

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

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

12FE4M5

UnitedHealth Group Incorporated PAC (United for Health)

ADDRESS (number and street)

9900 Bren Road East

Check if different
than previously
reported. (ACC)

Minnetonka

MN

55343

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00274431

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Apr 20 (M4) ☒ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

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

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

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

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
06 01 2016

through

M M M / D D D / Y Y Y Y Y Y
06 30 2016

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

Type or Print Name of Treasurer

Sherwood, Susan, , ,

Signature of Treasurer

Sherwood, Susan, , ,

Date

M M M / D D D / Y Y Y Y Y Y
07 20 2016

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

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

UnitedHealth Group Incorporated PAC (United for Health)

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
06 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		135129.80
(b) Cash on Hand at Beginning of Reporting Period.....	147968.27	
(c) Total Receipts (from Line 19)	92837.68	553020.18
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	240805.95	688149.98
7. Total Disbursements (from Line 31)	131750.00	579094.03
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	109055.95	109055.95
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 the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

UnitedHealth Group Incorporated PAC (United for Health)

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	6

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).....	80517.76	431809.61
(ii) Unitemized	12319.92	121210.57
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	92837.68	553020.18
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	92837.68	553020.18
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	92837.68	553020.18
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	92837.68	553020.18

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	112000.00	492500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	394.03
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	394.03
29. Other Disbursements (Including Non-Federal Donations).....	19750.00	86200.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	131750.00	579094.03
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	131750.00	579094.03

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	92837.68	553020.18
34. Total Contribution Refunds (from Line 28(d))	0.00	394.03
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	92837.68	552626.15
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ACQUAVIVA, GREGORY L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Govt Affs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.06

Date of Receipt

MM / DD / YYYY
06 / 03 / 2016

Transaction ID : 39571817

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ENDERLE, JOHN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Regn Exec Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

MM / DD / YYYY
06 / 03 / 2016

Transaction ID : 39572157

Amount of Each Receipt this Period

55.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NEURURER, SCOTT A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

140.40

Date of Receipt

MM / DD / YYYY
06 / 03 / 2016

Transaction ID : 39572519

Amount of Each Receipt this Period

14.04

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

107.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 155

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TUFTO, DARLA, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services IncOccupation (for Individual)
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
06	03	2016

Transaction ID : 39572766

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ACQUAVIVA, GREGORY L, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services IncOccupation (for Individual)
Dir Govt Affs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.86

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
06	17	2016

Transaction ID : 39625598

Amount of Each Receipt this Period

71.80

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GONG, RONALD MICHAEL, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services IncOccupation (for Individual)
M R Sls Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

468.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
06	17	2016

Transaction ID : 39625893

Amount of Each Receipt this Period

39.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

610.80

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

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

FOR LINE NUMBER: PAGE 8 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARTLEY, MICHAEL, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

MM / DD / YYYY
06 / 17 / 2016

Transaction ID : 39625934

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NEURURER, SCOTT A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.04

Date of Receipt

MM / DD / YYYY
06 / 17 / 2016

Transaction ID : 39626208

Amount of Each Receipt this Period

90.64

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BUNKER, JONATHON, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Southwest Medical Assoc. Inc.

Occupation (for Individual)
Regn CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY
06 / 22 / 2016

Transaction ID : 39704461

Amount of Each Receipt this Period

5000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

7590.64

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

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

FOR LINE NUMBER: PAGE 9 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. UnitedHealth Group Incorporated

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

MM / DD / YYYY
06 / 02 / 2016

Transaction ID : 39712628

Amount of Each Receipt this Period

39.00

☐ Memo Item

Misdeposited Funds Refunded July 2016

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GONG, RONALD MICHAEL, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
M R SIs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

MM / DD / YYYY
06 / 06 / 2016

Transaction ID : 39712629

Amount of Each Receipt this Period

39.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NOBLITT, KEITH W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SCE 3 NAs Ind Contr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR1159805541924

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

118.00

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

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

FOR LINE NUMBER: PAGE 10 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WATSON III, JAMES S, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Assc Gen Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1159806041924

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WICHMANN, DAVID S, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Pres UHG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1159814741924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ERLANDSON, PATRICK J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UHC International Services Inc

Occupation (for Individual)
SVP Bus Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1159815941924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

819.20

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

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

FOR LINE NUMBER: PAGE 11 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MUNSELL, WILLIAM A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Sr Advsr to Office of CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1159816641924

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PENSHORN, JOHN S, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP UnitedHlth Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1159816941924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KALLMEYER, PAUL D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Deputy Gen Counsel Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1159817441924

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

684.60

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

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

FOR LINE NUMBER: PAGE 12 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. QUIRK, THOMAS J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1159819141924

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MIGLIORI, RICHARD J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
EVP Consumr Hlth Med Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2139.06

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1159827441924

Amount of Each Receipt this Period

408.68

☐ Memo Item

P/R Deduction (\$204.34 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RIVET, JEANNINE M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
EVP UnitedHlth Grp

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1159830041924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

893.28

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

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

FOR LINE NUMBER: PAGE 13 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRESOLIN, MICHAEL J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Dir Care Advo

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1551005741924

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MATTEO, MICHAEL C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Chief Growth Off

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.56

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1551133441924

Amount of Each Receipt this Period

230.76

☐ Memo Item

P/R Deduction (\$115.38 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILLER, KATHERINE V, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Ntwk Contractng

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

346.15

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1554324341924

Amount of Each Receipt this Period

93.40

☐ Memo Item

P/R Deduction (\$46.70 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

364.16

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

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

FOR LINE NUMBER: PAGE 14 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ANDERSON, CRAIG C., , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Regn Pres Ntwk Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1575957341924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ERICKSON, KAREN L., , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Optum Exec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1575957641924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MONFILETTO, ERNEST, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Ntwk Prgrms

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

923.04

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1575958141924

Amount of Each Receipt this Period

153.84

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

615.36

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

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

FOR LINE NUMBER: PAGE 15 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VALENTA, LEE D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Pres Lif Scis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR1575958541924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KELLY, JOHN W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR1575959741924

Amount of Each Receipt this Period

217.38

☐ Memo Item

P/R Deduction (\$108.69 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WEBB, ROBERT THOMAS, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP UnitedHlth Grp

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR1580865341924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

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

TOTAL This Period (last page this line number only).....▶

986.58

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

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

FOR LINE NUMBER: PAGE 16 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HUGHES, RICHARD J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP COO of Human Capital

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1596304141924

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNSON, THAD C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Mkt Group Gen Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2139.06

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1596304341924

Amount of Each Receipt this Period

408.68

☐ Memo Item

P/R Deduction (\$204.34 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHUMACHER, DANIEL J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Mkt Group COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1596305441924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

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

TOTAL This Period (last page this line number only).....▶

993.28

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. THEISEN, SCOTT E, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, IncOccupation (for Individual)
SVP Bus Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR1596305641924

Amount of Each Receipt this Period

38.46

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEWIS, THOMAS D, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services IncOccupation (for Individual)
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

961.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR1596306941924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OBERRENDER, ROBERT W, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services IncOccupation (for Individual)
SVP Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR1596307041924

Amount of Each Receipt this Period

414.54

☐ Memo Item

P/R Deduction (\$207.27 Bi-Weekly)

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

TOTAL This Period (last page this line number only).....▶

645.30

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

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

FOR LINE NUMBER: PAGE 18 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FLYNN, DIANE BEDNAR, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Regn Exec Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR1596309741924

Amount of Each Receipt this Period

78.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DAVIDSON, TRACY L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1629.34

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR1596311641924

Amount of Each Receipt this Period

454.54

☐ Memo Item

P/R Deduction (\$227.27 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HEUMANN, KURT A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR1596313741924

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

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

TOTAL This Period (last page this line number only).....▶

572.54

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

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

FOR LINE NUMBER: PAGE 19 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MALLATT, KATHLEEN A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1596315441924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROSENTHAL, DANIEL I, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Pres Ntwk

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1596317341924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RUTH, KEVIN J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP, Hlth Advancement

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1596317441924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

653.82

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

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

FOR LINE NUMBER: PAGE 20 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STURKEY, DAVID C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
KA VP Acct Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1596318441924

Amount of Each Receipt this Period

78.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TODD, JEFFREY ALAN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1596319041924

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TURNAU, CHRIS B, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1596319141924

Amount of Each Receipt this Period

90.00

☐ Memo Item

P/R Deduction (\$45.00 Bi-Weekly)

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

TOTAL This Period (last page this line number only).....▶

218.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WASSERSTEIN, M LAURIE, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Ntwk Prgrms

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1596319541924

Amount of Each Receipt this Period

38.46

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WERLEY, MYRON R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1596319641924

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DODDY, JOHN P, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP Info Tech

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

468.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1600597341924

Amount of Each Receipt this Period

78.00

☐ Memo Item

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

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

TOTAL This Period (last page this line number only).....▶

156.46

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

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

FOR LINE NUMBER: PAGE 22 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MICHAUX, MICHAEL D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP GM PCM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1600598541924

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SANDY, LEWIS G, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Clin Advancement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1600598741924

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PETERSON, MATTHEW W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
CEO Ancillary & Ind/Sgt CAO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1602669941924

Amount of Each Receipt this Period

400.00

☐ Memo Item

P/R Deduction (\$200.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

800.00

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

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

FOR LINE NUMBER: PAGE 23 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MALONEY, JEFFREY W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1613243541924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KENNEDY, WILLIAM F, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1653443141924

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BELLAMY, THOMAS J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Sls Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

692.40

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1653444341924

Amount of Each Receipt this Period

115.40

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

347.70

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

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

FOR LINE NUMBER: PAGE 24 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SULLIVAN, DANIEL T, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR1653445841924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TALAMANTES, WILLIAM, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Six Sigma Cnslt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR1806444741924

Amount of Each Receipt this Period

80.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EMERSON, PAUL M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum360 Services Inc

Occupation (for Individual)
COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

461.52

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR1806750341924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

233.84

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

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

FOR LINE NUMBER: PAGE 25 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ANDERSON, CATHERINE K, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Bus Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1164.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1903550741924

