

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (In full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

United Health Group Incorporated Political Fund

ADDRESS (number and street)

8900 Bran Road East

Check if different than previously reported. (ACC)

Minnetonka

MN

55343

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00274431

3. IS THIS REPORT

X

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report(Q1)

July 15 Quarterly Report(Q2)

October 15 Quarterly Report(Q3)

January 31 Quarterly 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)

Convention (12C)

General (12G)

Special (12S)

Runoff (12R)

Election on

in the State of

(d) 30-Day

Post-Election

Report for the:

X General (30G)

Runoff (30R)

Special (30S)

Election on

11

02

2004

in the State of

5. Covering Period

10

14

2004

through

11

22

2004

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

Patrick J. Erlandson

Signature of Treasurer

Electronically Filed by Patrick J. Erlandson

Date

11

30

2004

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only

FEC FORM 3X
(Rev. 02/2003)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
United Health Group Incorporated Political Fund

Report Covering the Period: From: ^M 1 ^H 14 ^Y 2004 To: ^M 11 ^D 22 ^Y 2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^Y 2004 ^M ^D		33920.24
(b) Cash on Hand at Beginning of Reporting Period	36269.95	
(c) Total Receipts (from Line 19)	36130.28	312974.99
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	72420.23	346895.23
<hr/>		
7. Total Disbursements (from Line 31)	27050.00	301525.00
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	45370.23	45370.23
<hr/>		
9. Debts and Obligations owed TO the committee (itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

United Health Group Incorporated Political Fund

Report Covering the Period: From: ^M10 ^D14 ^Y2004 To: ^M11 ^D22 ^Y2004

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)	30803.62	
(ii) Unitemized	2826.66	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	33630.28	308974.99
(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)	33630.28	308974.99
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	2500.00	4000.00
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 Transfer (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))	36130.28	312974.99
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	36130.28	312974.99

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	9000.00	263775.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	0.00
29. Other Disbursements.....	18050.00	37750.00
30. Federal Election Activity (2 U.S.C. 431(20))		
(a) Shared 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 ActMty (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))..	27050.00	301525.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(i) from Line 31).....	27050.00	301525.00

DETAILED SUMMARY PAGE
of Disbursements

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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)	33630.28	308974.99
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	33630.28	308974.99
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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 94
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. KEVIN J CASEY		Date of Receipt M M / D D / Y Y Y Y
Mailing Address 9900 Bren Road E. Suite 305 MNC08-T302		Transaction ID: PR1159836410181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer UnitedHealth Group, Inc.	Occupation Senior VP, Uniprise Health Plan Ops	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. PAUL J GRANDPRE		Date of Receipt M M / D D / Y Y Y Y
Mailing Address 450 Columbus Blvd 3NB-A		Transaction ID: PR1159837110181
City Hartford	State CT	Zip Code 06115-0450
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer UnitedHealth Group, Inc.	Occupation Director, Customer Admin Svcs	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. ROBERT G HARMON, MD		Date of Receipt M M / D D / Y Y Y Y
Mailing Address 10467 White Granite Dr. Suite 300, VA31-1000		Transaction ID: PR1159837410181
City Oakton	State VA	Zip Code 22124-0450
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer UnitedHealth Group, Inc.	Occupation National Medical Director	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	120.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 94
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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. JOHN F STEVENSON		Date of Receipt M / D / Y
Mailing Address 450 Columbus Blvd SNB-B		Transaction ID: PR1159839310181
City Hartford	State Zip Code CT 06115-0450	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 29.40
Name of Employer UnitedHealth Group, Inc.	Occupation Associate General Counsel	P/R Deduction (\$9.80 Bi-W- eekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

Full Name (Last, First, Middle Initial) B. JACK A WICKENS		Date of Receipt M / D / Y
Mailing Address 278 Franklin Rd, Suite 280 TN007-1000		Transaction ID: PR1159839510181
City Brentwood	State Zip Code TN 37024	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer UnitedHealth Group, Inc.	Occupation SVP Regional Operations	P/R Deduction (\$38.46 Bi- Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 881.50	

