
	NAME OF COMMITTEE (In Full)		duress of any pointeal commute	0 10 3				TOTT SUCI	r commu	
	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group PA	AC)						
Α.	Full Name of Individual (Last, First, Middle Initi SMITH, DELYLE, , ,	ial) or Full O	rganization Name		Date of	f Re	eceipt			
	Mailing Address PO BOX 447	- 1			м м 03	1	31) / Y	2019	Y
	City MT PROSPECT	State IL	Zip Code 60056-0447						30155372 is Period	3
	FEC ID number of contributing federal political committee.	С					-	1 - 7F	76.9	92
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Director Technology		М	emo	o Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	1	P/R Ded	lucti	on (\$38	.46 Bi-We	ekly)	
в.	Full Name of Individual (Last, First, Middle Initi STOW, CHRISTINA, , ,	ial) or Full O	organization Name		Date o	f Re	eceipt			
	Mailing Address 4709 ALTON PL NW				03	/	31		2019	Y
	City WASHINGTON	State DC	Zip Code 20016-2041						6645372	3
	FEC ID number of contributing federal political committee.	C			Amount of Each Receipt this Period 384.60					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) External Affs		М	emo	o Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80] '	P/R Ded	ucti	on (\$192	2.30 Bi-W	'eekly)	
с.	Full Name of Individual (Last, First, Middle Initi WAGNER, JOSEPH, , ,	ial) or Full O	organization Name		Date o	f Re	eceipt			
	Mailing Address 3405 MEREDITH RIDGE ROA		Zin Code		03 03		31		2019	
	City PHOENIX	State MD	Zip Code 21131-1456						37585372 is Period	3
	FEC ID number of contributing federal political committee.	С			Ľ.		9	,	84.0	62
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP F	upation (for Individual) Fin		Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 253.86]	P/R Dec	lucti	ion (\$42	.31 Bi-We	ekly)	
	UBTOTAL of Receipts This Page (optional)			▶ -			, . , .	· · ·	546. ⁻	14

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 151 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17				
or for commercial purposes, other than using			erson for the purpose of soliciting contributions e to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group PA	AC)				
Full Name of Individual (Last, First, Middle ESTESS, SHARON, , ,	e Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 128 ASHBROOKE TRAIL			03 / D D / Y Y Y Y Y 2019				
City MADISON	State MS	Zip Code 39110-6855	Transaction ID : PR2640876553723				
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period				
Name of Employer (for Individual) United HealthCare Services Inc	Occ Dir	upation (for Individual) Fin	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)				
Full Name of Individual (Last, First, Middle B. METKO, SARA, , ,							
Mailing Address 23665 HIGHVIEW LANE	1		03 / D D / Y Y Y Y 2019				
City LAKEVILLE	State MN	Zip Code 55044-6025	Transaction ID : PR2640877353723 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		76.92				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Tax	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)				
Full Name of Individual (Last, First, Middle C. MINTO, RYAN, , ,	e Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 7500 WINGFOOT DRIVE	1		03 / D D / Y Y Y Y Y 2019				
City RALEIGH	State NC	Zip Code 27615-5476	Transaction ID : PR2640882453723 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ernal Affs Dir	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 348.00	P/R Deduction (\$107.60 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional)		309.52				
TOTAL This Period (last page this line num	ber only)	•••••					

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FOR LINE NUMBER:

PAGE 152 OF

		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
or for commercial purposes, other than using t			person for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Middle ADVANI, PROTIMA, , ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 7618 BRITTANY PARC CT			03 31 Y Y Y Y Y 2019					
City FALLS CHURCH	State VA	Zip Code 22043-2907	Transaction ID : PR2642024153723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Rsch	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. BRUECKMAN, BRIAN, , ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 4601 PARK COMMONS DF #417		The Oaste	M M / D D / Y					
City SAINT LOUIS PARK	State MN	Zip Code 55416-4993	Transaction ID : PR2642029453723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P UHC Operations	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle MARTIN, STEPHANIE, , ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 7002 N VIA DE MANANA			M M / D D / Y Y Y Y 03 31 2019					
City SCOTTSDALE	State AZ	Zip Code 85258-3951	Transaction ID : PR2642818053723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		76.92					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Dir Strat Accts	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional).			846.12					
TOTAL This Period (last page this line number	er only)							

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 153 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
or	y information copied from such Reports and Statem for commercial purposes, other than using the nam			erson for the purpose of soliciting contributions					
$\Big\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated P	PAC (L	InitedHealth Group PA	.C)					
Α.	Full Name of Individual (Last, First, Middle Initial) o YOUNG, ALLISON, , ,	or Full Or	ganization Name	Date of Receipt					
	Mailing Address 15222 ALMA MATER CT			03 / D D / Y Y Y Y 2019					
	5	State _A	Zip Code 70810-8389	Transaction ID : PR2642830353723					
	FEC ID number of contributing federal political committee.	_		Amount of Each Receipt this Period					
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Plan CEO	Memo Item					
	Receipt For: Ag Primary General Other (specify) ▼	gregate `	Year-to-Date ▼ 480.75	P/R Deduction (\$96.15 Bi-Weekly)					
	Full Name of Individual (Last, First, Middle Initial) o	or Full Or	ganization Name	Date of Receipt					
	Mailing Address 2900 THOMAS AVE S UNIT 1623			03 / D D / Y Y Y Y 03 31 2019					
	,	State MN	Zip Code 55416-4474	Transaction ID : PR2642831253723 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.)		76.92 Memo Item					
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Gen Mgmt						
	Receipt For: Ag Primary General Other (specify) ▼	gregate `	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)					
	Full Name of Individual (Last, First, Middle Initial) o FOX, ELIZABETH, , ,	e of Individual (Last, First, Middle Initial) or Full Organization Name ELIZABETH, , ,							
	Mailing Address 1021 NORTH GARFIELD STREET #308			03 / D D / Y Y Y Y 2019					
	5	State VA	Zip Code 22201-2559	Transaction ID : PR2642832053723 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.)		192.30					
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) ovt Affs	Memo Item					
	Receipt For: Ag Primary General Other (specify)	gregate `	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)			365.37					
т	OTAL This Period (last page this line number only).		•••••						

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PAGE 154 OF

ITEMIZED RECEIPTS				(cl	(check only one)					
11	EIVILLED RECEIPIS		for each category of the Detailed Summary Page		× 11a		11b	11c	12	<u> </u>
	y information copied from such Reports and S									
or	for commercial purposes, other than using the	e name and a	ddress of any political committee	e to s	solicit coi	ntrib	outions	from such	n committ	ee.
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)						
A.	Full Name of Individual (Last, First, Middle Ini CRESTA, BRIAN, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt			
	Mailing Address 5 OGDEN LANE			Date	м м 03	/	31) / Y	ү ү 2019	Y
	City MIDDLETON	State MA	Zip Code 01949-1669						33755372 is Period	3
	FEC ID number of contributing federal political committee.	С						76.9	92	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev		M	emo	o Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	1	P/R Deduction (\$38.46 Bi-Weekly)					
в.	Full Name of Individual (Last, First, Middle Ini SIVERTSEN, DARREN, , ,	tial) or Full O	rganization Name		Date of Receipt					
	Mailing Address 11632 SLEEPY HEAVEN PLA				м м 03	/	D 31) / Y	2019	Y
	City LAS VEGAS	State NV	-	Transaction ID : PR2643132653723 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С								
	Name of Employer (for Individual) Optum Services, Inc	Occupation (for Individual) VP Gen Mgmt			Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76]	P/R Ded	uctio	on (\$38	.46 Bi-We	ekly)	
C.	Full Name of Individual (Last, First, Middle Ini SOCZYNSKI, PAUL, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt			
	Mailing Address 915 SOUTH 91ST STREET	Chata	Zin Onda		03 -		31		2019	
	City WEST ALLIS	State WI	Zip Code 53214-2848						19775372 is Period	3
	FEC ID number of contributing federal political committee.	С			<u> </u>		y	. ,	76.9	92
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir		M	emo	o Item			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	1	P/R Ded	lucti	ion (\$38	.46 Bi-We	eekly)	
s	UBTOTAL of Receipts This Page (optional)			•			9	. ,	230.7	76
Т	OTAL This Period (last page this line number	only)		•						

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PAGE 155 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports and S or for commercial purposes, other than using the			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	JnitedHealth Group PA	SC)					
Full Name of Individual (Last, First, Middle In A. CRAGLE, STEVE, , ,	itial) or Full C	organization Name	Date of Receipt					
Mailing Address 6604 MOHAWK TRAIL			03 / D D / Y Y Y Y 03 31 2019					
City	State MN	Zip Code	Transaction ID : PR2643200653723					
EDINA		55439-1030	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CMO	Memo Item					
Receipt For:		Year-to-Date ▼	-					
Primary General Other (specify) ▼	, iggi ogule	1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle In B. NEELY, MARC, , ,	itial) or Full C	Date of Receipt						
Mailing Address 1159 BUFFALO RIDGE RD			03 31 2019					
City CASTLE PINES	State CO	Zip Code 80108-8190	Transaction ID : PR2643203153723 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle In C. HAMMOND, MICHAEL, , ,	itial) or Full C	organization Name	Date of Receipt					
Mailing Address 244 NE 59TH TERR			03 31 2019					
City TOPEKA	State KS	Zip Code 66617-1661	Transaction ID : PR2644644853723					
FEC ID number of contributing			Amount of Each Receipt this Period					
federal political committee.	С		76.92					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Dir Capability	Memo Item					
Receipt For:	1	Year-to-Date ▼	—					
Other (specify)		230.76	P/R Deduction (\$38.46 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			846.12					
TOTAL This Period (last page this line number								