Amount of Each Receipt this Period

194.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BISHOP-HEROUX, KATHLEEN L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1903560841924

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DUFEK, ROBERT J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Dir IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1903577141924

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

284.00

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

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

FOR LINE NUMBER: PAGE 26 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JOHNSON, CHRISTOPHER T, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1903591141924

Amount of Each Receipt this Period

78.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SANTELLI, JOHN C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
SVP CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2139.06

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1903622041924

Amount of Each Receipt this Period

408.68

☐ Memo Item

P/R Deduction (\$204.34 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WEYMOUTH, PAUL D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.76

Date of Receipt

06 / 30 / 2016

Transaction ID : PR1903636941924

Amount of Each Receipt this Period

38.46

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

525.14

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

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

FOR LINE NUMBER: PAGE 27 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BENNETT, RUSSELL A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Mktg Bus Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2119468041924

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BRYAN, KATHIE L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Mktg Cnslt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2119469441924

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CROSS, RICHARD A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Deputy Gen Counsel Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2119471841924

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

140.00

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

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

FOR LINE NUMBER: PAGE 28 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DAVIS, KENNETH R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Med Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2119472541924

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GILDERNICK, AMY J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Assc Dir Clms

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2119475241924

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HANSEN, DAVID M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Regn Pres Ntwk Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1620.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2119476741924

Amount of Each Receipt this Period

270.00

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

350.00

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

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

FOR LINE NUMBER: PAGE 29 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HO, SAMUEL W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Mkt Grp Chief Clin Off

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2237.37

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2119477941924

Amount of Each Receipt this Period

394.66

☐ Memo Item

P/R Deduction (\$197.33 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JEFFREY, BRIAN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Regn Pres Ntwk Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2119479141924

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MACE-MEADOR, HEATHER M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Med Clin Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2119482541924

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

484.66

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

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

FOR LINE NUMBER: PAGE 30 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NYGARD, KEITH E, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNITED HEALTHCARE SVS INC

Occupation (for Individual)
Compli Cnslt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2119485041924

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PAXSON, LYNDA A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNITED HEALTHCARE SVS INC

Occupation (for Individual)
Sr Field Acct Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2119485841924

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PITTMAN, AUSTIN T, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Bus Segment CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2275.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2119486741924

Amount of Each Receipt this Period

389.20

☐ Memo Item

P/R Deduction (\$194.60 Bi-Weekly)

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

TOTAL This Period (last page this line number only).....▶

479.20

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

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

FOR LINE NUMBER: PAGE 31 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. POLICH, CYNTHIA L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
SVP Strat Initiv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2119486841924

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TANIGAWA, CHERYL, , , MD

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Entrprs Hlth Svs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2119491141924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TUCKER, STEVEN M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP Regl Affs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1152.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2119492041924

Amount of Each Receipt this Period

192.00

☐ Memo Item

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

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

TOTAL This Period (last page this line number only).....▶

584.30

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

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

FOR LINE NUMBER: PAGE 32 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VANASTEN, SUSAN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
M&R Telesls Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2119492641924

Amount of Each Receipt this Period

80.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DAUGHERTY, LINDA D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Assc Gen Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2119493541924

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WRIGHT, GREGORY, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Regn CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2119494141924

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

170.00

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

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

FOR LINE NUMBER: PAGE 33 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MASON, JOHN TYLER, J, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Comm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2115.50

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2126373841924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BURKE, FORREST G, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Pres PS Labor Trust

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2072.72

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2133132441924

Amount of Each Receipt this Period

418.18

☐ Memo Item

P/R Deduction (\$209.09 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HULTGREN, BROR O, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Regn CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1057.71

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2133133241924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

995.08

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

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

FOR LINE NUMBER: PAGE 34 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MORISATO, SUSAN C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Pres Insurance Sols

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2309.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2133133841924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PUTNAM, T JEFFREY, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Fin Plng Anlys

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2133134241924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHIMMELBUSCH, DIANE M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2133134641924

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

819.20

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

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

FOR LINE NUMBER: PAGE 35 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FALKENBERG, ROBERT C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2145728441924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, DANNETTE L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Sr Deputy Gen Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2309.00

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2145729941924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SPIVACK, DAVID A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
SVP Bus Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2162867641924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

846.12

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

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

FOR LINE NUMBER: PAGE 36 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GIBSON, CHRISTINE W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP Strat Initiv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2225166741924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BEAULE, JEAN-FRANCOIS, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Hlth Advancement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.40

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2225813641924

Amount of Each Receipt this Period

115.40

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RANGEN, ERIC S, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Optum Exec

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2225819341924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

576.92

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

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

FOR LINE NUMBER: PAGE 37 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RYAN, JOHN D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
RVP Clnt Mgmt Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

634.61

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2225819641924

Amount of Each Receipt this Period

115.38

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SAILOR, ROY THOMAS, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Dir Bus Dvlp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.04

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2225819741924

Amount of Each Receipt this Period

153.84

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CONNLY, MICHAEL R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Chief Tech Off

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2247625841924

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

469.22

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

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

FOR LINE NUMBER: PAGE 38 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CARCIONE JR, JOSEPH R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Med Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.40

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2247626841924

Amount of Each Receipt this Period

115.40

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KANTOLA, KEVIN DAVID, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2247627041924

Amount of Each Receipt this Period

78.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. O'BRIEN, DENNIS P, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Regn CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2062.92

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2247627341924

Amount of Each Receipt this Period

419.58

☐ Memo Item

P/R Deduction (\$209.79 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

612.98

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

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

FOR LINE NUMBER: PAGE 39 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VERNEY, JEFFERY RICHARD, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2247627441924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GARODIA, SANJAY, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2247627841924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OHMAN, DANIEL L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Regn CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2247628041924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

461.52

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

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

FOR LINE NUMBER: PAGE 40 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PRINCE, JOHN M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Mkt Group COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2133.57

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2259738441924

Amount of Each Receipt this Period

409.46

☐ Memo Item

P/R Deduction (\$204.73 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CRONN, CHRISTOPHER L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Govt Affs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2270522941924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KEPLEY CARRIER, ANGELA DAWN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Med Clin Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2402317741924

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

526.38

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

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

FOR LINE NUMBER: PAGE 41 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEVI-BAUMGARTEN, MARILYN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2402317941924

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LOGAN, JAKE, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Govt Affs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1057.65

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2402318241924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CRANLEY, SHELLEY WIKE, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Regl Affs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR240244441924

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

282.30

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

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

FOR LINE NUMBER: PAGE 42 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ANLIKER, JAY M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
CEO TPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2402445041924

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BECKER, JAMES H, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2115.48

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2402445141924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COLEMAN, JAMES C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Mkt Grp SVP, Human Capital

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2402445241924

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

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

TOTAL This Period (last page this line number only).....▶

624.60

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

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

FOR LINE NUMBER: PAGE 43 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LARSEN, JOHN L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Bus Segment CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2309.00

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2402445641924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HIGA, JOY O, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Regl Affs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2402446241924

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ALEXANDER, CORY, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
EVP External Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2405428841924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

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

TOTAL This Period (last page this line number only).....▶

829.20

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

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

FOR LINE NUMBER: PAGE 44 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SAELENS, KAREN ANN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2408544841924

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WEE, KATHLYN G, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
SVP State Sls Optuml

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2211.20

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2408545041924

Amount of Each Receipt this Period

398.40

☐ Memo Item

P/R Deduction (\$199.20 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CORZINE, JEFFREY SEAN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Mktg Bus Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2437119741924

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

478.40

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 OF 155

(check only one)

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

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

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAGAN, WILLIAM A, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services IncOccupation (for Individual)
SVP, Hlth Advancement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR2437120041924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WEISS, JACK S, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services IncOccupation (for Individual)
Bus Seg Chief Med Off

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR2437120541924

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BALTHAZOR, PAUL JOSEPH, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services IncOccupation (for Individual)
Bus Segment COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1752.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR2437120741924

Amount of Each Receipt this Period

464.00

☐ Memo Item

P/R Deduction (\$232.00 Bi-Weekly)

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

590.92

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

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

FOR LINE NUMBER: PAGE 46 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NESS, LAURA L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2437121541924

Amount of Each Receipt this Period

78.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COSGRIFF, JOHN W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2115.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2437121641924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EDELSON, BRETT E, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Prd

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

363.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2437127141924

Amount of Each Receipt this Period

90.90

☐ Memo Item

P/R Deduction (\$45.45 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

553.50

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

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

FOR LINE NUMBER: PAGE 47 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RAINEY, PETER W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Fin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2049.97

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2437127541924

Amount of Each Receipt this Period

421.42

☐ Memo Item

P/R Deduction (\$210.71 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LIPPERT, ROBIN E, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP External Affs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.62

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2439928041924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HEYMAN, STEPHEN M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Govt Affs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2307.62

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2444265741924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1190.62

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

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

FOR LINE NUMBER: PAGE 48 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LANGER, DONALD S, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2445015441924

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ADLINGTON SHKABERIN, AMY R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP Human Capital

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1487.14

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2445016441924

Amount of Each Receipt this Period

287.54

☐ Memo Item

P/R Deduction (\$143.77 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SIEGEL, DAVID, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Med Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

547.56

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2445017141924

Amount of Each Receipt this Period

91.26

☐ Memo Item

P/R Deduction (\$45.63 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

418.80

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

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

FOR LINE NUMBER: PAGE 49 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LIVERANI, EILEEN J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Cust Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2460167241924

Amount of Each Receipt this Period

55.40

☐ Memo Item

P/R Deduction (\$27.70 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KRAJNOVICH, DANIEL, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2460167341924

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RENFRO, LARRY C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VICE CHAIRMAN & CEO Optum

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2460168141924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

480.00

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

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

FOR LINE NUMBER: PAGE 50 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ORBUCH, DAVID B, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Optum Exec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2460168241924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WEXLER, ERIC J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Bus Segment Gen Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2463723141924

Amount of Each Receipt this Period

64.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHICK, SUE, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Chief Growth Off

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2480620541924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

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

TOTAL This Period (last page this line number only).....▶

640.90

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

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

FOR LINE NUMBER: PAGE 51 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BURNS, MATTHEW A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Comm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1076.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2484541741924