Full Name (Last, First, Middle Initial) C. ROB VHERNDON, III		Date of Receipt M / D / Y
Mailing Address 415 N. McKinley, Suite 820		Transaction ID: PR1159840510181
City Little Rock	State Zip Code AR 72205	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer United HealthCare Corpora- tion	Occupation CEO, UHC of Arkansas	P/R Deduction (\$19.23 Bi- Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 403.83	

SUBTOTAL of Receipts TN's Page (optional)	202.47
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 8 / 94
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. THOMAS E BURTON		Date of Receipt M / D / Y
Mailing Address 450 Columbus Boulevard 15NB-A/CT30-1030		Transaction ID: PR1159841610181
City Hartford	State CT	Zip Code 06115-0450
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 24.99
Name of Employer UnitedHealth Group, Inc.	Occupation Accountant	P/R Deduction (\$8.33 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 208.25	

Full Name (Last, First, Middle Initial) B. ROBERT CHANNING WHEELER		Date of Receipt M / D / Y
Mailing Address 450 Columbus Blvd CT030-12BB		Transaction ID: PR1159842110181
City Hartford	State CT	Zip Code 06115-0450
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 540.00
Name of Employer UnitedHealth Group, Inc.	Occupation Uniprise CEO	P/R Deduction (\$180.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4500.00	

Full Name (Last, First, Middle Initial) C. ROBERT WHATFIELD		Date of Receipt M / D / Y
Mailing Address 450 Columbus Blvd P.O. BOX 150450 13NB-A		Transaction ID: PR1159784810181
City Hartford	State CT	Zip Code 06115-0450
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 24.99
Name of Employer United HealthCare Corporation	Occupation Director, Pricing	P/R Deduction (\$8.33 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 208.25	

SUBTOTAL of Receipts This Page (optional)	589.98
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 94
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. PETER M LANDAU		Date of Receipt M / D / Y
Mailing Address 505 Boices Lane		
City Kingston	State NY	Zip Code 12401
FEC ID number of contributing federal political committee. C		Transaction ID: PR1159786710181
Name of Employer UnitedHealth Group, Inc.		Amount of Each Receipt this Period 30.00
Occupation Director of OPS, Kingston Service Cent	Aggregate Year-to-Date ▼ 250.00	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MOLLIE CHAPMAN		Date of Receipt M / D / Y
Mailing Address 4501 Erskine Road OH035-3035		
City Cincinnati	State OH	Zip Code 45242
FEC ID number of contributing federal political committee. C		Transaction ID: PR1159780510181
Name of Employer UnitedHealth Group, Inc.		Amount of Each Receipt this Period 30.00
Occupation Manager, Provider Relations	Aggregate Year-to-Date ▼ 250.00	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. KEN L HOVERMAN		Date of Receipt M / D / Y
Mailing Address 3850 Olentangy River Rd OH020-301D		
City Columbus	State OH	Zip Code 43214-1138
FEC ID number of contributing federal political committee. C		Transaction ID: PR1159780910181
Name of Employer UnitedHealth Group, Inc.		Amount of Each Receipt this Period 90.00
Occupation COO UHC Ohio	Aggregate Year-to-Date ▼ 750.00	P/R Deduction (\$30.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	150.00
TOTAL This Period (last page this line number only)	▶	

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 84
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. PAMELA A TULUMELLO		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 194B E. Sunshine, Suite 300 MO015-1000		Transaction ID: PR1159793110181
City Springfield	State MO	Zip Code 65804
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer UnitedHealth Group, Inc.	Occupation Director, Group Services Admin	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. ROBERT J SHEEHY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 990D Bren Road East MND08-W3D1		Transaction ID: PR1159794010181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 570.00
Name of Employer UnitedHealth Group, Inc.	Occupation Executive Management	P/R Deduction (\$190.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4750.00	

Full Name (Last, First, Middle Initial) C. DEBORAH S STREB		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 3850 Olentangy River Rd. OH020-301D		Transaction ID: PR1159794110181
City Columbus	State OH	Zip Code 43214-1138
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer UnitedHealth Group, Inc.	Occupation Information Systems	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	630.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 84