SCHEDULE A (FEC Form 3X) DEOEIDTO

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PAGE 156 OF

		Use separate schedule(s)	(check only one)	(check only one)					
		for each category of the Detailed Summary Page	X 11a 11b 11c 12	<u> </u>					
Any information copied from such Reports and or for commercial purposes, other than using t									
				.					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle MCKOY, PHILIP, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 927 LINCOLN AVE			03 / D D / Y Y Y Y 03 31 2019						
City SAINT PAUL	State MN	Zip Code 55105-3149	Transaction ID : PR264465165372 Amount of Each Receipt this Period	3					
FEC ID number of contributing federal political committee.	С		384.6	60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Grp CIO	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
B. MISTRY, RASHMITA, , ,	Name of Individual (Last, First, Middle Initial) or Full Organization Name STRY, RASHMITA, , ,								
Mailing Address 6658 WATERTON CIRCLE			03 / D D / Y Y Y Y 2019	Y					
City MUKILTEO	State WA	Zip Code 98275-4805	Transaction ID : PR2645169153723	3					
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period	60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual)	Memo Item						
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. NEALE, MATTHEW, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 11380 WILD HERON PT	1	1	03 / D D / Y Y Y 2019						
City EDEN PRAIRIE	State MN	Zip Code 55347-4729	Transaction ID : PR264517525372 Amount of Each Receipt this Period	3					
FEC ID number of contributing federal political committee.	С		76.5	92					
Name of Employer (for Individual) Optum Services, Inc	Occ VP I	upation (for Individual) T	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			846.1	12					
TOTAL This Period (last page this line number	er only)								

SCHEDULE A (FEC Form 3X) DEOEIDTO

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 157 OF

	-	Use separate schedule(s)	(check only one)			
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17			
			13 14 15 16 17 rerson for the purpose of soliciting contributions e to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)			
Full Name of Individual (Last, First, Middle A. MAHRT, JONATHAN, , ,	Initial) or Full C	rganization Name	Date of Receipt			
Mailing Address 4035 W 65TH ST APT 127			M M / D D / Y Y Y Y Y 03 31 2019			
City EDINA	State MN	Zip Code 55435-1749	Transaction ID : PR2645176953723 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		384.60			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Ops	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)			
Full Name of Individual (Last, First, Middle B. HOFFMAN, SHERRI, , ,	Initial) or Full C	rganization Name	Date of Receipt			
Mailing Address 3409 DEEP WILLOW AVE			03 31 / Y Y Y Y Y 2019			
City PIKESVILLE	State MD	Zip Code 21208-3116	Transaction ID : PR2646294653723 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	76.92				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) CInt Svc Acct Mgt	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)			
Full Name of Individual (Last, First, Middle C. STANKIEWICZ, DENNIS, , ,	Initial) or Full C	rganization Name	Date of Receipt			
Mailing Address 17761 WEAVER LAKE DF		Zin Oode	M M / D D / Y Y Y Y Y 31 2019			
City MAPLE GROVE	State MN	Zip Code 55311-1328	Transaction ID : PR2646304053723 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		238.09			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Auditor	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.09	P/R Deduction (\$238.09 Bi-Weekly)			
SUBTOTAL of Receipts This Page (optional)			699.61			
TOTAL This Period (last page this line numb	per only)					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 158 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	.C)
Full Name of Individual (Last, First, Middle ZENICK, GEOFFREY, , ,	Date of Receipt		
Mailing Address 7714 TWISTED OAKS CIF	RCLE	Zip Code	03 / D D / Y Y Y Y 2019 Transaction ID : PR2698410853723
DALLAS	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	76.92		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP CInt Relationship	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)
Full Name of Individual (Last, First, Middle GROSSMAN, BEVERLY, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 5 BROOKSIDE AVE	03 / D D / Y Y Y Y 2019		
City MENANDS	State NY	Zip Code 12204-2301	Transaction ID : PR2699179853723 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	76.92		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item
Receipt For: Primary General Other (specify) ▼	P/R Deduction (\$38.46 Bi-Weekly)		
Full Name of Individual (Last, First, Middle C. SELIG, JOHN, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 6406 WESTMINSTER			03 / D D / Y Y Y Y 03 31 2019
City BENTON	State AR	Zip Code 72019-6682	Transaction ID : PR2699184653723 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		153.84
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Business Development Exe	Memo Item
Receipt For: Primary General Other (specify)	I	Year-to-Date ▼ 461.52	P/R Deduction (\$76.92 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional))	•••••	307.68
TOTAL This Period (last page this line numb	per only)	•	

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 159 OF

		Use separate schedule(s)	(check only one)			
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17			
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full)						
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)			
Full Name of Individual (Last, First, Middle AHLSTROM, ALEXIS, , ,	Initial) or Full O	rganization Name	Date of Receipt			
Mailing Address 3421 OAKWOOD TERRAC	Έ		M M / D D / Y Y Y Y 03 31 2019			
City WASHINGTON	State DC	Zip Code 20010-1819	Transaction ID : PR2699187153723			
	00	20010-1619	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		76.72			
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item			
United HealthCare Services Inc	VP	Govt Affs				
Receipt For:	Aggregate	Year-to-Date ▼				
Other (specify) ▼		230.16	P/R Deduction (\$238.00 Bi-Weekly)			
			1			
Full Name of Individual (Last, First, Middle B. ZHOU, JINGXIN, , ,	Initial) or Full O	rganization Name	Date of Receipt			
Mailing Address 12011 FAIRVIEW CT			03 31 2019			
City	State	Zip Code	Transaction ID : PR2699187853723			
MINNETONKA	MN	55343-4516	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		76.92			
Name of Employer (for Individual) Optum Services, Inc	Occ Dir	upation (for Individual) Fin	Memo Item			
Receipt For:	Aggregate	Year-to-Date ▼	—			
Primary General			P/R Deduction (\$38.46 Bi-Weekly)			
Other (specify) v		, 230.76	1			
Full Name of Individual (Last, First, Middle C. EDSON, BARBARA, , ,	Initial) or Full O	rganization Name	Date of Receipt			
Mailing Address 6609 DENNY PEAK DRIVE	=		M M / D D / Y Y Y Y 03 31 2019			
City	State	Zip Code	Transaction ID : PR2699702253723			
SNOQUALMIE	WA	98065-8996	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		384.60			
Name of Employer (for Individual)		upation (for Individual)	Memo Item			
Optum Services, Inc	Bus	Segment CMO				
Receipt For:	Aggregate	Year-to-Date ▼				
Other (specify)		1153.80	P/R Deduction (\$192.30 Bi-Weekly)			
SUBTOTAL of Receipts This Page (optional).			538.24			
TOTAL This Period (last page this line numb	er onlv)					
(,	,,					

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

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PAGE 160 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17		
or for commercial purposes, other than using			erson for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (UnitedHealth Group PA	AC)		
Full Name of Individual (Last, First, Middle A. FARRELL, ELIZABETH, , ,	Date of Receipt				
Mailing Address 9917 TRAILS END ROAD	M M / D D / Y Y Y Y 03 31 2019				
City CHANHASSEN					
		55317-4592	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		384.60		
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Ops	Memo Item		
Receipt For:	Aggregate	Year-to-Date V			
Other (specify)		1153.80	P/R Deduction (\$192.30 Bi-Weekly)		
Full Name of Individual (Last, First, Middle B. MCSWEENEY, ERIN, , ,	Initial) or Full C	Organization Name	Date of Receipt		
Mailing Address 10 NOUVELLE WAY SUIT	03 31 2019				
City NATICK	State MA	Zip Code 01760-1570	Transaction ID : PR2701818053723 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		384.60		
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P, Mkt Grp CHRO	Memo Item		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 1153.80	P/R Deduction (\$192.30 Bi-Weekly)		
Full Name of Individual (Last, First, Middle C. FRINGER, TRICIA, , ,	Initial) or Full C	Organization Name	Date of Receipt		
Mailing Address 2809 STANFORD AVE			03 31 2019		
City	State TX	Zip Code	Transaction ID : PR2701818653723		
DALLAS		75225-7917	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		384.60		
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Underwriting	Memo Item		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)		
SUBTOTAL of Receipts This Page (optional)			. 1153.80		
TOTAL This Period (last page this line numb	per only)	••••••			

FOR LINE NUMBER:

PAGE 161 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)			
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17			
Any information copied from such Reports and or for commercial purposes, other than using	d Statements ma the name and a	I ay not be sold or used by any p uddress of any political committe	erson for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full)						
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)			
Full Name of Individual (Last, First, Middle O'CONNELL, DANIEL, , ,	Initial) or Full C	rganization Name	Date of Receipt			
Mailing Address 3325 W 18TH AVENUE	03 31 Y Y Y Y Y 2019					
City DENVER	State CO	Zip Code 80204-1681	Transaction ID : PR2701819653723 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	°					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 634.62	P/R Deduction (\$105.77 Bi-Weekly)			
Full Name of Individual (Last, First, Middle B. BRUCE, JAMIE, , ,	Initial) or Full C	organization Name	Date of Receipt			
Mailing Address 336 THOREAU BLVD			03 / D D / Y Y Y Y Y 2019			
City O FALLON	State MO	Zip Code 63366-7451	Transaction ID : PR2701823053723			
FEC ID number of contributing		03300-7431	Amount of Each Receipt this Period			
federal political committee.	C		384.60			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Plan CEO	Memo Item			
Receipt For:	Aggregate	Year-to-Date ▼				
Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)			
Full Name of Individual (Last, First, Middle SPARKS, KEVIN, , ,	Initial) or Full C	organization Name	Date of Receipt			
Mailing Address 10681 S CEDAR NILES B			03 31 Y Y Y Y Y 2019			
City OLATHE	State KS	Zip Code 66061-7415	Transaction ID : PR2701825553723 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		192.30			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)			
SUBTOTAL of Receipts This Page (optional)			788.44			
TOTAL This Period (last page this line numb	er only)					