Amount of Each Receipt this Period

250.00

☐ Memo Item

P/R Deduction (\$125.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PHILLIPS, MARK A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP SIs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2062.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2484542641924

Amount of Each Receipt this Period

419.58

☐ Memo Item

P/R Deduction (\$209.79 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MANDERFELD, THOMAS B, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Capital Mkt Comm

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2486697941924

Amount of Each Receipt this Period

80.00

☐ Memo Item

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

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

TOTAL This Period (last page this line number only).....▶

749.58

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

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

FOR LINE NUMBER: PAGE 52 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCMAHON, DIRK C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
EVP ENTRPRS OPS/TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2072.72

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2491457041924

Amount of Each Receipt this Period

418.18

☐ Memo Item

P/R Deduction (\$209.09 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NATHAN, DONALD H, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Chief Comm Off

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2115.37

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2491457341924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SULLIVAN, KATHRYN M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
CEO E&I Regions

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1164.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2491457541924

Amount of Each Receipt this Period

194.00

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

996.78

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

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

FOR LINE NUMBER: PAGE 53 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SMITH, KARA V, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Govt Affs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2540175341924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EDWARDS, HYLLIUS R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
External Affs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2541300441924

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PURDY, PATRICIA A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Govt Affs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1177.80

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2541300641924

Amount of Each Receipt this Period

196.30

☐ Memo Item

P/R Deduction (\$98.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

680.90

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

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

FOR LINE NUMBER: PAGE 54 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TIERNEY, JOELLE M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Govt Affs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1423.10

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2541300741924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VERSAGGI, JOHN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Govt Affs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.92

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2541300841924

Amount of Each Receipt this Period

192.32

☐ Memo Item

P/R Deduction (\$96.16 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOSTETLER, BRENDAN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Govt Affs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

446.04

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2542541941924

Amount of Each Receipt this Period

79.12

☐ Memo Item

P/R Deduction (\$39.56 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

348.36

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

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

FOR LINE NUMBER: PAGE 55 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RAMSAY, RICHARD E, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Regl Affs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2542542241924

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPENCER, IPYANA, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Govt Affs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2542542341924

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YAU, ANNE, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
External Affs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

461.52

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2543582541924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

236.92

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

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

FOR LINE NUMBER: PAGE 56 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COMBS, CHANTA G, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Govt Affs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4461.52

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2552313541924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PACE, JEANNE M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
KA Sr Acct Exe

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2552313741924

Amount of Each Receipt this Period

78.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ALTER, JEFFREY D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Bus Segment CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2115.44

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2552960241924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

539.52

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

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

FOR LINE NUMBER: PAGE 57 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRYANT, JEREMY VAUGHN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Clnt Mgmt NA Accts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2552961341924

Amount of Each Receipt this Period

70.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FLANNERY, SCOTT F, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Regn Growth Off

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2552962341924

Amount of Each Receipt this Period

78.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HANNAN, CLAIRE L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

468.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2552962741924

Amount of Each Receipt this Period

78.00

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

226.00

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

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

FOR LINE NUMBER: PAGE 58 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KIDAMBI, NARASIMHAN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Assc Dir Bus Anlys

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2552963841924

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LOVELADY, JOHN H, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Regn CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2083.30

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2552964241924

Amount of Each Receipt this Period

416.66

☐ Memo Item

P/R Deduction (\$208.33 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STREIT, BARRY R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
M&R Reg VP of Sls

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

619.88

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2552966741924

Amount of Each Receipt this Period

125.72

☐ Memo Item

P/R Deduction (\$62.86 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

582.38

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

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

FOR LINE NUMBER: PAGE 59 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RAYBURN, MONICA L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2553475141924

Amount of Each Receipt this Period

78.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THOMAS, RICHARD D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1164.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2553475441924

Amount of Each Receipt this Period

194.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VOJTA, DENEEN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Bus Initiv Clin Aff

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2309.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2553475541924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

656.60

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

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

FOR LINE NUMBER: PAGE 60 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FLAGSTAD, KARSTEN S, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP Info Tech

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1999.96

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2554013041924

Amount of Each Receipt this Period

428.56

☐ Memo Item

P/R Deduction (\$214.28 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FERREIRA, ALICE C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Comm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.15

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2554208141924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CLUTE, DANIEL J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Med Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

461.52

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2560064441924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

582.40

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 61 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GIANCURSIO, DONALD J, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Health Plan of NevadaOccupation (for Individual)
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2309.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2560064941924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JONES, JERI L, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services IncOccupation (for Individual)
Regn CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1057.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2560065141924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KUNEMUND, GREGG J, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services IncOccupation (for Individual)
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

571.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2560065341924

Amount of Each Receipt this Period

157.62

☐ Memo Item

P/R Deduction (\$78.81 Bi-Weekly)

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

TOTAL This Period (last page this line number only).....▶

734.52

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 62 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LIPPMAN, SHELDON, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services IncOccupation (for Individual)
Med Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1164.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2560065441924

Amount of Each Receipt this Period

194.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LUCHT, JEFFREY D, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services IncOccupation (for Individual)
SVP Act Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1164.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2560065641924

Amount of Each Receipt this Period

194.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILICH, DAVID, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services IncOccupation (for Individual)
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

468.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2560066041924

Amount of Each Receipt this Period

78.00

☐ Memo Item

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

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

TOTAL This Period (last page this line number only).....▶

466.00

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

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

FOR LINE NUMBER: PAGE 63 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NOEL, TIMOTHY J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Prd

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2560398841924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CRONIN, JAMES, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1057.71

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2560821141924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LUND, BRIAN W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

468.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2561457641924

Amount of Each Receipt this Period

78.00

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

654.90

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

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

FOR LINE NUMBER: PAGE 64 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CAVANAUGH, LARRY W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DENTAL BENEFIT PROV INC

Occupation (for Individual)
Spc Ben Govt Dntl Sls Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2563211041924

Amount of Each Receipt this Period

78.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BARTON, JACQULYN M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Human Capital Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2563211241924

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILLER, ARTHUR R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

363.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2564296941924

Amount of Each Receipt this Period

90.90

☐ Memo Item

P/R Deduction (\$45.45 Bi-Weekly)

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

TOTAL This Period (last page this line number only).....▶

368.90

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

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

FOR LINE NUMBER: PAGE 65 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MACKENZIE, ANDREW C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Bus Segment CMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2564297141924

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SWANSON, STEPHEN E, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
KA VP Acct Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2564297341924

Amount of Each Receipt this Period

78.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALLI, STEVEN C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

423.10

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2564297641924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

354.92

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

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

FOR LINE NUMBER: PAGE 66 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CARLSON, CHRISTOPHER CHARLES, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Cnsmr & Cust Experience

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2564802641924

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HANSEN, PAUL DANIEL, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Controller Mkt Grp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1164.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2564802741924

Amount of Each Receipt this Period

194.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KENNY, KATHERINE L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SB VP of Acct Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

468.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2564803241924

Amount of Each Receipt this Period

78.00

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

312.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 67 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MARDEN, PAUL O, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2564803341924

Amount of Each Receipt this Period

78.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOQUIST, DARREN C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Bus Segment CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.92

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2564803441924

Amount of Each Receipt this Period

192.32

☐ Memo Item

P/R Deduction (\$96.16 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. O'HARE, TAMMY A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SB VP SIs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

468.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2564803941924

Amount of Each Receipt this Period

78.00

☐ Memo Item

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

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

TOTAL This Period (last page this line number only).....▶

348.32

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

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

FOR LINE NUMBER: PAGE 68 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BERNIS, DEBRA J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Chief Compliance/Ethics Off

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2133.57

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2564804041924

Amount of Each Receipt this Period

409.46

☐ Memo Item

P/R Deduction (\$204.73 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WICKS, TIMOTHY A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Pres OptumRx

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1961.52

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2565448641924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ARNONE, WENDY D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Regn CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2568900541924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

870.98

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

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

FOR LINE NUMBER: PAGE 69 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PARRILLO, CHRISTOPHER A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Ntwk Contrctng

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2571778241924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOYER, BRUCE E, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2571778341924

Amount of Each Receipt this Period

78.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HINTON, DUSTIN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

369.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2571978741924

Amount of Each Receipt this Period

132.88

☐ Memo Item

P/R Deduction (\$66.44 Bi-Weekly)

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

TOTAL This Period (last page this line number only).....▶

287.80

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

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

FOR LINE NUMBER: PAGE 70 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CARLSON, KEVIN JAMES, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Ntwk Contrctng

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1008.32

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2572590041924

Amount of Each Receipt this Period

213.08

☐ Memo Item

P/R Deduction (\$106.54 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WIFFLER, THOMAS P, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Bus Segment COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2572992741924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SIMPSON, TRENT L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP Med Clin Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

391.23

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2574985041924

Amount of Each Receipt this Period

86.94

☐ Memo Item

P/R Deduction (\$43.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

684.62

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

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

FOR LINE NUMBER: PAGE 71 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CIANFROCCO, HEATHER R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Regn CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2574986241924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BURNETT, JAMIE, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2574988241924

Amount of Each Receipt this Period

78.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ALLAZETTA, DAVID W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2574995441924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

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

TOTAL This Period (last page this line number only).....▶

654.90

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

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

FOR LINE NUMBER: PAGE 72 OF 155

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DUNCAN, MICHELE M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP Compli

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1813.68

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575029641924

Amount of Each Receipt this Period

403.04

☐ Memo Item

P/R Deduction (\$201.52 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VAN HOLMES, LORI A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Human Capital Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1164.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575030941924

Amount of Each Receipt this Period

194.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. O'BRIEN, JENNIFER M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Chief Compli Off

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575034541924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

981.64

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 73 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WALSH, SHERRI L, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Dir Med Clin Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.76

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575050641924

Amount of Each Receipt this Period

86.94

☐ Memo Item

P/R Deduction (\$43.47 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LINDSAY, VIVIAN M, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1057.73

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575054941924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCCARTY, CARY J, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

468.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575059441924

Amount of Each Receipt this Period

78.00

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

357.24

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

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

FOR LINE NUMBER: PAGE 74 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ALLEN, MARK T, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.23