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. BRETT L BABY		Date of Receipt M / D / Y
Mailing Address 385D Olentangy River Rd. OH020-3010		Transaction ID: PR1159794210181
City Columbus	State OH	Zip Code 43214-1138
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.62
Name of Employer UnitedHealth Group, Inc.	Occupation Director, Provider Relations/Contract	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 288.50	

Full Name (Last, First, Middle Initial) B. ANTHONY J KAZLAUSKAS		Date of Receipt M / D / Y
Mailing Address 475 Kilvert St, Suite 310 RID10-3400		Transaction ID: PR1159794610181
City Warwick	State RI	Zip Code 02886-1392
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer UnitedHealth Group, Inc.	Occupation Medical Director	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. GEORGE D SHAFER		Date of Receipt M / D / Y
Mailing Address 6801 Centerville business Pkwy OH010-3005		Transaction ID: PR1159794910181
City Dayton	State OH	Zip Code 45459-6028
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer UnitedHealth Group, Inc.	Occupation CEO Dayton Ohio Plan	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	154.62
TOTAL This Period (last page this line number only)	▶	

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

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FOR LINE NUMBER: PAGE 12 / 84
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. MICHAEL J KOEHLER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 108 Farmers Alley, Suite 400 MI012-3200		Transaction ID: PR1159795310181
City Kalamazoo	State MI	Zip Code 49005-0271
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 120.00
Name of Employer UnitedHealth Group, Inc.	Occupation CEO PHP Southwest Michigan	P/R Deduction (\$40.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. WILLIAM D FELSING		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 10701 W. Research Drive WI130-H420		Transaction ID: PR1159795810181
City Milwaukee	State WI	Zip Code 53226-0649
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer UnitedHealth Group, Inc.	Occupation VP&COO PrimeCare HealthPlan Inc.	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 881.50	

Full Name (Last, First, Middle Initial) C. R EDWARD BERGMARK		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 6300 Olson Memorial Hwy MND10-S203		Transaction ID: PR1159796010181
City Golden Valley	State MN	Zip Code 55427
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.41
Name of Employer UnitedHealth Group, Inc.	Occupation Vice President CEO IHR (OPTUM)	P/R Deduction (\$38.47 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 981.75	

SUBTOTAL of Receipts This Page (optional)	▶	350.79
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 13 / 84

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. RONALD B. COLBY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Rd East MNC08-E211		Transaction ID: PR1159796210181
City	State Zip Code	
Minnetonka	MN 55343	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C		525.00
Name of Employer UnitedHealth Group, Inc.	Occupation Senior VP, Insurance & Product Mgmt	P/R Deduction (\$175.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4375.00	

Full Name (Last, First, Middle Initial) B. LYNNE MONTAGUE-CLOUSE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 12125 Technology Drive MND02-D181		Transaction ID: PR1159796310181
City	State Zip Code	
Eden Prairie	MN 55344	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C		60.00
Name of Employer UnitedHealth Group, Inc.	Occupation International HealthCare Consultan	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. MARY A. WARNE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 2550 University Ave W, S#401S MND40-2500		Transaction ID: PR1159797110181
City	State Zip Code	
St. Paul	MN 55114-1504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C		30.00
Name of Employer UnitedHealth Group, Inc.	Occupation Clinical Team Leader	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	615.00
TOTAL This Period (last page this line number only)	

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

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

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(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. CARLA M MUGGIO		Date of Receipt M / D / Y
Mailing Address One South Wacker IL014-3605		Transaction ID: PR1159798210181
City Chicago	State Zip Code IL 60606	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer UnitedHealth Group, Inc.	Occupation VP Operations	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 480.75	