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 162 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a ☐ 11b ☐ 11c ☐ 12
Any information conied from such Poports	and Statements m	av not be sold or used by any n	erson for the purpose of soliciting contributions
or for commercial purposes, other than us			e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	orated PAC (JnitedHealth Group PA	AC)
Full Name of Individual (Last, First, Mid A. KRAMER, NANCY, , ,	Date of Receipt		
Mailing Address 4672 BITTERN LANE			03 / D D / Y Y Y Y Y 2019
City LEBANON	State OH	Zip Code 45036-7562	Transaction ID : PR2702501453723
LEBANON	ОП	45030-7502	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		76.92
Name of Employer (for Individual) Optum Services, Inc	Occ	upation (for Individual) RN	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		230.76	P/R Deduction (\$38.46 Bi-Weekly)
Full Name of Individual (Last, First, Mid B. BRENNER, JEFFREY, , ,	dle Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 4610 CEDAR AVE APT 301	M M / D D / Y Y Y Y 03 31 2019		
City	State	Zip Code	Transaction ID : PR2702506353723
PHILADELPHIA	PA	19143-2118	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		384.60
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Integrated HIth Human Svs	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Mid C. MERZLICKER, CAREY, , ,	dle Initial) or Full C	organization Name	Date of Receipt
Mailing Address 950 BENTLEY PARK C	CIRCLE		03 31 2019
City	State	Zip Code	Transaction ID : PR2703246953723
O FALLON	MO	63368-8022	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		76.92
Name of Employer (for Individual) United HealthCare Services Inc	Occ Dir I	upation (for Individual) Fin	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)
SUBTOTAL of Receipts This Page (option	nal)		538.44
TOTAL This Period (last page this line nu	umber only)	•••••	

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 163 OF

		Use separate schedule(s)		(check only one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	a 🗌	11b	11c	12	
Any information copied from such Reports and								
or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)				contri	outions i	TOTTI SUCI	1 Commu	ee.
UnitedHealth Group Incorporat	ted PAC (l	JnitedHealth Group PA	AC)					
Full Name of Individual (Last, First, Middle Ir A. HARVEY, CATHERINE, , ,	nitial) or Full O	rganization Name	Date	of R	eceipt			
Mailing Address 541 E ERIE ST UNIT 602			0;		D D D 31	/ Y	үүү 2019	Y
City MILWAUKEE	StateZip CodeWI53202-6251						3705372 is Period	3
FEC ID number of contributing federal political committee.	ů – – – – – – – – – – – – – – – – – – –						192.3	30
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Mem	o Item			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 576.90			educt	ion (\$96.	15 Bi-We	ekly)	
Full Name of Individual (Last, First, Middle Ir B. YOUNG, DAVID, , ,	nitial) or Full O	rganization Name	Date	of R	eceipt			
Mailing Address 654 CHISWELL CT			0:		31	/ Y	2019	Y
City BRENTWOOD	State TN	Zip Code 37027-3109					5545372: is Period	3
FEC ID number of contributing federal political committee.							384.6	60
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		Mem	o Item			
Receipt For: Primary General Other (specify) ▼	eceipt For: Primary General Aggregate Year-to-Date ▼			educti	ion (\$192	2.30 Bi-W	/eekly)	
Full Name of Individual (Last, First, Middle Ir C. ROLLINS, CARISSA, , ,	nitial) or Full O	rganization Name	Date	of R	eceipt			
Mailing Address 6805 CHEYENNE TRAIL			0	3	31		2019	
City EDINA	State MN	Zip Code 55439-1158				-	18895372 is Period	3
FEC ID number of contributing federal political committee.	С		Ē		y		384.6	60
Name of Employer (for Individual) Optum Services, Inc	Occi VP I	upation (for Individual) T		Mem	o Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R D	educt	ion (\$192	2.30 Bi-W	/eekly)	
SUBTOTAL of Receipts This Page (optional)					, .		961.5	50
TOTAL This Period (last page this line number	r only)							

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 164 OF

	-	Use separate schedule(s)	(check only one)			
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17			
Any information copied from such Reports and or for commercial purposes, other than using	d Statements ma the name and a	I ay not be sold or used by any puddress of any political committe	erson for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)			
Full Name of Individual (Last, First, Middle HOROHO, PATRICIA, , ,	Initial) or Full C	organization Name	Date of Receipt			
Mailing Address 13516 COMPTON ROAD			03 / D D / Y Y Y Y 2019			
City CLIFTON	State VA	Zip Code 20124-1203	Transaction ID : PR2704194653723 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		384.60			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CEO	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)			
Full Name of Individual (Last, First, Middle DELANY, ANDREW, , ,	Initial) or Full C	organization Name	Date of Receipt			
Mailing Address 209 GARLAND AVENUE			03 / D D / Y Y Y Y Y Y 2019			
City DECATUR	State GA	Zip Code 30030-4940	Transaction ID : PR2704196353723 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		384.60			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Cust Svs	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)			
Full Name of Individual (Last, First, Middle C. HAYEK, ANDREW, , ,	Initial) or Full C	organization Name	Date of Receipt			
Mailing Address 500 ADAMS AVENUE			03 / D D / Y Y Y Y 2019			
City GLENCOE	State IL	Zip Code 60022-1865	Transaction ID : PR2705063453723 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		80.23			
Name of Employer (for Individual) Optum Services, Inc Receipt For:	Bus	upation (for Individual) Segment CEO	Memo Item			
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 240.65	P/R Deduction (\$192.30 Bi-Weekly)			
SUBTOTAL of Receipts This Page (optional).			849.43			
TOTAL This Period (last page this line numb	er only)					

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

FOR LINE NUMBER:

(check only one)

PAGE 165 OF

TEMIZED RECEIPTS	WIZED RECEIPTS for each category of the Detailed Summary Page			
or for commercial purposes, other than usin			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (I	JnitedHealth Group PA	AC)	
Full Name of Individual (Last, First, Midd A . ROBERTS, CORY, , ,	Date of Receipt			
Mailing Address 45 BRIGHTON RD NE	03 / D D / Y Y Y Y Y 2019			
City ATLANTA	Transaction ID : PR2705063553723			
FEC ID number of contributing federal political committee.	GA	30309-1518	Amount of Each Receipt this Period 384.60	
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Bus Ops	Memo Item	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)	
Full Name of Individual (Last, First, Midd B. SHARFF, RICHARD, , ,	le Initial) or Full C	rganization Name	Date of Receipt	
Mailing Address 508 RUMSON ROAD	03 31 2019			
City BIRMINGHAM	State AL	Zip Code 35209-4312	Transaction ID : PR2705063653723 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	ů – Elektrik			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment Gen Counsel	Memo Item	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)	
Full Name of Individual (Last, First, Midd C. BUNTEN, BRIAN, , ,	le Initial) or Full C	rganization Name	Date of Receipt	
Mailing Address 401 TATLOW DR			03 / D D / Y Y Y Y 2019	
City COLUMBIA	State MO	Zip Code 65203-6130	Transaction ID : PR2705070553723	
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period	
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 346.14	P/R Deduction (\$57.69 Bi-Weekly)	
SUBTOTAL of Receipts This Page (optional	al)		884.58	
TOTAL This Period (last page this line nur	nber only)	•••••		

FOR LINE NUMBER:

PAGE 166 OF

	-	Use separate schedule(s)	(check only one)			
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17			
			e to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)						
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P/	AC)			
Full Name of Individual (Last, First, Middle SPADE, NATHAN, , ,	Initial) or Full O	rganization Name	Date of Receipt			
Mailing Address 12 WARWICK CIRCLE	03 / D D / Y Y Y Y 03 31 2019					
City MECHANICSBURG	State PA	Zip Code 17050-2643	Transaction ID : PR2705987053723 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		153.84			
Name of Employer (for Individual) United HealthCare Services Inc						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.52	P/R Deduction (\$76.92 Bi-Weekly)			
Full Name of Individual (Last, First, Middle B. BARBARO, PHILIP, , ,	Initial) or Full O	rganization Name	Date of Receipt			
Mailing Address 670 ARBUTUS STREET			03 31 2019			
City MIDDLETOWN	State CT	Zip Code 06457-7106	Transaction ID : PR2705988253723 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		76.92			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item			
Receipt For: Primary General Other (specify)	Receipt For: Aggregate Year-to-Date ▼ Primary General					
Full Name of Individual (Last, First, Middle C. STILLO, KATHLEEN, , ,	Initial) or Full O	rganization Name	Date of Receipt			
Mailing Address 15 HENDERSON AVE			03 / D D / Y Y Y Y 2019			
City PRINCETON	State NJ	Zip Code 08540-2607	Transaction ID : PR2706451053723 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		76.92			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)			
SUBTOTAL of Receipts This Page (optional)			307.68			
TOTAL This Period (last page this line numb	er only)					

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 167 OF

	-	Use separate schedule(s)	(check only one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12				
			13 14 15 16 17 berson for the purpose of soliciting contributions to solicit contributions from such committee.				
	ig the hame and a						
UnitedHealth Group Incorpo	orated PAC (l	JnitedHealth Group P	AC)				
Full Name of Individual (Last, First, Mide BARTHOLET, DANIEL, , ,	lle Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 5918 VALEWOOD DRIV	/E		03 31 2019				
City MINNETONKA	ETONKA State Zip Code MN 55345-6545						
FEC ID number of contributing federal political committee.	s a l						
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) Tax	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Mide PONS, NATALIE, , ,	lle Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 12970 EAST CIBOLA R			03 / D D / Y Y Y Y Y 2019				
City SCOTTSDALE	State AZ	Zip Code 85259-3563	Transaction ID : PR2740761953723 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		454.60				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment Gen Counsel	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$227.30 Bi-Weekly)					
Full Name of Individual (Last, First, Mido . MUHLBAUER, CYNTHIA, , ,	lle Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 5211 TIMBERRIDGE DI			03 / D D / Y Y Y Y 2019				
City PAPILLION	State NE	Zip Code 68133-2781	Transaction ID : PR2748019553723 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		76.92				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)				
SUBTOTAL of Receipts This Page (option	al)		916.12				
TOTAL This Period (last page this line nu	mber only)						

FOR LINE NUMBER:

PAGE 168 OF

	-	Use separate schedule(s)	(check only one)			
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17			
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)						
UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group PA	AC)			
Full Name of Individual (Last, First, Middle A. FEHR, STEPHANIE, , ,	Initial) or Full C	rganization Name	Date of Receipt			
Mailing Address 6601 BLACKFOOT PASS			03 31 2019			
City	State	Zip Code	Transaction ID : PR2748020553723			
EDINA	MN	55439-1103	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		384.60			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P, Mkt Grp CHRO	Memo Item			
Receipt For:	Aggregate	Year-to-Date ▼				
Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)			
Full Name of Individual (Last, First, Middle B. SIMON, JOHN, , ,	Initial) or Full C	rganization Name	Date of Receipt			
Mailing Address 1388 DIAMOND COURT			03 31 / Y Y Y Y Y 03 31 2019			
City	State PA	Zip Code	Transaction ID : PR2754663253723			
PITTSBURGH		15241-1220	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		384.60			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Advisory Svc	Memo Item			
Receipt For:	Aggregate	Year-to-Date V				
Primary General Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)			
Full Name of Individual (Last, First, Middle C. HOFFMAN, DOROTHY, , ,	Initial) or Full C	rganization Name	Date of Receipt			
Mailing Address 618 E 48TH STREET			M M / D D / Y			
City INDIANAPOLIS	State IN	Zip Code 46205-1846	Transaction ID : PR2754665253723 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		76.92			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ernal Affs Dir	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)			
SUBTOTAL of Receipts This Page (optional)		846.12			
TOTAL This Period (last page this line numl	per only)					

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 169 OF

		Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
			13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorp	orated PAC (l	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Mid BOTHRA, SIDDHARTH, , ,	dle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 17200 SE 45TH STRE	ΞT		M M / D D / Y Y Y Y 03 31 2019								
City BELLEVUE	State WA	Zip Code 98006-6510	Transaction ID : PR2754720753723 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 Ops	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Mid B. MAYER, SHANNON, , ,	dle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 13159 DANUBE LANE			03 / D D / Y Y Y Y Y 2019								
City ROSEMOUNT	State MN	Zip Code 55068-4378	Transaction ID : PR2755343953723 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		111.90								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) I Plan CEO	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 881.10	P/R Deduction (\$55.95 Bi-Weekly)								
Full Name of Individual (Last, First, Mid WEILER, KATHY, , ,	dle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 1250 CANTON AVENU			03 / D D / Y Y Y Y 2019								
City MILTON	State MA	Zip Code 02186-2414	Transaction ID : PR2755347653723 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CMO	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (option	' nal)		881.10								
TOTAL This Period (last page this line nu	Imber only)										

FOR LINE NUMBER:

PAGE 170 OF

		Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle ABRAHAM, SANTIAGO, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 2637 ARCOLA LANE			M M / D D / Y Y Y Y 03 31 2019							
City WAYZATA	State MN	Zip Code	Transaction ID : PR2755652153723							
		55391-9703	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		384.60							
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) IT	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
			1							
Full Name of Individual (Last, First, Middle WHITNEY, DEVIN, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 718 LONG BRIDGE STREE UNIT 302			03 / D D / Y Y Y Y Y 2019							
City SAN FRANCISCO	State CA	Zip Code 94158-2448	Transaction ID : PR2755932353723							
	_	94156-2446	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		76.92							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ⁄t Affs Dir	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General Other (specify) ▼	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middle ASHENHURST, KARLA, , ,	nitial) or Full C	Prganization Name	Date of Receipt							
Mailing Address 4000 SOUTH AVON DRIVE			03 / D D / Y Y Y Y Y 2019							
City NEW BERLIN	State WI	Zip Code 53151-6213	Transaction ID : PR2756173653723 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		96.16							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) t Affs Dir	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 288.48	P/R Deduction (\$48.08 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			557.68							
TOTAL This Period (last page this line number	er only)									

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 171 OF

		Use separate schedule(s) for each category of the	(check only one)							
		Detailed Summary Page	X 11a 11b 11c 12							
Any information copied from such Reports and or for commercial purposes, other than using			13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)		_								
ightarrow UnitedHealth Group Incorpora	ated PAC (JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle A. HERMELING III, THEODORE, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 117 5TH STREET			03 / D D / Y Y Y Y 2019							
	State IL	Zip Code 60091-3405	Transaction ID : PR2756521653723 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. MALLEY, KENNETH, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 764 WEST SADDLE RIVER	ROAD		03 31 2019							
City HO HO KUS	State NJ	Zip Code 07423-1645	Transaction ID : PR2757436653723							
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. AZAM, MISHAEL, , ,	Initial) or Full C	Prganization Name	Date of Receipt							
Mailing Address 212 DOUGLASS AVE			03 / D D / Y Y Y Y 03 31 2019							
City HADDONFIELD	State NJ	Zip Code 08033-1627	Transaction ID : PR2759343853723 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ernal Affs Dir	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 231.00	P/R Deduction (\$38.50 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			846.20							
TOTAL This Period (last page this line numb	er only)									

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 172 OF

ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports and or for commercial purposes, other than using the			person for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middle I A. DAVIS, JEFFREY, , ,	nitial) or Full O	rganization Name	Date of Receipt								
Mailing Address 317 STONERIDGE DRIVE			03 31 2019								
City	State	Zip Code	Transaction ID : PR2759422053723								
EAST WENATCHEE	WA	98802-5909	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		227.28								
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item								
United HealthCare Services Inc	Hlth	Plan CEO									
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General		207.00	P/R Deduction (\$113.64 Bi-Weekly)								
Other (specify) v		227.28									
Full Name of Individual (Last, First, Middle I B. SCHLAIFER, MARISSA, , ,	nitial) or Full O	rganization Name	Date of Receipt								
Mailing Address 1050 N STUART ST #400											
			03 31 2019								
City	State	Zip Code	Transaction ID : PR2759756853723								
ARLINGTON	VA	22201-5727	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		400.00								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Regl Affs	Memo Item								
Receipt For:		Year-to-Date ▼	—								
Primary General	, iggi ogulo	1000.00	P/R Deduction (\$200.00 Bi-Weekly)								
Other (specify) ▼											
Full Name of Individual (Last, First, Middle I C. MASTEN, DALE, , ,	nitial) or Full O	rganization Name	Date of Receipt								
Mailing Address 8800 BRITTANY DR			M = M / D = D / Y = Y = Y								
			03 31 2019								
City RULE ASH	State OH	Zip Code	Transaction ID : PR2760775853723								
BLUE ASH		45242-7812	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		434.78								
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item								
Optum Services, Inc	Dir F	Regl Affs									
Receipt For:	Aggregate	Year-to-Date V									
Primary General		652.17	P/R Deduction (\$217.39 Bi-Weekly)								
Other (specify)		7 7 7	4								
SUBTOTAL of Receipts This Page (optional)			1062.06								
TOTAL This Period (last page this line number	er only)										

FOR LINE NUMBER:

PAGE 173 OF

ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
			13 14 15 16 17 berson for the purpose of soliciting contributions te to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)	ing the name and a	derede er any political committe									
UnitedHealth Group Incorp	orated PAC (l	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Mic DELMONICO, SUSAN, , ,	Idle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 12 MULBERRY CIRCL	E		03 31 Y Y Y Y Y 03 31 2019								
City JOHNSTON	State RI	Zip Code 02919-2519	Transaction ID : PR2760781753723 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		260.86								
Name of Employer (for Individual) Optum Services, Inc											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 391.29	P/R Deduction (\$130.43 Bi-Weekly)								
Full Name of Individual (Last, First, Mic B. HARRIS, DAVID, , ,	Idle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 9436 S 47TH PLACE			03 31 2019								
City	State	Zip Code	Transaction ID : PR2760820753723								
PHOENIX	AZ	85044-7507	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		232.00								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Pharm Ops	Memo Item								
Receipt For: Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$116.00 Bi-Weekly)								
Other (specify) V	Other (specify) ▼ 348.00										
Full Name of Individual (Last, First, Mic CRAWFORD, KEVIN, , ,	,	rganization Name	Date of Receipt								
Mailing Address 1350 ROSA L PARKS	1	7. 0.4	03 / D D / Y Y Y Y 03								
City NASHVILLE	State TN	Zip Code 37208-2689	Transaction ID : PR2760825153723 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		272.72								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) rnal Affs Dir	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 272.72	P/R Deduction (\$136.36 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optio	nal)		765.58								
TOTAL This Period (last page this line n	umber only)		130568.00								

SCHEDULE B (FEC Form 3X)	1		FOR LIN	IE NUMBER: PAGE 174 OF 196
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check c	b 22 X 23 26 27
Any information copied from such Reports and State or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (Un	iitedHealth G	Froup PA	NC)
Full Name (Last, First, Middle Initial) A. Pharmaceutical Care Management Association Pol	itical Action (Committee (PCMA	PAC)	Date of Disbursement
Mailing Address 325 7th St, NW 9th Floor		1		03 05 2019
City Washington	State DC	Zip Code 20004		FEC Identification Number
Purpose of Disbursement Contribution		20004	011	C C00388819 Transaction ID : 43174535
Candidate Name			Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburse Senate President	ment For: Primary Other (spec	General cify) ▼		Contribution Memo Item
State: District: Full Name (Last, First, Middle Initial) B. Dr. Raul Ruiz For Congress Mailing Address PO Box 3433				Date of Disbursement 03 / D D / Y Y Y Y 2019
City Palm Desert Purpose of Disbursement Contribution	State CA	Zip Code 92261	011	FEC Identification Number
Candidate Name Ruiz, Raul, , Rep., Office Sought: Senate President State: CA District: 36	ment For: 2 Primary Other (spec	General	Category/ Type	Transaction ID : 43236797 Amount of Each Disbursement this Period 5000.00 Contribution Memo Item
Full Name (Last, First, Middle Initial) C. Scott Peters for Congress				Date of Disbursement
Mailing Address PO Box 22074				03 15 2019
City San Diego Purpose of Disbursement Contribution	State CA	Zip Code 92192	011	FEC Identification Number
Candidate Name Peters, Scott, , Rep.,			Category/ Type	Transaction ID : 43236798 Amount of Each Disbursement this Period
Office Sought: House Disburse Senate President State: CA District: 52	ment For: 2 Primary Other (spec	General		Contribution Memo Item
SUBTOTAL of Disbursements This Page (optional). TOTAL This Period (last page this line number only			-	12500.00