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2575060241924

Amount of Each Receipt this Period

102.82

☐ Memo Item

P/R Deduction (\$51.41 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCEVOY, AMY J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2575062241924

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NICHOLS, SANDRA B, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Shared Svs Regn CMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2575074541924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

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

TOTAL This Period (last page this line number only).....▶

335.12

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 75 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. UPCHURCH, KAREN A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Comm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.12

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575084441924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHAMPION, PHEBE M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Health Plan of Nevada

Occupation (for Individual)
Dir Cust Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575108341924

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DEWALL, PATRICK J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Deputy Gen Counsel Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

795.41

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575145341924

Amount of Each Receipt this Period

227.26

☐ Memo Item

P/R Deduction (\$113.63 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

354.18

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

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

FOR LINE NUMBER: PAGE 76 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JONES, RON, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum360 Services Inc

Occupation (for Individual)
SVP CInt Relationship

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2575163541924

Amount of Each Receipt this Period

250.00

☐ Memo Item

P/R Deduction (\$125.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CASSANO, SCOTT G, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Health Plan of Nevada

Occupation (for Individual)
Dir Prov Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2575164441924

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAMANN, CHAD A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

363.60

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2575170141924

Amount of Each Receipt this Period

90.90

☐ Memo Item

P/R Deduction (\$45.45 Bi-Weekly)

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

TOTAL This Period (last page this line number only).....▶

540.90

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

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

FOR LINE NUMBER: PAGE 77 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COSTIN, ROBERT C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
PS Sr Sls Exe

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575180741924

Amount of Each Receipt this Period

38.46

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCGUIRE, THOMAS J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Sr Deputy Gen Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1923.09

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575185441924

Amount of Each Receipt this Period

439.54

☐ Memo Item

P/R Deduction (\$219.77 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STAMM, MICHAEL PATRICK, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575194641924

Amount of Each Receipt this Period

80.00

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

558.00

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

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

FOR LINE NUMBER: PAGE 78 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GRANBERG, MITCHELL W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Deputy Gen Counsel Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

995.31

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575196141924

Amount of Each Receipt this Period

214.94

☐ Memo Item

P/R Deduction (\$107.47 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FRANCIS, KEVIN B, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Acct Svs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.27

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575203341924

Amount of Each Receipt this Period

95.22

☐ Memo Item

P/R Deduction (\$47.61 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHORS, MATTHEW MACKINNON, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Sr Deputy Gen Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1883.74

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575222341924

Amount of Each Receipt this Period

428.30

☐ Memo Item

P/R Deduction (\$214.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

738.46

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

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

FOR LINE NUMBER: PAGE 79 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GILPIN JR, HOWARD CHARLES, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Dir Act Cnslt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575224941924

Amount of Each Receipt this Period

78.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHOATE, THOMAS C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Regn CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575247841924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHETTY, PRASANNA, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Mgr IT Sys Anlys

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

318.15

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575252041924

Amount of Each Receipt this Period

90.90

☐ Memo Item

P/R Deduction (\$45.45 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

245.82

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

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

FOR LINE NUMBER: PAGE 80 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BROOMFIELD, ROBERT A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
UHC SIs RVP KA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.59

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575260441924

Amount of Each Receipt this Period

38.46

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BEAUREGARD, THOMAS RAYMOND, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Innovation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2115.50

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575295141924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CORN, BARBARA, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Med Clin Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

333.27

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575297341924

Amount of Each Receipt this Period

95.22

☐ Memo Item

P/R Deduction (\$47.61 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

518.28

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

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

FOR LINE NUMBER: PAGE 81 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CUEVAS, BRANDON E, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Regn CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2575305641924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUNT, BRADLEY W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Bus Segment CMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1107.88

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2575310441924

Amount of Each Receipt this Period

198.88

☐ Memo Item

P/R Deduction (\$99.44 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GOLDBERG, JEFFREY A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP Business Development Exe

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

468.00

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2575326941924

Amount of Each Receipt this Period

78.00

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

661.48

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

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

FOR LINE NUMBER: PAGE 82 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VAN HAM, COLLEEN HASTINGS, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2575341941924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TELESKY, MICHAEL J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
KA VP SIs Acct Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2575350941924

Amount of Each Receipt this Period

78.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WINKLER, YASMINE, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Regn CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

423.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2575390941924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

231.84

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

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

FOR LINE NUMBER: PAGE 83 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRATTEBO, CRAIG L, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Deputy Gen Counsel Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

909.04

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575397241924

Amount of Each Receipt this Period

227.26

☐ Memo Item

P/R Deduction (\$113.63 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LOSE, JERI L, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Info Tech

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575419841924

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCGAVICK, KEVIN M, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
C&S RVP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

461.52

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575421941924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

504.18

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

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

FOR LINE NUMBER: PAGE 84 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. O'HARA, KARIN R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Acctng

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575428741924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CASTILLO, EFREM, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Bus Seg Chief Med Off

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1590.89

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575441341924

Amount of Each Receipt this Period

454.54

☐ Memo Item

P/R Deduction (\$227.27 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SPILKER, TIMOTHY M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

423.10

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575446341924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

608.38

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

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

FOR LINE NUMBER: PAGE 85 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAUTMAN, MILLA, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Chief Tech Off

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

944.80

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575447141924

Amount of Each Receipt this Period

222.16

☐ Memo Item

P/R Deduction (\$111.08 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GEHLBACH, THOMAS E, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.60

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575448841924

Amount of Each Receipt this Period

41.62

☐ Memo Item

P/R Deduction (\$20.81 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAMILTON, JOHN M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Assc Dir Service Acct Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1057.74

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575489441924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

456.08

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

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

FOR LINE NUMBER: PAGE 86 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KLEIN, MATTHEW E, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Deputy Gen Counsel Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

978.21

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575517341924

Amount of Each Receipt this Period

217.38

☐ Memo Item

P/R Deduction (\$108.69 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOSEPH, MOLLY E, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2304.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575521741924

Amount of Each Receipt this Period

384.00

☐ Memo Item

P/R Deduction (\$192.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HEBERT, PAUL B, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Fin

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575522341924

Amount of Each Receipt this Period

250.00

☐ Memo Item

P/R Deduction (\$125.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

851.38

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

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

FOR LINE NUMBER: PAGE 87 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HOLOVNIA, KRISTEN NOEL ANDERSON, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Deputy Gen Counsel Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

995.31

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2575533041924

Amount of Each Receipt this Period

214.94

☐ Memo Item

P/R Deduction (\$107.47 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HILL, JANE B, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Dir Compli

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.23

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2575533141924

Amount of Each Receipt this Period

86.94

☐ Memo Item

P/R Deduction (\$43.47 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAMLIN, THOMAS A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Sr Behvrl Med Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

461.52

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2575536241924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

378.80

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

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

FOR LINE NUMBER: PAGE 88 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STEINBRECHER, HOLLY, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.10

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575544541924

Amount of Each Receipt this Period

231.40

☐ Memo Item

P/R Deduction (\$115.70 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOCK, CURTIS A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Sr Med Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

978.21

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575579241924

Amount of Each Receipt this Period

217.38

☐ Memo Item

P/R Deduction (\$108.69 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WINSOR, ELIZABETH C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
CEO NA Acct

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1949.28

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575582841924

Amount of Each Receipt this Period

419.58

☐ Memo Item

P/R Deduction (\$209.79 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

868.36

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

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

FOR LINE NUMBER: PAGE 89 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARRIS, EUGENE M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
M&R Reg VP of Brkr Sls

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.27

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575585441924

Amount of Each Receipt this Period

95.22

☐ Memo Item

P/R Deduction (\$47.61 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PETEROY, MICHAEL, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Dir Bus Process

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1095.21

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575585641924

Amount of Each Receipt this Period

217.38

☐ Memo Item

P/R Deduction (\$108.69 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DWYER, KATHLEEN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Assc Dir Comm

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

423.06

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575590641924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

389.52

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

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

FOR LINE NUMBER: PAGE 90 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. IVERSON, LISA M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Bus Segment CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2062.92

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575603241924

Amount of Each Receipt this Period

419.58

☐ Memo Item

P/R Deduction (\$209.79 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCNUTT, DIANE L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Human Capital Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1916.08

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575604541924

Amount of Each Receipt this Period

440.56

☐ Memo Item

P/R Deduction (\$220.28 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THOMPSON, BRIAN R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Bus Segment CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4461.52

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575634641924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

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

TOTAL This Period (last page this line number only).....▶

937.06

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

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

FOR LINE NUMBER: PAGE 91 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CLARK, TERRENCE M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Bus Segment CMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2133.57

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575636941924

Amount of Each Receipt this Period

409.46

☐ Memo Item

P/R Deduction (\$204.73 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DAVIS, BENTON V, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP GM Clin Comnty Ntwk

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1382.17

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575639241924

Amount of Each Receipt this Period

516.82

☐ Memo Item

P/R Deduction (\$258.41 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HERMAN, CRAIG S, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1518.55

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575650241924

Amount of Each Receipt this Period

497.34

☐ Memo Item

P/R Deduction (\$248.67 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1423.62

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

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

FOR LINE NUMBER: PAGE 92 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCFANN, ELENA J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Regn CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1836.55

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575654741924

Amount of Each Receipt this Period

451.90

☐ Memo Item

P/R Deduction (\$225.95 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ZIGLER, JANICE C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Regn Pres Ntwk Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1818.16

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575665641924

Amount of Each Receipt this Period

454.54

☐ Memo Item

P/R Deduction (\$227.27 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ALLEN, CARL E, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Southwest Medical Assoc. Inc.