Full Name (Last, First, Middle Initial) B. CHERYL A POPECK		Date of Receipt M / D / Y
Mailing Address 800 N Magnolia Ave., S#600 FL029-1029		Transaction ID: PR1159799410181
City Orlando	State Zip Code FL 32809	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer UnitedHealth Group, Inc.	Occupation Director of Operations	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. HERBERT L WHETSTONE		Date of Receipt M / D / Y
Mailing Address 513 Eaton St. MND03-1000		Transaction ID: PR1159803810181
City St. Paul	State Zip Code MN 55107	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 28.83
Name of Employer UnitedHealth Group, Inc.	Occupation Aviation Department Manager	P/R Deduction (\$9.61 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.25	

SUBTOTAL of Receipts This Page (optional)	116.52
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 15 / 84
(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. BRIAN R BELLOWS		Date of Receipt M / D / Y
Mailing Address 1175 Post Rd East		Transaction ID: PR1159803810181
City	State	
Westport	CT	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C		45.00
Name of Employer UnitedHealth Group, Inc.	Occupation Vice President Sales Strategic Service	P/R Deduction (\$15.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

Full Name (Last, First, Middle Initial) B. RUTH J KAPLAN		Date of Receipt M / D / Y
Mailing Address 425 Market St. 27th Floor CA035-2707		Transaction ID: PR1159803910181
City	State	
San Francisco	CA	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C		34.62
Name of Employer UnitedHealth Group, Inc.	Occupation UBH VP of Employer Svcs	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 288.50	

Full Name (Last, First, Middle Initial) C. CHARLES B SHIPP		Date of Receipt M / D / Y
Mailing Address 3401 West End Avenue Ste670 TN002		Transaction ID: PR1159805310181
City	State	
Nashville	TN	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C		88.55
Name of Employer UnitedHealth Group, Inc.	Occupation CEO UHC of Tennessee	P/R Deduction (\$28.85 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 638.61	

SUBTOTAL of Receipts TN's Page (optional)	▶	168.17
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 16 / 84

(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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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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. KEITH W NOBLITT		Date of Receipt M / D / Y
Mailing Address 297D Clairmont Rd #650		
City Atlanta	State GA	Zip Code 30329-1634
FEC ID number of contributing federal political committee. C		Transaction ID: PR1159805510181
Name of Employer UnitedHealth Group, Inc.		Amount of Each Receipt this Period 60.00
Occupation Strategic Account Executive	Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. JAMES S WATSON		Date of Receipt M / D / Y
Mailing Address 2717 N. 118th Lucile		
City Omaha	State NE	Zip Code 68164
FEC ID number of contributing federal political committee. C		Transaction ID: PR1159806010181
Name of Employer UnitedHealth Group, Inc.		Amount of Each Receipt this Period 57.69
Occupation V.P. Govt Relations, UHC Midlands	Aggregate Year-to-Date ▼ 480.75	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. DAVID J FALK		Date of Receipt M / D / Y
Mailing Address 2 Penn Plaza Ste 700 NYD38-1000		
City New York	State NY	Zip Code 10121
FEC ID number of contributing federal political committee. C		Transaction ID: PR1159820210181
Name of Employer UnitedHealth Group, Inc.		Amount of Each Receipt this Period 37.50
Occupation Medical Director	Aggregate Year-to-Date ▼ 312.50	P/R Deduction (\$12.50 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	155.19
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
or each category of the
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(check only one)
 11a 11b 11c 12
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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. ROBERT G HUSSEY		Date of Receipt M / D / Y
Mailing Address 833D Boone Blvd Ste 300 VA30-1030		Transaction ID: PR1159821210181
City Vienna	State Zip Code VA 22182-2624	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer UnitedHealth Group, Inc.	Occupation VP, Public Policy & Comm Ovations	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 661.50	

Full Name (Last, First, Middle Initial) B. WILLIAM D YOUNG		Date of Receipt M / D / Y
Mailing Address 800 N. Magnolia Ave Ste 800 FLD29-1029		Transaction ID: PR1159821310181
City Orlando	State Zip Code FL 32809	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.35
Name of Employer UnitedHealth Group, Inc.	Occupation Sr. Medical Director	P/R Deduction (\$38.45 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 845.89	