SCHEDULE E	3 (FEC Form 3X)			FOR LINE	NUMBER: PAGE 175 OF 196						
ITEMIZED DI		arate schedule(s) category of the	(check on	/ one)							
			Summary Page	21b 28a							
or for commercial p	urposes, other than using the na			ed by any per	rson for the purpose of soliciting contributions to solicit contributions from such committee.						
	. ,										
	th Group Incorporated	PAC (Ur	nitedHealth G	Froup PA							
	First, Middle Initial) sserman Schultz For C	Congress			Date of Disbursement						
Mailing Address	1071 Twin Branch Ln				03 15 2019						
City Weston		State FL	Zip Code 33326		FEC Identification Number						
Purpose of Disbu Contribution	ursement	12	33320	011	C C00385773						
Candidate Name				Category/	Transaction ID : 43236801 Amount of Each Disbursement this Period						
	n Schultz, Debbie, , ,			Type							
Office Sought: State: FL	x House Disburs Senate x President x District: 23	ement For: Primary Other (spe	General		Contribution Memo Item						
	First, Middle Initial) Cheri Bustos				Date of Disbursement						
City Washington Purpose of Disbu	ırsement	State DC	Zip Code 20035		FEC Identification Number						
Contribution				011	Transaction ID : 43236802						
Candidate Name Bustos, Ch				Category/	Amount of Each Disbursement this Period						
Office Sought:		ement For: Primary Other (spe	General	Туре	Contribution Memo Item						
Full Name (Last, C. John Kenne	First, Middle Initial) edy For US				Date of Disbursement						
	2900 Clearview Pkwy Suite 206				03 / D D / Y Y Y Y 03 15 2019						
City Metairie		State LA	Zip Code 70006		FEC Identification Number						
Purpose of Disbu Contribution Candidate Name	Iohn, , Sen.,			011 Category/ Type	C C00608398 Transaction ID : 43236803 Amount of Each Disbursement this Period						
Office Sought:		ement For: Primary Other (spe	General	туре	Contribution Memo Item						
SUBTOTAL of Dis	bursements This Page (optional)				7500.00						

S	CHEDULE B (FEC Form 3X)			F	OR L		NUMBER: PAGE 176 OF 196										
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(C	heck	only											
			Summary Page		\mid	21b 28a	22 X 23 26 27 28b 28c 29 30b										
	ny information copied from such Reports and State for commercial purposes, other than using the na					perso	on for the purpose of soliciting contributions										
$\left \right\rangle$	NAME OF COMMITTEE (In Full)		10. II.I. 101 - 4	~			N N										
	UnitedHealth Group Incorporated	PAC (Un	itedHealth (rou	рŀ	PAC))										
Α.	Full Name (Last, First, Middle Initial) Tina Smith for Minnesota						Date of Disbursement										
	Mailing Address PO Box 14362						03 15 2019										
	City Saint Paul	State MN	Zip Code 55114				FEC Identification Number										
	Purpose of Disbursement		55114	_	_	_	C C00663781										
	Contribution			C)11		Transaction ID : 43236804										
	Candidate Name			Cat	egor	y/	Amount of Each Disbursement this Period										
	Smith, Tina, , Sen., Office Sought: House Disburse	ement For: 2	2020	1	ype		1000.00										
	x Senate x	1	General				Contribution										
	State: MN District:	Other (spe	cify) 🔻				Memo Item										
	Full Name (Last, First, Middle Initial)																
В.							Date of Disbursement										
	Mailing Address PO Box 83142						M M / D D / Y										
	City	State	Zip Code				FEC Identification Number										
	Gaithersburg Purpose of Disbursement	MD	20883														
	Contribution			(011		C C00425470										
	Candidate Name				egory ype	y/	Transaction ID : 43236805 Amount of Each Disbursement this Period										
	Office Sought: House Disburse	ement For:		•	, , , , , , , , , , , , , , , , , , , ,		2500.00										
	Senate	Primary	General				Contribution										
	State: District:	Other (spec	сіту)				Memo Item										
_	Full Name (Last, First, Middle Initial)																
C.	Schneider For Congress						Date of Disbursement										
	Mailing Address PO Box 1318						03 / D D / Y Y Y Y 15 2019										
	City	State	Zip Code				FEC Identification Number										
	Deerfield Purpose of Disbursement	IL	60015	-	-		C C00495952										
	Contribution			C)11		Transaction ID : 43236853										
	Candidate Name Schneider, Brad, , Rep.,				egor ype	y/	Amount of Each Disbursement this Period										
	•	ement For: 2	2020		ype		2500.00										
	Senate 🗶	Primary	General				Contribution										
	State: IL District: 10	Other (spe	cify) 🔻				Memo Item										
Г	State: IL District: 10																
s	UBTOTAL of Disbursements This Page (optional).						6000.00										
т	OTAL This Period (last page this line number only	/)					, ,										