Occupation (for Individual)
Sr Med Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

468.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575669341924

Amount of Each Receipt this Period

78.00

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

984.44

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 93 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOESCHLER, PATRICK, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNITED HEALTHCARE SVS INC

Occupation (for Individual)
KA VP Acct Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575676141924

Amount of Each Receipt this Period

78.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STIDMAN, CHRISTOPHER J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP Clnt Relationship

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2001.75

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575683841924

Amount of Each Receipt this Period

428.30

☐ Memo Item

P/R Deduction (\$214.15 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STAHL, PAMELA J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

363.60

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575685341924

Amount of Each Receipt this Period

90.90

☐ Memo Item

P/R Deduction (\$45.45 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

597.20

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 94 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OCHIPINTI, JOSEPH, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services IncOccupation (for Individual)
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2575685741924

Amount of Each Receipt this Period

115.00

☐ Memo Item

P/R Deduction (\$57.50 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FINE, BRETT M, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services IncOccupation (for Individual)
SVP Corp Strat

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2575692841924

Amount of Each Receipt this Period

105.26

☐ Memo Item

P/R Deduction (\$52.63 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FARRELL, STEPHEN J, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services IncOccupation (for Individual)
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

461.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2575696241924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

297.18

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

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

FOR LINE NUMBER: PAGE 95 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PROKOCKI, ELIZABETH SOBERG, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1057.75

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575705841924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILSON, D ELLEN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
EVP Human Capital

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2065.04

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575708841924

Amount of Each Receipt this Period

419.26

☐ Memo Item

P/R Deduction (\$209.63 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KNORR, MOLLY LOUISE, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Risk Adjustment

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

461.52

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575735441924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

688.48

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

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

FOR LINE NUMBER: PAGE 96 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GROSCLAGS, JEFFREY, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP Fin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.36

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575735741924

Amount of Each Receipt this Period

294.96

☐ Memo Item

P/R Deduction (\$147.48 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KRAL, JESSICA C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.27

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575736141924

Amount of Each Receipt this Period

95.22

☐ Memo Item

P/R Deduction (\$47.61 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CESARETTI, GINA L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Deputy Gen Counsel Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

869.52

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575739041924

Amount of Each Receipt this Period

217.38

☐ Memo Item

P/R Deduction (\$108.69 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

607.56

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

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

FOR LINE NUMBER: PAGE 97 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MULLINS, CHRISTOPHER J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.56

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575778741924

Amount of Each Receipt this Period

38.46

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MAURER, CARRIE J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP Mktg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

763.63

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575798141924

Amount of Each Receipt this Period

218.18

☐ Memo Item

P/R Deduction (\$109.09 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HJERPE, ADAM C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Chief of Staff

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1956.51

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575806241924

Amount of Each Receipt this Period

434.78

☐ Memo Item

P/R Deduction (\$217.39 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

691.42

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

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

FOR LINE NUMBER: PAGE 98 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RUSSELL, LAURIE ERIN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Govt Affs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575812141924

Amount of Each Receipt this Period

78.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MECKEY, SAMUEL JAMES, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2253.80

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575814541924

Amount of Each Receipt this Period

392.30

☐ Memo Item

P/R Deduction (\$196.15 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILLER, WILLIAM J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Bus Segment CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1061.64

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575819841924

Amount of Each Receipt this Period

176.94

☐ Memo Item

P/R Deduction (\$88.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

647.24

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 99 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SEXTON, ELLEN R, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services IncOccupation (for Individual)
VP Growth Strat & Sls Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2575823241924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCNATT, RICK E, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services IncOccupation (for Individual)
VP Sls Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2575824941924

Amount of Each Receipt this Period

90.90

☐ Memo Item

P/R Deduction (\$45.45 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BRADLEY, JOEL F, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services IncOccupation (for Individual)
Sr Med Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

203.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2575825841924

Amount of Each Receipt this Period

36.92

☐ Memo Item

P/R Deduction (\$18.46 Bi-Weekly)

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

TOTAL This Period (last page this line number only).....▶

320.12

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

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

FOR LINE NUMBER: PAGE 100 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KAUFMAN, PHILIP R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
CEO Spclty Ben Visn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1274.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2575829841924

Amount of Each Receipt this Period

246.50

☐ Memo Item

P/R Deduction (\$123.25 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUNTLEY, MICHELLE M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Deputy Gen Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1048.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2575832041924

Amount of Each Receipt this Period

207.36

☐ Memo Item

P/R Deduction (\$103.68 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BEESON, MARY JANE, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Bus Adv/Tech Cnslt Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1121.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2575839541924

Amount of Each Receipt this Period

196.92

☐ Memo Item

P/R Deduction (\$98.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

650.78

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 101 OF 155

(check only one)

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

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

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SKOPAS, EDWARD JOHN, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services IncOccupation (for Individual)
Mkt Grp CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2016

Transaction ID : PR2575842741924

Amount of Each Receipt this Period

78.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GOLDEN, WILLIAM J, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services IncOccupation (for Individual)
Regn CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1057.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2016

Transaction ID : PR2575859341924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COTTINGTON, NYLE BRENT, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services IncOccupation (for Individual)
VP Acctng

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

402.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2016

Transaction ID : PR2575865341924

Amount of Each Receipt this Period

85.32

☐ Memo Item

P/R Deduction (\$42.66 Bi-Weekly)

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

355.62

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

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

FOR LINE NUMBER: PAGE 102 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PEZHMAN, PAYMAN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Bus Segment Gen Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

978.21

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2575883541924

Amount of Each Receipt this Period

217.38

☐ Memo Item

P/R Deduction (\$108.69 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LANGAN, PATRICK J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1164.00

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2575885041924

Amount of Each Receipt this Period

194.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MEDEIROS, MICHAEL W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Clnt Mgmt NA Accts

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

468.00

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2575930641924

Amount of Each Receipt this Period

78.00

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

489.38

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

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

FOR LINE NUMBER: PAGE 103 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MATTERA, RICHARD J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Mkt Group Gen Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575938441924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PERLMAN, JUDITH GAGER, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

631.80

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575968941924

Amount of Each Receipt this Period

132.60

☐ Memo Item

P/R Deduction (\$66.30 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEENAY, MARK, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UHC International Services Inc

Occupation (for Individual)
NA Med Dir/CMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

468.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2575982841924

Amount of Each Receipt this Period

78.00

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

595.20

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

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

FOR LINE NUMBER: PAGE 104 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SANN, DAVID, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Dir Med Clin Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.06

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2576026441924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WARMUTH, JAY, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Bus Segment Gen Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2576040041924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ADAMS, GAYLE Q, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Strategic Acct Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1057.73

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2576040341924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

461.52

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

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

FOR LINE NUMBER: PAGE 105 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KANDALAFT, KEVIN P, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.06

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2576043641924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MONICAL, KENT, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Prd

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.10

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2576051341924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNSON, RESTOR, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Entrprs Real Estate Svs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1164.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2576051641924

Amount of Each Receipt this Period

194.00

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

347.84

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

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

FOR LINE NUMBER: PAGE 106 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. REX, JOHN F, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
UHG CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2309.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2576060041924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCEWAN, JOSHUA M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.60

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2576085741924

Amount of Each Receipt this Period

90.90

☐ Memo Item

P/R Deduction (\$45.45 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNSON, DARRIN D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

423.09

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2576103741924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

552.42

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

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

FOR LINE NUMBER: PAGE 107 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KENT, CHRIS, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2576119041924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TORGERSON, CHANDRA LUE, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Med Clin Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2576128641924

Amount of Each Receipt this Period

78.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NELSON, STEVEN H, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Bus Segment CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2115.42

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2576144841924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

539.52

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

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

FOR LINE NUMBER: PAGE 108 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FRIDNER, JOHN E, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SB NA VP SIs/Gen

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2576147541924

Amount of Each Receipt this Period

78.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BENSON, JEAN C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP Fin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.55

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2576310941924

Amount of Each Receipt this Period

38.46

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ELLIOTT III, THOMAS L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Clnt Relationship

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1057.75

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2576313341924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

308.76

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

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

FOR LINE NUMBER: PAGE 109 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KENIRY, DANIEL J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Govt Affs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2577379341924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KOUZOUKAS, DEMETRIOS L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Bus Segment Gen Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2578740441924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DUFFEY, KRISTY O, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP Clnt Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

865.35

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2578823241924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

769.20

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

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

FOR LINE NUMBER: PAGE 110 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CIAVOLA, LAURA, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2578824341924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BUSBEE, NATHANAEL, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Bus Process

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.06

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2578826741924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COHEN, JAY J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
CEO Med Grp Physn

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1057.75

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2578829641924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

653.82

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

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

FOR LINE NUMBER: PAGE 111 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FARMER, RACHEL C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Govt Affs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.36

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2595208341924

Amount of Each Receipt this Period

85.80

☐ Memo Item

P/R Deduction (\$42.90 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LONIGRO, ANTHONY S, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.60

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2595225841924

Amount of Each Receipt this Period

90.90

☐ Memo Item

P/R Deduction (\$45.45 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GROSCHE, LAURA A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2595230941924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

561.30

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 112 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCOTT, WESTON PRICE, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, IncOccupation (for Individual)
Med Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2601125341924

Amount of Each Receipt this Period

61.54

☐ Memo Item

P/R Deduction (\$30.77 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHORT, MARIANNE D, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services IncOccupation (for Individual)
EVP Gen Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2601133541924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SWANSON, AMY N, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services IncOccupation (for Individual)
Dir Mktg Bus Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1057.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2601140741924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

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

TOTAL This Period (last page this line number only).....▶

638.44

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

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

FOR LINE NUMBER: PAGE 113 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHRIST, MICHAEL A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Govt Affs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2601156941924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TICE JR, ANDREW W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Phys Advsr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.93

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2601160941924

Amount of Each Receipt this Period

46.14

☐ Memo Item

P/R Deduction (\$23.07 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KAPROW, MARC GORDON, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Exec Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

461.52

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2601179041924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

199.98

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

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

FOR LINE NUMBER: PAGE 114 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DAVIS, KELLY MARIE, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Govt Affs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.18

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2605734241924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MALONE, TRACY, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP External Affs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2128.12

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2605736941924

Amount of Each Receipt this Period

410.24

☐ Memo Item

P/R Deduction (\$205.12 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, LARRY, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Assc Dir Compli

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

211.55

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2605760641924

Amount of Each Receipt this Period

38.46

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

525.62

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

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

FOR LINE NUMBER: PAGE 115 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WEISSEL, MICHAEL E, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Optum Exec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2111.84

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2606842941924

Amount of Each Receipt this Period

412.58

☐ Memo Item

P/R Deduction (\$206.29 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MATECZUN, JOHN MATTHEW, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Pres M&V