Full Name (Last, First, Middle Initial) C. WILLIAM C TRACY		Date of Receipt M / D / Y
Mailing Address 9300 W. 110th Ste 350		Transaction ID: PR1159821510181
City Overland	State Zip Code KS 66210	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer UnitedHealth Group, Inc.	Occupation VP Sales	P/R Deduction (\$25.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	

SUBTOTAL of Receipts TNs Page (optional)	305.73
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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(check only one)
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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. MICHAEL J HARRINGTON		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 8300 Olson Memorial Hwy MN10-S203		Transaction ID: PR1159821710181
City Golden Valley	State MN	Zip Code 55427
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer UnitedHealth Group, Inc.	Occupation Optum-Sales	P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

Full Name (Last, First, Middle Initial) B. MICHAEL M HAWKINS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 125D Capital of Tx Hwy S. Bldg I, Ste 400		Transaction ID: PR1159822010181
City Austin	State TX	Zip Code 78746
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.62
Name of Employer UnitedHealth Group, Inc.	Occupation Medical Director	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 282.34	

Full Name (Last, First, Middle Initial) C. MARGARET E STERNBERG		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 2307 W. Cone Blvd NC10-375D		Transaction ID: PR1159822810181
City Greensboro	State NC	Zip Code 27408
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 88.55
Name of Employer UnitedHealth Group, Inc.	Occupation VP Corp Affairs & Govt Programs	P/R Deduction (\$28.85 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 721.25	

SUBTOTAL of Receipts This Page (optional)	271.17
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 10 / 84
(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. RHONDA R BAGBY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 383B N Causeway Blvd Ste 2100 LA035-1000		Transaction ID: PR1159823210181
City State Zip Code Metairie LA 70002	Amount of Each Receipt this Period 57.99	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$19.23 Bi-Weekly)
Name of Employer UnitedHealth Group, Inc.	Occupation Dir. of Finance, UHC of AL, LA, & MS Aggregate Year-to-Date ▼ 449.99	
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. CHARLES F WEBER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9705 Data Park Drive MND08-D252		Transaction ID: PR1159823410181
City State Zip Code Minnetonka MN 55343	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer UnitedHealth Group, Inc.	Occupation Information Systems Aggregate Year-to-Date ▼ 250.00	
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. CAROL M SCHNEEWEIS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 6300 Olson Memorial Hwy MND10-S201		Transaction ID: PR1159823510181
City State Zip Code Golden Valley MN 55427	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer UnitedHealth Group, Inc.	Occupation HealthCare Aggregate Year-to-Date ▼ 1250.00	
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	237.99
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
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Use separate schedule(s)
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FOR LINE NUMBER: PAGE 20 / 84
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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. JOSEPH A BERRY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MN012-5249		Transaction ID: PR1159823710181
City	State Zip Code	
Edina	MN 55436	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		P/R Deduction (\$20.00 Bi-Weekly)
Name of Employer UnitedHealth Group, Inc.	Occupation National Medical Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

Full Name (Last, First, Middle Initial) B. DAVID J LUBBEN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Rd East		Transaction ID: PR1159823810181
City	State Zip Code	
Minnetonka	MN 55343	Amount of Each Receipt this Period 576.93
FEC ID number of contributing federal political committee. C		P/R Deduction (\$192.31 Bi-Weekly)
Name of Employer UnitedHealth Group, Inc.	Occupation General Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4807.59	

Full Name (Last, First, Middle Initial) C. ELISE A GEMEINHARDT		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 1820 L St. NY #B00 DC03D-1000		Transaction ID: PR1159824910181
City	State Zip Code	
Washington	DC 20038	Amount of Each Receipt this Period 230.76
FEC ID number of contributing federal political committee. C		P/R Deduction (\$76.92 Bi-Weekly)
Name of Employer UnitedHealth Group, Inc.	Occupation VP Federal Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1615.32	

SUBTOTAL of Receipts This Page (optional)	827.69
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. BEVERLY H NYCE		Date of Receipt M / D / Y
Mailing Address 450 Columbus Blvd, CT030-1030		Transaction ID: PR1159826010181
City Hartford	State Zip Code CT 06115	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 346.14
Name of Employer UnitedHealth Group, Inc.	Occupation Senior VP Uniprise	P/R Deduction (\$115.38 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2884.50	