	CHEDULE B (FEC Form 3X)		arate schedule(s)	FOR LINE	
	EMIZED DISBURSEMENTS	for each	category of the Summary Page	(check only 21b 28a	22 X 23 26 27 28b 28c 29 30b
	y information copied from such Reports and State for commercial purposes, other than using the na				
\square	NAME OF COMMITTEE (In Full)				х х
	UnitedHealth Group Incorporated	PAC (UI	illeoneaith G)
A.	Full Name (Last, First, Middle Initial) Friends of Susan Brooks				Date of Disbursement
	Mailing Address 9425 N Meridian Street, #237				03 19 2019
	City Indianapolis	State IN	Zip Code 46260-1308		FEC Identification Number
	Purpose of Disbursement		40200-1308		С С00500207
				011	Transaction ID : 43238935
	Candidate Name			Category/	Amount of Each Disbursement this Period
	Brooks, Susan, , Rep., Office Sought: x House Disburse	ement For: 2	2020	Туре	2500.00
		Primary Other (spe	General		Memo Item
	State: IN District: 05	1			
D	Full Name (Last, First, Middle Initial)				Data of Disburgement
р.	Walberg for Congress				Date of Disbursement
	Mailing Address PO Box 1362				03 19 2019
	City	State	Zip Code		FEC Identification Number
	Jackson Purpose of Disbursement	MI	49204-1362		C C00390724
				011	Transaction ID : 43238959
				Category/	Amount of Each Disbursement this Period
	Walberg, Timothy, Lee, Rep., Office Sought: x House Disburse	ement For:	2020	Туре	5000.00
	Senate X	1	General		
	State: MI District: 07	Other (spe	cify)		Memo Item
~	Full Name (Last, First, Middle Initial)				Dete of Distance
C.	Liz Cheney for Wyoming				Date of Disbursement
	Mailing Address PO Box 697				03 / D D / Y Y Y Y 2019
	City	State	Zip Code		FEC Identification Number
	Casper Purpose of Disbursement	WY	82602		
				011	C C00607556
	Candidate Name			Category/	Transaction ID : 43238960 Amount of Each Disbursement this Period
	Cheney, Liz, , Rep., Office Sought: V House Disburse			Туре	2500.00
	Senate Disburse	ement For: 2	2020 General		
	President	Other (spe	cify) 🔻		Memo Item
_	State: WY District: 00				U
s	UBTOTAL of Disbursements This Page (optional).			····· ►	10000.00
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\square	UnitedHealth Group Incorporated	PAC (Un	integriealth G	sroup H	JAC)											
	Full Name (Last, First, Middle Initial)					Date of	Dich		nont							
А.	Oorah! PAC						Disc				Y Y Y					
ľ	Mailing Address P.O. Box 1053					03	/	19		Y	2019					
(Dity	State	Zip Code			FEC Ide	entific	cation	Num	her						
	Bloomington	IN	47402					Jacion	Turi							
ŀ	Purpose of Disbursement			011		С	C005	55185	3							
7	Candidate Name			<u> </u>					ID : 43							
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Ō	Office Sought: House Disburse	ement For:		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		5000.00										
	Senate	Primary	General					- 1		,						
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F	Full Name (Last, First, Middle Initial)															
В.	Bera for Congress					Date of	Disb	ourser	nent							
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_	Mailing Address PO Box 582496					03		25	5		2019					
	Dity Elk Grove	State CA	Zip Code 95758			FEC Ide	entific	cation	Num	ber						
	Purpose of Disbursement	04	95756		_	С	2004	6106	1		-					
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	Candidate Name			Categor	ry/					-	ent this Period					
	Bera, Amerish, , Rep.,			Туре												
(· · · ·	ement For:					5000.00									
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S	State: CA District: 07		city)			Memo Item										
	Full Name (Last, First, Middle Initial)															
С.	Joni For Iowa					Date of	Disb									
Ī	Mailing Address PO Box 93441					м м 03	/	25		Y	2019					
_		[1													
	City Des Moines	State IA	Zip Code 50393			FEC Ide	entific	cation	Num	ber						
	Purpose of Disbursement		50555			С	C005	54678	8		-					
	Contribution			011					ID : 4:	3240	894					
	Candidate Name			Categor	ry/						ent this Period					
_	Ernst, Joni, , Sen.,			Туре			-			_	5000.00					
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UnitedHealth Group Incorporated	PAC (Un	itedHealth G	iroup	D PA	(C)											
Full Name (Last, First, Middle Initial) A. Friends of Mark Warner						Date o	_	sburse		ent	VV	YYY				
Mailing Address 1751 Potomac Greens Dr						03	<i>'</i>		25	/		019				
City Alexandria	State VA	Zip Code 22314				FEC Id	lentif	icatio	n N	lumbe	er					
Purpose of Disbursement Contribution	<u></u>	22314	01	11		С)4387	_							
Candidate Name			Cate	gory/		Transaction ID : 43249895 Amount of Each Disbursement this Period										
Warner, Mark, Robert, Sen.,				pe					_	-		2500.00				
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 Full Name (Last, First, Middle Initial) B. Project West PAC 						Date o	_	D	D	ent /		Y Y				
Mailing Address 9227 East Lincoln Ave #200-435	<u></u>					03		2	25		_ 2	019				
City Lone Tree	State CO	Zip Code 80124				FEC Id	lentif	icatio	n N	lumbe	er					
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Full Name (Last, First, Middle Initial)C. AMERIPAC: The Fund for a Great	er Ameri	ca				Date o	_	sburse		ent	V	YY				
Mailing Address 700 13th Street NW, Suite 600						03			25	Ľ		019				
Washington	State DC	Zip Code 20005				FEC ld	lentif	icatio	n N	lumbe	er					
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or for commercial purposes, other than using the name and address of any political committies to solicit contributions from such committies to solicit contribution for solicit contribution All Rely On Your Beliefs Fund Date of Disbursement Malling Address One Constitution Ave, NE Date of Disbursement Contribution 011 Contribution 011 Category/ Category/ Office Sought: House President Disbursement For: State: Disbursement For: Malling Address Po Box 30844 011 City State Zip Code Malling Address Po Box 30844 011 City Sinate Disbursement For: Office Sought: House Disbursement For: Office Sought: House Disbursement For:<	nittee.
UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC) Full Name (Last, First, Middle Initial) A. Rely On Your Beliefs Fund Mailing Address One Constitution Ave, NE Ste 300 City Ste 300 City Washington Purpose of Disbursement Contribution Candidate Name Office Sought: State: Disbursement For: State: President State: District: Full Name (Last, First, Middle Initial) B. Building and Restoring the American Dream Fund Mailing Address PO Box 30844 City Bethesda Purpose of Disbursement For: Ontribution Candidate Name Candidate Name Candidate Name Office Sought: House Disbursement For: Office Sought: House Disbursement For: Candidate Name Office Sought: House Disbursement For: Office Sought: House Di	
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Type	s Period
Senate Primary General Contribution President Other (specify) ▼ Memo Item	0.00
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\backslash	NAME OF COMMITTEE (In Full)	// .		_	_										
	UnitedHealth Group Incorporated	PAC (Un	itedHealth (Grou	p F	PAC))								
Α.	Full Name (Last, First, Middle Initial) Devin Nunes Campaign Committe		Date of Disbursement												
	Mailing Address P.O. Box 6545		1				03 / 29 / Y Y Y Y 29 2019								
	City Visalia	State CA	Zip Code 93290				FEC Identification Number								
	Purpose of Disbursement	CA	93290	_	_	_	С С00370056								
	Contribution			C	011		Transaction ID : 43259963								
	Candidate Name			Cate		y/	Amount of Each Disbursement this Period								
	Nunes, Devin, , Mr., Office Sought: x House Disburse	ment For: 2	2020	T	ype		1000.00								
	Office Sought: X House Disburse Senate X	Primary	General												
	State: CA District: 22	Other (spec	cify) ▼				Contribution Memo Item								
	Full Name (Last, First, Middle Initial)														
В.	Jim Costa for Congress		Date of Disbursement												
	Mailing Address 2037 W Bullard Avenue, #355		03 / D D / Y Y Y Y Y 29 2019												
	City	State	Zip Code				FEC Identification Number								
	Fresno Purpose of Disbursement	CA	93711-1200												
	Contribution	C	011		C C00391029										
	Candidate Name			Cate	egor	v/	Transaction ID : 43259994 Amount of Each Disbursement this Period								
	Costa, James 'Jim', Manuel, Rep.,				ype										
		nent For: 2020					2500.00								
	President X	Primary Other (spec	General				Contribution								
	State: CA District: 16						Memo Item								
<u>с</u>	Full Name (Last, First, Middle Initial) Pete Aguilar For Congress						Date of Disbursement								
•							M M / D D / Y Y Y								
	Mailing Address PO Box 10954						03 29 2019								
	City San Bernardino	State CA	Zip Code 92423				FEC Identification Number								
	Purpose of Disbursement Contribution						C C00510461								
	Candidate Name			C)11	_	Transaction ID : 43260060								
	Aguilar, Pete, , Rep.,	egor ype	у/	Amount of Each Disbursement this Period											
	Office Sought: X House Disburse			2500.00											
	Senate x	Primary				Contribution									
	President	Other (spec	cify) 🔻				Memo Item								
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$\left \right\rangle$	NAME OF COMMITTEE (In Full)			~	-											
	UnitedHealth Group Incorporated	PAC (Un	itedHealth (rouخ	p F	PAC))									
Α.	Full Name (Last, First, Middle Initial) Susan Davis For Congress						Date of Disbursement									
	Mailing Address PO Box 84049						03 29 2019									
	City	State	Zip Code				FEC Identification Number									
	San Diego Purpose of Disbursement	CA	92138				0 000044074									
	Contribution			C)11		C C00344671									
	Candidate Name			Cate	egor	v/	Transaction ID : 43260061 Amount of Each Disbursement this Period									
	Davis, Susan, A., Rep.,				ype	<i>J'</i>										
		ement For: 2					2500.00									
	Senate x	Primary Other (spec	General				Contribution									
	State: CA District: 53	Other (spec	City) 🔻				Memo Item									
	Full Name (Last, First, Middle Initial)															
В.	Vargas for Congress		Date of Disbursement													
	Mailing Address 330 Encinitas Boulevard Suite 101		03 29 2019													
	City Encinitas		FEC Identification Number													
	Purpose of Disbursement Contribution				C C00497321											
	Candidate Name)11	_	Transaction ID : 43260072											
	Vargas, Juan, C., Rep.,			Cate T	egor ype	у/	Amount of Each Disbursement this Period									
		ment For: 2020			Турс		5000.00									
	Senate X	1				Contribution										
	State: CA District: 51	Other (spec	cify)				Memo Item									
	State: CA District: 51 Full Name (Last, First, Middle Initial)						_									
C.	Bilirakis for Congress						Date of Disbursement									
	Mailing Address PO Box 606		03 / D D / Y Y Y Y 29 2019													
	City Tarpon Springs	State FL	Zip Code 34688-0606				FEC Identification Number									
	Purpose of Disbursement			-	_	_	C C00408534									
	Contribution			C)11		Transaction ID : 43260073									
	Candidate Name	y/	Amount of Each Disbursement this Period													
	Bilirakis, Gus, Michael, Rep., Office Sought:		2500.00													
	Senate Disburse															
	President	Primary Other (spec	General cify) ▼				Contribution Memo Item									
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	th Group Incorporated	PAC (Ur	integhealth (JOUD PAC)				
Full Name (Last, A. Debbie For	First, Middle Initial) Congress	Date of Disbursement							
Mailing Address	PO Box 566442				03 29 2019				
City Miami		State FL	Zip Code 33256		FEC Identification Number				
Purpose of Disbu	irsement		33230		C C00652065				
Contribution				011	Transaction ID : 43260074				
Candidate Name	owell, Debbie, , Rep.,			Category/ Type	Amount of Each Disbursement this Period				
Office Sought:		ement For:	2020	Type	1000.00				
	Senate X	_	General		Contribution				
State: FL	District: 26	Other (spe	city) 🔻		Memo Item				
Full Name (Last,	First, Middle Initial)								
B. Friends Of	Neal Dunn	Date of Disbursement							
Mailing Address	PO Box 16088	03 / 29 / Y Y Y 2019							
City		State FL	Zip Code 32406		FEC Identification Number				
Panama City Purpose of Disbu	irsement								
Contribution		C C00582304 Transaction ID : 43260075							
Candidate Name	Den			Category/	Amount of Each Disbursement this Period				
Dunn, Neal Office Sought:		ement For:	2020	Туре	2500.00				
		Primary	General		Contribution				
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	District: 02 First, Middle Initial)								
_	Balart For Congress				Date of Disbursement				
	8724 SW 72nd Street				M m / D D / Y H Y H Y Y 03 29 2019 2019				
City Miami	# 420	State FL	Zip Code 33173		FEC Identification Number				
Purpose of Disbu	irsement				С С00376087				
Contribution Candidate Name		011	Transaction ID : 43260076						
	, Mario, , Rep.,	Amount of Each Disbursement this Period							
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State: FL	District: 25	Other (spe	city) 🔻		Memo Item				
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I	PAC (Un	itedHealth G	Group PAC	;)				
Full Name (Last, First, Middle Initial) A. David Scott For Congress Mailing Address P.O. Box 960821	Date of Disbursement							
	State	Zip Code		FEC Identification Number				
Riverdale Purpose of Disbursement Contribution	GA	30296	011	C C00369801				
Candidate Name Scott, David, Albert, Rep.,			Category/ Type	Transaction ID : 43260077 Amount of Each Disbursement this Period				
Office Sought: Senate President State: GA District: 13	ment For: 2 Primary Other (spec	General		Contribution Memo Item				
Full Name (Last, First, Middle Initial) B. Drew Ferguson For Congress Inc. Mailing Address PO Box 387	Date of Disbursement 03 29 2019							
City West Point Purpose of Disbursement Contribution	011	FEC Identification Number						
Candidate Name Ferguson, Anderson, , Rep., Office Sought: x House Disburser	ment For: 2 Primary Other (spec	General	011 Category/ Type	Transaction ID : 43260078 Amount of Each Disbursement this Period 2500.00 Contribution				
State: GA District: 03		- ,,		Memo Item				
C. Case For Congress Mailing Address 1253 S. Beretania St., #8888				Date of Disbursement				
City Honolulu Purpose of Disbursement Contribution Candidate Name	011	FEC Identification Number C C00680918 Transaction ID : 43260079 Amount of Fach Dickuragement this Derived						
Case, Edward, , Rep.,	ment For: 2 Primary Other (spec	General	Category/ Type	Amount of Each Disbursement this Period 1000.00 Contribution Memo Item				
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$\left \right\rangle$	NAME OF COMMITTEE (In Full)		·,	_	_						
	UnitedHealth Group Incorporated	PAC (Un	itedHealth (Grou	p P/	AC)					
Α.	Full Name (Last, First, Middle Initial) Guthrie For Congress	Date of Disbursement									
	Mailing Address PO Box 9639					03 29 2019					
	City	State	Zip Code			FEC Identification Number					
	Bowling Green Purpose of Disbursement	KY	42102-9639			C 000445022					
	Contribution			C)11	C C00445023					
	Candidate Name			Cate	egory/	Transaction ID : 43260080 Amount of Each Disbursement this Period					
	Guthrie, S., Brett, Rep.,				ype						
		ement For: 2				2500.00					
	Senate x	Primary Other (spec	General Gifv) ▼			Contribution					
	State: KY District: 02		y) ▼			Memo Item					
	Full Name (Last, First, Middle Initial)										
Β.	Angie Craig For Congress	Date of Disbursement									
		M M / D D / Y Y Y Y									
	Mailing Address PO Box 22116	03 29 2019									
	City		FEC Identification Number								
	Eagan Purpose of Disbursement										
	Contribution	C C00575209									
	Candidate Name			Cate	egory/	Transaction ID : 43260081 Amount of Each Disbursement this Period					
	Craig, Angela, , ,				ype						
		ment For: 2020				1000.00					
	Senate x President	Primary Other (spec	General			Contribution					
	State: MN District: 02	Other (spec	city)			Memo Item					
_	Full Name (Last, First, Middle Initial)					Date of Distances of					
U.	George Holding For Congress Inc					Date of Disbursement					
	Mailing Address PO Box 97187					03 / 29 / Y Y Y Y 2019					
	City Raleigh	State NC	Zip Code 27624			FEC Identification Number					
	Purpose of Disbursement			_	_	C C00499236					
	Contribution	Transaction ID : 43260082									
	Candidate Name	Amount of Each Disbursement this Period									
	Holding, George, , Rep., Office Sought:	2500.00									
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$\left \right\rangle$	NAME OF COMMITTEE (In Full)			_	-													
	UnitedHealth Group Incorporated	PAC (Un	itedHealth (Grou	ip P	PAC)												
A.	Full Name (Last, First, Middle Initial) A. Walker 4 NC									Date of Disbursement								
	Mailing Address PO Box 99247							03 29 2019										
	City	State NC	Zip Code				FEC Identification Number											
	Raleigh Purpose of Disbursement	NC	27624				C	-										
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	Candidate Name			Cate	egory	//	Transaction ID : 43260083 Amount of Each Disbursement this Period											
	Walker, Bradley, , Rep.,				ype													
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	Mailing Address 900 S Pavilion Center Dr. Suite 160		03		2	9		2019										
	City Las Vegas Purpose of Disbursement		FEC Id				ber	-										
	Contribution Candidate Name		011		C C00504613 Transaction ID : 43260084 Amount of Each Disbursement this Period													
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C.	Full Name (Last, First, Middle Initial) Elise For Congress						Date of	f Disb	ourse	ment								
	Mailing Address PO Box 500		03	/	29	_		2019										
	City Glens Falls	State NY	Zip Code 12801				FEC Id	entific	catior	Num	ber							
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\backslash	NAME OF COMMITTEE (In Full)								
$ \rangle$	UnitedHealth Group Incorporated	PAC (Ur	nitedHealth (Group PAC)				
Α.	Full Name (Last, First, Middle Initial) Katko For Congress	Date of Disbursement							
	Mailing Address 228 S Washington St Ste 115		03 29 2019						
	City	State VA	Zip Code 22314		FEC Identification Number				
	Alexandria Purpose of Disbursement	v /1	22314		C C00556365				
				011	Transaction ID : 43260086				
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В.	Tom Reed for Congress				Date of Disbursement				
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	Mailing Address PO Box 10847				03 29 2019				
	City	State	Zip Code		FEC Identification Number				
	Rochester Purpose of Disbursement	NY	14610		C C00464032				
	Contribution			011	Transaction ID : 43260087				
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	Reed, Thomas, W., Rep., II Office Sought: x House Disburse	ement For:	2020	Туре	2500.00				
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C.	Full Name (Last, First, Middle Initial) Mullin For Congress				Date of Disbursement				
					M M / D D / Y Y Y Y				
	Mailing Address PO Box 3681				03 29 2019				
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	Muskogee Purpose of Disbursement	OK	74402		C C00498345				
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Detailed Summary Page 28a 28b 28c 29 30b Any information copied from such Reports and Statements may not be sold or used by any peritical committee to solicit contributions from such committee. All and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC) Full Name (Last, First, Middle Initial) A. Joe Wilson For Congress Date of Disbursement Mailing Address PO Box 2145 011 011 City State Zip Code Purpose of Disbursement 011 Contribution Category/ State Disbursement For: 2020 Wilson, Joe, , Rep., Disbursement For: 2020 Contribution Full Name (Last, First, Middle Initial) B. Tom Rice For Congress Date of Disbursement Mailing Address Po Box 70098 State Zip Code 29 / 2019 Full Name (Last, First, Middle Initial) B. Tom Rice For Congress Date of Disbursement Contribution Mailing Address Po Box 70098 City State Zip Code 29 / 2019 Full Name (Last, First, Middle Initial) B. Tom Rice For Congress Disbursement For: 2020 Fiel dentification Numb
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Full Name (Last, First, Middle Initial)
C. Dan Crenshaw For Congress
Mailing Address PO Box 430965
City State Zip Code FEC Identification Number
Houston TX 77243
Purpose of Disbursement Contribution 011
Candidate Name Transaction ID : 43260091 Candidate Name Category/
Crenshaw, Daniel, , Rep., Type
Office Sought: House Disbursement For: 2020 2500.00
Senate Primary General Contribution
President Other (specify) ▼ State: TX District: 02
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NAME OF COMMITTEE (In Full)															
UnitedHealth Group Incorporated	PAC (Ur	nitedHealth G	Grou	p F	PAC))									
Full Name (Last, First, Middle Initial) A. Hurd For Congress				Date of Disbursement											
Mailing Address PO Box 761029		State Zip Code TX 78245					FEC Identification Number								
City San Antonio															
Purpose of Disbursement Contribution	1		0	11	٦	C	1. A	54546	-	26000	12				
Candidate Name			Cate	egory	y/	Transaction ID : 43260092 Amount of Each Disbursement this Period									
Hurd, William, , Rep.,			Ту	ype			-	-			2500.00	٦.			
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Full Name (Last, First, Middle Initial) B. Kenny Marchant For Congress Mailing Address PO Box 110187		Date o	_	burse	D /		2019								
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C. Michael Burgess for Congress						Date o		burse		v	Y Y Y				
Mailing Address PO Box 2334						03	′	29			2019				
City Denton	State TX	Zip Code 76202-2334				FEC Id	lentifi	catior	Numl	ber					
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	UnitedHealth Group Incorporated			broup		(U)										
	Full Name (Last, First, Middle Initial) Olson For Congress Committee						Date of Disbursement									
	Mailing Address PO Box 16381							03 29 2019								
	City Sugar Land	State TX	Zip Code 77496-6381				FEC Ide	entifica	tion	Numbe	er					
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	Candidate Name			Categ		11	Transaction ID: 43260095 Amount of Each Disbursement this Period									
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B.	Full Name (Last, First, Middle Initial) Texans For Jodey Arrington Mailing Address PO Box 6687		Date of	Disbu		D /		019]							
	City Lubbock Purpose of Disbursement				FEC Ide	entifica C00588			er	-						
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UnitedHealth Group Incorporated	PAC (Ur	itedHealth G	Froup PAC)					
Full Name (Last, First, Middle Initial) A. House Republican Caucus Campa	Full Name (Last, First, Middle Initial) House Republican Caucus Campaign Committee								
Mailing Address PO Box 1068				03 / D D / Y Y Y Y 21 2019					
City	State KY	Zip Code		FEC Identification Number					
Frankfort Purpose of Disbursement Contribution	κĭ	40602	011	С					
Candidate Name			Category/ Type	Transaction ID : 43244434 Amount of Each Disbursement this Period					
Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General		5000.00 Contribution					
State: District:				Memo Item					
 Full Name (Last, First, Middle Initial) B. Republican Party of Kentucky (No Mailing Address 105 W. Third St. 		Date of Disbursement							
Erankfort City Frankfort	State KY	Zip Code 40601		FEC Identification Number					
Purpose of Disbursement Contribution		011	C Transaction ID : 43244438						
Candidate Name			Category/ Type	Amount of Each Disbursement this Period					
Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General		5000.00 Contribution					
State: District:		city)		Memo Item					
Full Name (Last, First, Middle Initial) C. Senate Republican Caucus Camp									
Mailing Address P.O. Box 1068									
City Frankfort	State KY	Zip Code 40602		FEC Identification Number					
Purpose of Disbursement Contribution	011	C Transaction ID : 43244439							
Candidate Name	Category/ Type	Amount of Each Disbursement this Period							
Senate President	ement For: Primary Other (spe	General cify) ▼		Contribution Memo Item					
State: District:									
SUBTOTAL of Disbursements This Page (optional).			F	15000.00					
TOTAL This Period (last page this line number only	/)		•••••• •						