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2115.48

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2606845141924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ZIESMANN, THOMAS KARL, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
SVP Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1057.77

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2606854441924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

989.48

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

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

FOR LINE NUMBER: PAGE 116 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KENNEDY, SHELLEY L, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Service Acct Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2607803041924

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LANDO, LISA MARIE, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.10

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2608059541924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FLYNN, VIRGINIA A, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Med Clin Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

423.10

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2608061241924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

253.84

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 117 OF 155

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FERGUSON, SANDRA, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Assc Dir Med Clin Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.10

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2608061941924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WRIGHT, NORMAN L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
SVP Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2253.80

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2609812341924

Amount of Each Receipt this Period

392.30

☐ Memo Item

P/R Deduction (\$196.15 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BAKER, MICHAEL, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Cust Svs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2612530541924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

661.52

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

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

FOR LINE NUMBER: PAGE 118 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DECKMANN, NATASHA, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2612534641924

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VAIL, ABIGAIL LONDON, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Govt Affs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2614315641924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BURKHOLDER, CHAD, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP Cust Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

263.15

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2615073441924

Amount of Each Receipt this Period

105.26

☐ Memo Item

P/R Deduction (\$52.63 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

382.18

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

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

FOR LINE NUMBER: PAGE 119 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SOLOMON, RANDALL L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Sr Behvrl Med Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.14

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2615671541924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BIRNBAUM, MICHAEL, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.14

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2615671641924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PUEHLER, KAREN E, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Med Clin Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

391.23

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2615679441924

Amount of Each Receipt this Period

86.94

☐ Memo Item

P/R Deduction (\$43.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

240.78

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

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

FOR LINE NUMBER: PAGE 120 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NIEMYER, ELIZABETH S, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1916.08

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2615682841924

Amount of Each Receipt this Period

440.56

☐ Memo Item

P/R Deduction (\$220.28 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TRAW, KEVIN JON, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Dir Bus Process

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.60

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2617365641924

Amount of Each Receipt this Period

90.90

☐ Memo Item

P/R Deduction (\$45.45 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNSON, MARK OWEN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP Ntwk Contractng

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

507.75

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2617933941924

Amount of Each Receipt this Period

92.30

☐ Memo Item

P/R Deduction (\$46.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

623.76

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

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

FOR LINE NUMBER: PAGE 121 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WENGER, BRIAN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Mkt Group Gen Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1956.51

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2623703341924

Amount of Each Receipt this Period

434.78

☐ Memo Item

P/R Deduction (\$217.39 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MULES, REBECCA HUMBERT, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Govt Affs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.12

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2624442641924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FULLER JESSEP, JENIFER JEAN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Govt Affs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

634.68

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2624445441924

Amount of Each Receipt this Period

115.38

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

627.08

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

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

FOR LINE NUMBER: PAGE 122 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COLLETTE, CHRISTOPHER LOUIS, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP UnitedHlth Grp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.09

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2625499541924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RELLER, TAMI, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Mkt Group CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1111.04

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2625501941924

Amount of Each Receipt this Period

555.52

☐ Memo Item

P/R Deduction (\$277.76 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COWEN, WESLEY RYAN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
KA Dir Acct Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

461.52

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2625532341924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

709.36

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 123 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HINES, GREGORY M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Govt Affs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.06

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2626886541924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EBENSTEINER, BRYAN C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2626912241924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RANHEIM, CRAIG, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

333.27

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2628329341924

Amount of Each Receipt this Period

95.22

☐ Memo Item

P/R Deduction (\$47.61 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

364.44

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

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

FOR LINE NUMBER: PAGE 124 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VAN DER WALDE, LAMBERT, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Hlth Reform/Modernizatr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2628332341924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RILEY, LORI ANN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Human Capital Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2628834041924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JARVIE, BRUCE MICHAEL, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP Fin

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

461.52

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2629554541924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

653.82

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

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

FOR LINE NUMBER: PAGE 125 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WONG, MING TED, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

978.21

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2629556841924

Amount of Each Receipt this Period

217.38

☐ Memo Item

P/R Deduction (\$108.69 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOFFMAN, ELEANOR ADAMS, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Govt Affs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2629559241924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GORSUCH, KIRSTEN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Comm

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2632087841924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

486.60

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

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

FOR LINE NUMBER: PAGE 126 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TUFFIN, MICHAEL J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Public Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2632087941924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALTER, JEFFREY D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Dir IT Architecture

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2632088841924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TEMPLE, MARTHA R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

909.04

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2632873641924

Amount of Each Receipt this Period

227.26

☐ Memo Item

P/R Deduction (\$113.63 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

688.78

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

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

FOR LINE NUMBER: PAGE 127 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PLATT, LAWRENCE DAVID, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Comm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2632880741924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAPGOOD, WADE, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Govt Affs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.32

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2634167041924

Amount of Each Receipt this Period

86.96

☐ Memo Item

P/R Deduction (\$43.48 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CASTILLO, FLORA M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1057.65

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2634177941924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

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

TOTAL This Period (last page this line number only).....▶

663.86

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

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

FOR LINE NUMBER: PAGE 128 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PRIBLE, JOHN M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Govt Affs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2634656641924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHEID, ADREAN ELISABETH, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP External Affs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1538.40

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2634880441924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCMAHON, THOMAS PATRICK, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Mktg Bus Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2634885141924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

769.20

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

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

FOR LINE NUMBER: PAGE 129 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PESCATELLO, SARA M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Govt Affs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2634888541924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROOS, THOMAS EDWARD, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
SVP Chief Acctng Off

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2635451241924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ADAMS, SCOTT MARTIN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Govt Affs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2636726241924

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

769.20

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

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

FOR LINE NUMBER: PAGE 130 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BARRA, JOSE M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Optum Exec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2636728841924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, KENNETH JOHN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP Gen Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.23

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2636734541924

Amount of Each Receipt this Period

86.94

☐ Memo Item

P/R Deduction (\$43.47 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. AMUNDSON, TIMOTHY, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : PR2637690641924

Amount of Each Receipt this Period

250.00

☐ Memo Item

P/R Deduction (\$250.00 Bi-Weekly)

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

TOTAL This Period (last page this line number only).....▶

721.54

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

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

FOR LINE NUMBER: PAGE 131 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LOGAN, BRETT, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Assc Dir Regl Affs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2638112741924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FRY, BENJAMIN HOWARD, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Govt Affs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2638114941924

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ZEGLINSKI, MICHAEL G, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP Pharm Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1821.76

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2639701841924

Amount of Each Receipt this Period

455.44

☐ Memo Item

P/R Deduction (\$227.72 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

916.96

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

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

FOR LINE NUMBER: PAGE 132 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SKOMO, DAVID A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP Pharm Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.15

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2639702741924

Amount of Each Receipt this Period

105.26

☐ Memo Item

P/R Deduction (\$52.63 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LUCE JR, ROSS G, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Dir Pharm Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.27

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2639731441924

Amount of Each Receipt this Period

95.22

☐ Memo Item

P/R Deduction (\$47.61 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SURRELL, CHRISTOPHER, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
Dir Mktg Bus Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.44

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2639758141924

Amount of Each Receipt this Period

200.08

☐ Memo Item

P/R Deduction (\$100.04 Bi-Weekly)

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

TOTAL This Period (last page this line number only).....▶

400.56

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

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

FOR LINE NUMBER: PAGE 133 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. THIERER, MARK A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Bus Segment CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1730.70

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2639773641924

Amount of Each Receipt this Period

384.60

☐ Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NELSON, ELLEN RUTH, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
VP Bus Dvlp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.60

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2639795341924

Amount of Each Receipt this Period

90.90

☐ Memo Item

P/R Deduction (\$45.45 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WU, LAMBERT ANTHONY, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Health Plan of Nevada

Occupation (for Individual)
Med Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

347.76

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2640461641924

Amount of Each Receipt this Period

86.94

☐ Memo Item

P/R Deduction (\$43.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

562.44

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

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

FOR LINE NUMBER: PAGE 134 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STOW, CHRISTINA L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP External Affs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1956.42

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2640466441924

Amount of Each Receipt this Period

434.76

☐ Memo Item

P/R Deduction (\$217.38 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BERKOWITZ, JEFFREY, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum Services, Inc

Occupation (for Individual)
Optum Exec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2083.30

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2640469241924

Amount of Each Receipt this Period

416.66

☐ Memo Item

P/R Deduction (\$208.33 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHUTT, ERIC A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services Inc

Occupation (for Individual)
VP External Affs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR2640846241924

Amount of Each Receipt this Period

500.00

☐ Memo Item

P/R Deduction (\$250.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1351.42

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 135 OF 155

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MINTO, RYAN J, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United HealthCare Services IncOccupation (for Individual)
Dir Govt Affs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.34

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR2640882441924

Amount of Each Receipt this Period

95.24

☐ Memo Item

P/R Deduction (\$47.62 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

TOTAL This Period (last page this line number only)..... ▶

95.24

80517.76

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 136 OF 155

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Cotton For Senate

Mailing Address PO Box 379

City
DardanelleState
ARZip Code
72834

Purpose of Disbursement

Contribution

011

Candidate Name

Cotton, Thomas, , Sen.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State: AR

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	2			2	0	1	6		

FEC Identification Number

C C00499988

Transaction ID : 39570479

Amount of Each Disbursement this Period

5000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

B. Bilirakis for Congress

Mailing Address PO Box 606

City
Tarpon SpringsState
FLZip Code
34688-0606

Purpose of Disbursement

Contribution

011

Candidate Name

Bilirakis, Gus, Michael, Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: FL

District: 12

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	2			2	0	1	6		

FEC Identification Number

C C00408534

Transaction ID : 39570480

Amount of Each Disbursement this Period

5000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

C. Thornberry For Congress Committee

Mailing Address P.O. Box 9392

City
AmarilloState
TXZip Code
79105

Purpose of Disbursement

Contribution

011

Candidate Name

Thornberry, Mac, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: TX

District: 13

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	2			2	0	1	6		

FEC Identification Number

C C00286187

Transaction ID : 39570482

Amount of Each Disbursement this Period

2500.00

☐ Memo Item Contribution
SUBTOTAL of Disbursements This Page (optional).....▶

12500.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 137 OF 155

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Eye of the Tiger Political Action Committee