SCHEDULE B (FEC Form 3X)			FOR LINE I	NUMBER: PAGE 192 OF 196						
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a							
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (Un	itedHealth G	iroup PAC)						
Full Name (Last, First, Middle Initial) A. Citizens for Patrick Browne				Date of Disbursement						
Mailing Address PO Box 90307				03 25 2019						
Allentown	State PA	Zip Code 18109		FEC Identification Number						
Purpose of Disbursement Contribution			011	C Transaction ID : 43249907						
Candidate Name Browne, Patrick, , PA Sen.,			Category/ Type	Amount of Each Disbursement this Period						
Office Sought: House Disburser Senate President District:	nent For: Primary Other (spec	General Sify) ▼		Contribution Memo Item						
Full Name (Last, First, Middle Initial) B. Friends of Bryan Cutler Mailing Address PO Box 624		Date of Disbursement 03 / D D / Y Y Y Y Y 25 2019								
City Quarryville Purpose of Disbursement		FEC Identification Number								
Candidate Name Cutler, Bryan, , PA Rep.,	Contribution Candidate Name Cutler, Bryan, , PA Rep., Office Sought: House Senate President Disbursement For: General Other (specify)									
Full Name (Last, First, Middle Initial) C. Friends of Frank Dermody				Date of Disbursement						
Mailing Address PO Box 274				03 25 2019						
City Tarentum Purpose of Disbursement Contribution Candidate Name	Tarentum PA 15084-0274 Purpose of Disbursement Contribution									
Dermody, Frank, , PA Rep., Office Sought: House Disburser Senate President District:	ment For: Primary Other (spec	General Cify) ▼	Category/ Type	Amount of Each Disbursement this Period 1000.00 Contribution Memo Item						
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)				3000.00						