Mailing Address PO Box 2485

City
SpringfieldState
VAZip Code
22152

Purpose of Disbursement

Contribution

011

Candidate Name

Eye of the Tiger Political Action Committee

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2016

FEC Identification Number

C C00467431

Transaction ID : 39570496

Amount of Each Disbursement this Period

5000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

B. Friends for Chris Stewart, Inc.

Mailing Address PO Box 22

City
FarmingtonState
UTZip Code
84025

Purpose of Disbursement

Contribution

011

Candidate Name

Stewart, Chris, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: UT

District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

FEC Identification Number

C C00506931

Transaction ID : 39581798

Amount of Each Disbursement this Period

2500.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

C. CMR PAC

Mailing Address PO Box 2485

City
SpringfieldState
VAZip Code
22152

Purpose of Disbursement

Contribution

011

Candidate Name

CMR PAC

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

FEC Identification Number

C C00469429

Transaction ID : 39581800

Amount of Each Disbursement this Period

5000.00

☐ Memo Item Contribution
SUBTOTAL of Disbursements This Page (optional)..... ►

12500.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 138 OF 155

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Georgians for Isakson

Mailing Address Post Office Box 250116

City
AtlantaState
GAZip Code
30325

Purpose of Disbursement

Contribution

011

Candidate Name

Isakson, Johnny, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: GA

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	3			2	0	1	6		

FEC Identification Number

C C00384693

Transaction ID : 39586558

Amount of Each Disbursement this Period

5000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

B. Bill Cassidy For US Senate

Mailing Address PO Box 80505

City
Baton RougeState
LAZip Code
70898

Purpose of Disbursement

Contribution

011

Candidate Name

Cassidy, William, , Sen.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State: LA

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	3			2	0	1	6		

FEC Identification Number

C C00543983

Transaction ID : 39586613

Amount of Each Disbursement this Period

5000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

C. Tom MacArthur For Congress Inc.

Mailing Address PO Box 225

City
ColoniaState
NJZip Code
07067

Purpose of Disbursement

Contribution

011

Candidate Name

Macarthur, Thomas, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: NJ

District: 03

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	3			2	0	1	6		

FEC Identification Number

C C00557520

Transaction ID : 39586616

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution
SUBTOTAL of Disbursements This Page (optional).....▶

11000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 139 OF 155

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Olson for Congress Committee

Mailing Address PO Box 16381

City
Sugar LandState
TXZip Code
77496-6381

Purpose of Disbursement

Contribution

011

Candidate Name

Olson, Peter, G., Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: TX

District: 22

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		13		2016

FEC Identification Number

C C00437913

Transaction ID : 39586619

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

B. 21st Century Majority FundMailing Address 6065 Roswell Road
#2274City
AtlantaState
GAZip Code
30328

Purpose of Disbursement

Contribution

011

Candidate Name

21st Century Majority Fund

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		13		2016

FEC Identification Number

C C00361956

Transaction ID : 39586624

Amount of Each Disbursement this Period

5000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

C. Continuing America's Strength and Security PAC

Mailing Address P.O. Box 80505

City
Baton RougeState
LAZip Code
70898

Purpose of Disbursement

Contribution

011

Candidate Name

Continuing America's Strength and Security PAC

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		13		2016

FEC Identification Number

C C00480228

Transaction ID : 39586750

Amount of Each Disbursement this Period

5000.00

☐ Memo Item Contribution
SUBTOTAL of Disbursements This Page (optional).....▶

11000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 140 OF 155

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Pete Aguilar For Congress

Mailing Address PO Box 10954

City
San BernardinoState
CAZip Code
92423

Purpose of Disbursement

Contribution

011

Candidate Name

Aguilar, Pete, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: CA

District: 31

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	7			2	0	1	6		

FEC Identification Number

C C00510461

Transaction ID : 39615610

Amount of Each Disbursement this Period

5000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

B. Bill Nelson For U S Senate

Mailing Address 972 W Whitmire Drive

City
MelbourneState
FLZip Code
32935

Purpose of Disbursement

Contribution

011

Candidate Name

Nelson, Bill, , Mr.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	7			2	0	1	6		

FEC Identification Number

C C00344051

Transaction ID : 39615611

Amount of Each Disbursement this Period

2500.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

C. Friends Of Mazie Hirono

Mailing Address PO Box 677

City
HonoluluState
HIZip Code
96809

Purpose of Disbursement

Contribution

011

Candidate Name

Hirono, Mazie, , Sen.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: HI

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	7			2	0	1	6		

FEC Identification Number

C C00420760

Transaction ID : 39615613

Amount of Each Disbursement this Period

2500.00

☐ Memo Item Contribution
SUBTOTAL of Disbursements This Page (optional).....▶

10000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 141 OF 155

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Hoyer for Congress

Mailing Address 700 13th Street NW, Suite 600

City
WashingtonState
DCZip Code
20005

Purpose of Disbursement

Contribution

011

Candidate Name

Hoyer, Steny, Hamilton, Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: MD

District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	17	/	2016

FEC Identification Number

C C00140715

Transaction ID : 39615614

Amount of Each Disbursement this Period

5000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

B. Angus King For US Senate CampaignMailing Address 114 Maine Street Suite 1A
PO Box 368City
BrunswickState
MEZip Code
04011

Purpose of Disbursement

Contribution

011

Candidate Name

King, Angus, , Sen.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: ME

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	17	/	2016

FEC Identification Number

C C00516047

Transaction ID : 39615615

Amount of Each Disbursement this Period

2500.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

C. Cleaver For Congress

Mailing Address 4801 Main Street, Suite 1000

City
Kansas CityState
MOZip Code
64112

Purpose of Disbursement

Contribution

011

Candidate Name

Cleaver, Emanuel, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: MO

District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	17	/	2016

FEC Identification Number

C C00395848

Transaction ID : 39615617

Amount of Each Disbursement this Period

1500.00

☐ Memo Item Contribution
SUBTOTAL of Disbursements This Page (optional).....▶

9000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 142 OF 155

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. People For Ben

Mailing Address PO Box 31129

City
Santa FeState
NMZip Code
87594

Purpose of Disbursement

Contribution

011

Candidate Name

Lujan, Ben, , Mr.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: NM

District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		17		2016

FEC Identification Number

C C00443689

Transaction ID : 39615618

Amount of Each Disbursement this Period

2500.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

B. People For Derek Kilmer

Mailing Address PO Box 1381

City
TacomaState
WAZip Code
98402

Purpose of Disbursement

Contribution

011

Candidate Name

Kilmer, Derek, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: WA

District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		17		2016

FEC Identification Number

C C00514893

Transaction ID : 39615620

Amount of Each Disbursement this Period

2500.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

C. Common Sense Colorado

Mailing Address PO Box 1978

City
DenverState
COZip Code
80201

Purpose of Disbursement

Contribution

011

Candidate Name

Common Sense Colorado

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		17		2016

FEC Identification Number

C C00491936

Transaction ID : 39615629

Amount of Each Disbursement this Period

2500.00

☐ Memo Item Contribution
SUBTOTAL of Disbursements This Page (optional)..... ►

7500.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 143 OF 155

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Three Rivers Political Action Committee

Mailing Address 3321 SE 20th Avenue

City
PortlandState
ORZip Code
97202

Purpose of Disbursement

Contribution

011

Candidate Name

Three Rivers Political Action Committee

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	7			2	0	1	6		

FEC Identification Number

C C00473116

Transaction ID : 39615651

Amount of Each Disbursement this Period

5000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

B. Heidi For Senate

Mailing Address PO Box 1577

City
BismarckState
NDZip Code
58502-1577

Purpose of Disbursement

Contribution

011

Candidate Name

Heitkamp, Heidi, , Sen.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: ND

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	2			2	0	1	6		

FEC Identification Number

C C00505552

Transaction ID : 39633996

Amount of Each Disbursement this Period

500.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

C. Heidi For Senate

Mailing Address PO Box 1577

City
BismarckState
NDZip Code
58502-1577

Purpose of Disbursement

Contribution

011

Candidate Name

Heitkamp, Heidi, , Sen.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: ND

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	2			2	0	1	6		

FEC Identification Number

C C00505552

Transaction ID : 39634035

Amount of Each Disbursement this Period

2000.00

☐ Memo Item Contribution
SUBTOTAL of Disbursements This Page (optional)..... ►

7500.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 144 OF 155

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Kathleen Rice For Congress

Mailing Address PO Box 744

City
MineolaState
NYZip Code
11501

Purpose of Disbursement

Contribution

011

Candidate Name

Rice, Kathleen, , ,

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	2			2	0	1	6		

FEC Identification Number

C C00555813

Transaction ID : 39634215

Amount of Each Disbursement this Period

2500.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

B. Duffy For Congress

Mailing Address PO Box 538

City
WausauState
WIZip Code
54402

Purpose of Disbursement

Contribution

011

Candidate Name

Duffy, Sean, , Rep.,

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: WI

District: 07

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	2			2	0	1	6		

FEC Identification Number

C C00464339

Transaction ID : 39634301

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

C. Dakota Prairie PAC

Mailing Address 918 Pennsylvania Ave SE

City
WashingtonState
DCZip Code
20003

Purpose of Disbursement

Contribution

011

Candidate Name

Dakota Prairie PAC

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	7			2	0	1	6		

FEC Identification Number

C C00536607

Transaction ID : 39642779

Amount of Each Disbursement this Period

2500.00

☐ Memo Item Contribution
SUBTOTAL of Disbursements This Page (optional).....▶

6000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 145 OF 155

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Ted Deutch For Congress Committee