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S	CHEDULE B (FEC Form 3X)				NUMBER: PAGE 193 OF 196		
	EMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page				
					22 23 26 27 28b 28c x 29 30b		
Δr	ny information copied from such Reports and State	ments may	ents may not be sold or user		· · · · · · · · · · · · · · · · · · ·		
	for commercial purposes, other than using the na						
\setminus	NAME OF COMMITTEE (In Full)						
	VinitedHealth Group Incorporated PAC (UnitedHealth Group PAC)						
~	Full Name (Last, First, Middle Initial)	Date of Disbursement					
А.	Friends of Joe Pittman						
	Mailing Address P.O. Box 382	03 25 2019					
	City Indiana	State PA	Zip Code 15701		FEC Identification Number		
	Purpose of Disbursement Contribution			044	С		
	Contribution 011				Transaction ID : 43249910		
	Pittman, Joe, , ,			Category/ Type	Amount of Each Disbursement this Period		
		ement For:			1000.00		
	Senate	Primary	General		Contribution		
	State: District:	Other (specify)			Memo Item		
_	Full Name (Last, First, Middle Initial)						
Β.	Jay Costa Jr. for State Senate				Date of Disbursement		
	Mailing Address 314 Newport Road		M M / D D / Y Y Y Y 03 25 2019				
	Walling Address 314 Newport Road				2010		
	City	State	Zip Code		FEC Identification Number		
	Pittsburgh PA 15221 Purpose of Disbursement				\mathbf{C}		
	Contribution				C Transaction ID : 43249911		
	Candidate Name Category/ Type Costa, Jay, , PA Sen., Jr. Category/ Type Office Sought: House Senate Primary President Other (specify)				Amount of Each Disbursement this Period		
				Туре	1000.00		
					Contribution		
					Memo Item		
	State: District:	-					
c	Full Name (Last, First, Middle Initial)				Date of Disbursement		
С.	Senate Republican Campaign Committee						
	Mailing Address PO Box 792				03 25 2019		
	City	State	Zip Code		FEC Identification Number		
	Harrisburg PA 17108 Purpose of Disbursement				С		
	Contribution 011				Transaction ID : 43249912		
	Candidate Name C				Amount of Each Disbursement this Period		
	Office Sought: House Disburse	Туре	2500.00				
	Senate	Primary General			Contribution		
	President	Other (spe	cify) 🔻		Memo Item		
_	State: District:						
s	UBTOTAL of Disbursements This Page (optional).			••••••	4500.00		
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SCHEDULE B (FEC Form 3X)			FOR LINE I	NUMBER PAGE 194 OF 196	
ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the		one)	
		Summary Page	21b 28a	22 23 26 27 28b 28c x 29 30b	
Any information copied from such Reports and Stat or for commercial purposes, other than using the na			d by any perso	n for the purpose of soliciting contributions	
UnitedHealth Group Incorporated	PAC (Ur	nitedHealth G	iroup PAC)	
Full Name (Last, First, Middle Initial) A. PA House Republican Campaign	PA House Republican Campaign Committee				
Mailing Address 500 N Third St. 4th Floor PO Box 11787					
City Harrisburg	State PA	Zip Code 17108		FEC Identification Number	
Harrisburg Purpose of Disbursement Contribution		17106	011		
Candidate Name		L		Transaction ID : 43249913 Amount of Each Disbursement this Period	
Senate President	ement For: Primary Other (spe	General cify) ▼		2000.00 Contribution Memo Item	
State: District:					
 Full Name (Last, First, Middle Initial) B. Commonwealth Victory Fund 	Full Name (Last, First, Middle Initial) Commonwealth Victory Fund				
Mailing Address 1710 East Franklin St 2nd Floor					
City Richmond	State VA	Zip Code 23223		FEC Identification Number	
Purpose of Disbursement Contribution		011	C Transaction ID : 43249914		
Candidate Name	Candidate Name Ca			Amount of Each Disbursement this Period	
Senate	ement For: Primary	General	Туре	15000.00 Contribution	
State: District:	Other (spe	cify)		Memo Item	
Full Name (Last, First, Middle Initial) Better Colorado Alliance				Date of Disbursement	
Mailing Address PO Box 100033	03 / D D / Y Y Y Y 25 2019				
City Denver	State CO	Zip Code 80250		FEC Identification Number	
Purpose of Disbursement Contribution 011					
Candidate Name	Category/ Type	Transaction ID : 43249915 Amount of Each Disbursement this Period			
	Office Sought: House Disbursement For: Senate Primary General			12000.00	
State: District:	Other (spe			Contribution Memo Item	
SUBTOTAL of Disbursements This Page (optional)				29000.00	
TOTAL This Period (last page this line number on	y)		•••••• •		

S	CHEDULE B (FEC Form 3X)			FOR LINE I	NUMBER: PAGE 195 OF 196
ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page		(check only 21b 28a	one) 22 23 26 27 28b 28c x 29 30b
	y information copied from such Reports and State for commercial purposes, other than using the na				
\setminus	NAME OF COMMITTEE (In Full)				
	UnitedHealth Group Incorporated	PAC (Un	itedHealth G	Froup PAC)
A.	Full Name (Last, First, Middle Initial) Leading Colorado Forward	Date of Disbursement			
	Mailing Address PO Box 102766	03 25 2019			
	City Denver	State CO	Zip Code 80250		FEC Identification Number
	Purpose of Disbursement		00230		С
	Contribution Candidate Name			011	Transaction ID : 43249919
				Category/ Type	Amount of Each Disbursement this Period
	Office Sought: House Disburse Senate President	ment For: Primary Other (spec	General		Contribution
	State: District:		., .		Memo Item
B.	Full Name (Last, First, Middle Initial) Senate Majority Fund Mailing Address 2318 Curtis Street				Date of Disbursement
	City Denver	State CO	Zip Code 80205		FEC Identification Number
	Purpose of Disbursement Contribution				C Transaction ID : 43249920
				Category/ Type	Amount of Each Disbursement this Period
	Office Sought: House Disburse Senate President	ment For: Primary Other (spec	General		10000.00 Contribution
	State: District:		<i>,</i> ,		Memo Item
C.	Full Name (Last, First, Middle Initial) Values First Colorado				Date of Disbursement
	Mailing Address 601 16th Street Ste C, #406				03 25 2019
	City Golden	State CO	Zip Code 80401		FEC Identification Number
	Purpose of Disbursement Contribution			011	C Transaction ID : 43249921
	Candidate Name	Category/ Type	Amount of Each Disbursement this Period		
	Inffice Sought: House Disbursement For: Senate Primary General				5000.00 Contribution
	State: District:	Other (specify) ▼			Memo Item
s	UBTOTAL of Disbursements This Page (optional).			····· ►	32500.00
Т	OTAL This Period (last page this line number only	/)		••••••	

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SC	HEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 196 OF 196	
ITE	EMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page		one)	
					22 23 26 27 28b 28c x 29 30b	
An	y information copied from such Reports and State	ments may	not be sold or use	ed by any perso		
	for commercial purposes, other than using the nat					
\backslash	NAME OF COMMITTEE (In Full)				、	
	UnitedHealth Group Incorporated	PAC (Ur	litedHealth G	STOUP PAC)	
	Full Name (Last, First, Middle Initial)		_			
Α.	PA Chamber of Business and Indu	Date of Disbursement				
	Mailing Address 327 Seymour Ave	03 / D D / Y Y Y Y 29 2019				
	City					
	Lansing	State PA	Zip Code 48933		FEC Identification Number	
	Purpose of Disbursement Contribution				С	
	Candidate Name			011	Transaction ID : 43260097	
				Category/ Type	Amount of Each Disbursement this Period	
	°	ment For:			2500.00	
	Senate President	Primary Other (spe	General		Contribution	
	State: District:	Other (spe	City) 🔻		Memo Item	
	Full Name (Last, First, Middle Initial)					
Β.	PA Chamber of Business and Indu	ustry PA	С		Date of Disbursement	
	Mailing Addross 207 Courseur Aug				03 29 2019	
	Mailing Address 327 Seymour Ave				23 2019	
	City	State PA	Zip Code 48933		FEC Identification Number	
	Lansing Purpose of Disbursement		С			
	Contribution				Transaction ID : 43260098	
	Candidate Name	Categ			Amount of Each Disbursement this Period	
	Type Office Sought: House Senate Primary President Other (specify)			Туре	1000.00	
					Contribution	
					Memo Item	
	State: District:					
-	Full Name (Last, First, Middle Initial) Michigan Association of Health Plans PAC				Date of Disbursement	
					M M / D D / Y Y Y Y	
	Mailing Address 327 Seymour Ave				03 29 2019	
	City	State	Zip Code		FEC Identification Number	
	Lansing MI 48933 Purpose of Disbursement					
	Contribution 011				C Transaction ID : 43260111	
	Candidate Name			Category/	Amount of Each Disbursement this Period	
	Office Sought: House Disbursement For:				5000.00	
	Senate	Primary	General			
	President	Other (spe			Contribution	
_	State: District:					
SUBTOTAL of Disburgements This Page (optional) 8500.00						
SUBTOTAL of Disbursements This Page (optional)						
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