Mailing Address 1050 17th St, NW, Ste 590

City
WashingtonState
DCZip Code
20036

Purpose of Disbursement

Contribution

011

Candidate Name

Deutch, Theodore, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL

District: 22

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	8			2	0	1	6		

FEC Identification Number

C C00469163

Transaction ID : 39644092

Amount of Each Disbursement this Period

5000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

B. Sanford Bishop For Congress

Mailing Address P O Box 909

City
ColumbusState
GAZip Code
31902

Purpose of Disbursement

Contribution

011

Candidate Name

Bishop, Sanford, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: GA

District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	8			2	0	1	6		

FEC Identification Number

C C00266940

Transaction ID : 39644095

Amount of Each Disbursement this Period

2500.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

C. Walorski For Congress Inc

Mailing Address PO Box 954

City
MishawakaState
INZip Code
46546

Purpose of Disbursement

Contribution

011

Candidate Name

Walorski, Jackie, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: IN

District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	8			2	0	1	6		

FEC Identification Number

C C00468579

Transaction ID : 39644096

Amount of Each Disbursement this Period

2500.00

☐ Memo Item Contribution
SUBTOTAL of Disbursements This Page (optional)..... ►

10000.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 146 OF 155

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Crowley for Congress

Mailing Address 84-56 Grand Avenue

City
ElmhurstState
NYZip Code
11373

Purpose of Disbursement

Contribution

011

Candidate Name

Crowley, Joseph, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: NY

District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	8		2	0	1	6		

FEC Identification Number

C C00338954

Transaction ID : 39644097

Amount of Each Disbursement this Period

2500.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

B. Jobs, Opportunities and Education PAC (JOE-PAC)Mailing Address 700 13th Street, NW
Suite 600City
WashingtonState
DCZip Code
20005

Purpose of Disbursement

Contribution

011

Candidate Name

Jobs, Opportunities and Education PAC (JOE-PAC)

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	8		2	0	1	6		

FEC Identification Number

C C00362384

Transaction ID : 39644099

Amount of Each Disbursement this Period

2500.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

C. Friends Of John Barrasso

Mailing Address PO Box 52008

City
CasperState
WYZip Code
82605

Purpose of Disbursement

Contribution

011

Candidate Name

Barrasso, John, , Mr.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: WY

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	9		2	0	1	6		

FEC Identification Number

C C00436386

Transaction ID : 39647440

Amount of Each Disbursement this Period

5000.00

☐ Memo Item Contribution
SUBTOTAL of Disbursements This Page (optional)..... ►

10000.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 147 OF 155

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Common Values PACMailing Address 901 N Washington St
Suite 700City
AlexandriaState
VAZip Code
22314

Purpose of Disbursement

Contribution

011

Candidate Name

Common Values PAC

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	9			2	0	1	6		

FEC Identification Number

C C00442368

Transaction ID : 39647441

Amount of Each Disbursement this Period

2500.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

B. Friends Of Chris Murphy

Mailing Address PO Box 127

City
CheshireState
CTZip Code
06410

Purpose of Disbursement

Contribution

011

Candidate Name

Murphy, Christopher, , Sen.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: CT

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	1	6		

FEC Identification Number

C C00492645

Transaction ID : 39655498

Amount of Each Disbursement this Period

2500.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item
SUBTOTAL of Disbursements This Page (optional)..... ►

5000.00

TOTAL This Period (last page this line number only)..... ►

112000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 148 OF 155

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Friends of Frank Dermody

Mailing Address PO Box 274

City
TarentumState
PAZip Code
15084-0274

Purpose of Disbursement

Contribution

011

Candidate Name

Dermody, Frank, , PA Rep.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	2			2	0	1	6		

FEC Identification Number

C

Transaction ID : 39570498

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

B. Friends of Joe Scarnati

Mailing Address PO Box 177

City
BrockwayState
PAZip Code
15824

Purpose of Disbursement

Contribution

011

Candidate Name

Scarnati, Joseph, , Senator, III

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : 39616236

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

C. Borrelli Senate Committee

Mailing Address 2650 Diablo Dr

City
Lake Havasu CityState
AZZip Code
86406

Purpose of Disbursement

Contribution

011

Candidate Name

Borrelli, Sonny, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : 39642806

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution
SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 149 OF 155

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Coleman for AZ

Mailing Address 1474 S Royal Palm Rd

City
Apache JunctionState
AZZip Code
85119

Purpose of Disbursement

Contribution

011

Candidate Name

Coleman, Doug., AZ Rep.,

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : 39642807

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

B. Eddie Farnsworth 2016

Mailing Address 1126 E. Harrison St.

City
GilbertState
AZZip Code
85295

Purpose of Disbursement

Contribution

011

Candidate Name

Farnsworth, Eddie., AZ Rep.,

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : 39642941

Amount of Each Disbursement this Period

500.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

C. Elect Karen Fann

Mailing Address 5691 Hole in One Dr

City
PrescottState
AZZip Code
86301

Purpose of Disbursement

Contribution

011

Candidate Name

Fann, Karen., ,

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : 39642945

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution
SUBTOTAL of Disbursements This Page (optional)..... ►

2500.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 150 OF 155

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Lovas for Arizona 2016

Mailing Address 7197 W Mariposa Grande Lane

City
PeoriaState
AZZip Code
85383

Purpose of Disbursement

Contribution

011

Candidate Name

Lovas, Phil, , AZ Rep.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2016

FEC Identification Number

C

Transaction ID : 39642971

Amount of Each Disbursement this Period

500.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

B. Miranda for Senate 2016

Mailing Address 5412 W Ellis Drive

City
LaveenState
AZZip Code
85339

Purpose of Disbursement

Contribution

011

Candidate Name

Miranda, Catherine, , AZ Sen.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2016

FEC Identification Number

C

Transaction ID : 39642972

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

C. Regina E. Cobb 2016

Mailing Address 921 Crestwood Ln

City
KingmanState
AZZip Code
86409

Purpose of Disbursement

Contribution

011

Candidate Name

Cobb, Regina, , AZ Rep.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2016

FEC Identification Number

C

Transaction ID : 39642973

Amount of Each Disbursement this Period

2000.00

☐ Memo Item Contribution
SUBTOTAL of Disbursements This Page (optional)..... ►

3500.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 151 OF 155

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Meza for Senate 2016

Mailing Address 1833 W Lewis Avenue

City
PhoenixState
AZZip Code
85007

Purpose of Disbursement

Contribution

011

Candidate Name

Meza, Robert, , AZ Sen.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : 39643011

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

B. Don Shooter 2016Mailing Address 2109 S Palo Verde Ln
#44City
YumaState
AZZip Code
85365

Purpose of Disbursement

Contribution

011

Candidate Name

Shooter, Don, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : 39643187

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

C. Vote Mesnard 2016

Mailing Address 1427 W. Homestead Ct.

City
ChandlerState
AZZip Code
85286

Purpose of Disbursement

Contribution

011

Candidate Name

Mesnard, Javan, , AZ Rep.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : 39643295

Amount of Each Disbursement this Period

2000.00

☐ Memo Item Contribution
SUBTOTAL of Disbursements This Page (optional)..... ►

4000.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 152 OF 155

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Citizens for Tiffany

Mailing Address PO Box 59

City
MerrillState
WIZip Code
54452

Purpose of Disbursement

Contribution

Candidate Name

Tiffany, Tom, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2016

FEC Identification Number

C**Transaction ID : 39643297**

Amount of Each Disbursement this Period

750.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

B. Amy Loudenberg for Assembly

Mailing Address PO Box 556

City
ClintonState
WIZip Code
53525

Purpose of Disbursement

Contribution

Candidate Name

Loudenberg, Amy, , WI Rep.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2016

FEC Identification Number

C**Transaction ID : 39643298**

Amount of Each Disbursement this Period

500.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

C. Friends of Dave Hansen

Mailing Address 3489 Blackwolf Run

City
Green BayState
WIZip Code
54311

Purpose of Disbursement

Contribution

Candidate Name

Hansen, Dave, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2016

FEC Identification Number

C**Transaction ID : 39643300**

Amount of Each Disbursement this Period

250.00

☐ Memo Item Contribution
SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 153 OF 155

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Citizens for August

Mailing Address PO Box 572

City
DelavanState
WIZip Code
53115

Purpose of Disbursement

Contribution

011

Candidate Name

August, Tyler, , WI Rep.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2016

FEC Identification Number

C

Transaction ID : 39643301

Amount of Each Disbursement this Period

500.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

B. Roth for Wisconsin

Mailing Address PO Box 2224

City
AppletonState
WIZip Code
54912

Purpose of Disbursement

Contribution

011

Candidate Name

Roth, Roger, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2016

FEC Identification Number

C

Transaction ID : 39643304

Amount of Each Disbursement this Period

500.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

C. Scott Fitzgerald for Senate

Mailing Address N4692 Maple Road

City
JuneauState
WIZip Code
53039

Purpose of Disbursement

Contribution

011

Candidate Name

Fitzgerald, Scott, , WI Sen.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2016

FEC Identification Number

C

Transaction ID : 39643313

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution
SUBTOTAL of Disbursements This Page (optional)..... ►

2000.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 154 OF 155

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Steineke for Assembly

Mailing Address N2352 Vandenbroek Road

City
KaukaunaState
WIZip Code
54130

Purpose of Disbursement

Contribution

011

Candidate Name

Steineke, Jim, , WI Rep.,

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : 39643316

Amount of Each Disbursement this Period

500.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

B. Taxpayers for Nygren

Mailing Address PO Box 552

City
MarinetteState
WIZip Code
54143

Purpose of Disbursement

Contribution

011

Candidate Name

Nygren, John, , WI Rep.,

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : 39643317

Amount of Each Disbursement this Period

750.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

C. Dial 2016

Mailing Address 2936 W Gregg Dr.

City
ChandlerState
AZZip Code
85224

Purpose of Disbursement

Contribution

011

Candidate Name

Dial, Jeff, , AZ Rep.,

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	1	6		

FEC Identification Number

C

Transaction ID : 39655535

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution
SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2250.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 155 OF 155

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Dial 2016

Mailing Address 2936 W Gregg Dr.

City
ChandlerState
AZZip Code
85224

Purpose of Disbursement

Contribution

011

Category/
Type

Candidate Name

Dial, Jeff, , AZ Rep.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

FEC Identification Number

C

Transaction ID : 39655540

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item
SUBTOTAL of Disbursements This Page (optional)..... ►

1000.00

TOTAL This Period (last page this line number only)..... ►

19750.00