Full Name (Last, First, Middle Initial) B. LAWRENCE J KISSNER		Date of Receipt M / D / Y
Mailing Address 13621 NW 12Th Street FLD75-1000		Transaction ID: PR1159826810181
City Sunrise	State Zip Code FL 33323	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer UnitedHealth Group, Inc.	Occupation Vice President Sales & Marketing	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 480.75	

Full Name (Last, First, Middle Initial) C. RICHARD J MIGLIORI		Date of Receipt M / D / Y
Mailing Address 12125 Technology Drive MND02-D145		Transaction ID: PR1159827410181
City Eden Prairie	State Zip Code MN 55344	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 230.76
Name of Employer UnitedHealth Group, Inc.	Occupation Senior VP Ingenix Employer Group	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1923.00	

SUBTOTAL of Receipts This Page (optional)	634.59
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. BARBARA C BUENEMANN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 13855 Riverport Trail MO050-1000		Transaction ID: PR1159828710181
City Maryland Heights	State MO	Zip Code 63043
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.62
Name of Employer UnitedHealth Group, Inc.	Occupation OOO UHC of the Midwest, Inc.	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 288.50	

Full Name (Last, First, Middle Initial) B. JEANNINE M RIVET		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road E. MND08-W315		Transaction ID: PR1159830010181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 576.90
Name of Employer UnitedHealth Group, Inc.	Occupation Executive VP/Operations	P/R Deduction (\$192.90 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4807.50	

Full Name (Last, First, Middle Initial) C. WILLIAM J ANTHONY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-W130		Transaction ID: PR1159830210181
City Minnetonka	State MN	Zip Code 55440-1459
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer UnitedHealth Group, Inc.	Occupation V.P. Call Center Operations - Ovation	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 961.50	

SUBTOTAL of Receipts This Page (optional)	▶	726.90
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. JACK E SHUFF		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 118D Town Center Dr., Ste 39D NV005-1000		Transaction ID: PR1159890510181
City Las Vegas	State NV	Zip Code 89134
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer UnitedHealth Group, Inc.	Occupation Director, Sales and Service	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 480.75	

Full Name (Last, First, Middle Initial) B. MARILYN C NEVIN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-N220		Transaction ID: PR1159807410181
City Edina	State MN	Zip Code 55436
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer UnitedHealth Group, Inc.	Occupation Director of Risk Management	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. TRACY L BAHL		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 450 Columbus Blvd Uniprise Towers, 12NB		Transaction ID: PR1159808410181
City Hartford	State CT	Zip Code 06115
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 348.14
Name of Employer UnitedHealth Group, Inc.	Occupation President, Strategic Services Group	P/R Deduction (\$115.38 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2884.50	

SUBTOTAL of Receipts This Page (optional)	▶	433.83
TOTAL This Period (last page this line number only)	▶	

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Use separate schedule(s)
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 11a 11b 11c 12
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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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. KENNETH A BURDICK		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-W318		Transaction ID: PR1159808910181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer UnitedHealth Group, Inc.	Occupation VP of Underwriting	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

Full Name (Last, First, Middle Initial) B. NANCY C ABELMANN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-N220		Transaction ID: PR1159809110181
City Edina	State MN	Zip Code 55440-1459
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.62
Name of Employer United HealthCare Corporation	Occupation Tax Director	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 288.50	

Full Name (Last, First, Middle Initial) C. MARCIA E SMITH		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-W211		Transaction ID: PR1159810010181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 29.10
Name of Employer UnitedHealth Group, Inc.	Occupation CEO - Evercare	P/R Deduction (\$9.70 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 242.50	

SUBTOTAL of Receipts This Page (optional)	123.72
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
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Use separate schedule(s)
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 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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. JOHN P ANTON		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 297D Clairmont Rd Suite 850 GA010-3360		Transaction ID: PR1159811610181
City Atlanta	State GA Zip Code 30329-1634	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer UnitedHealth Group, Inc.	Occupation Senior Vice President	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 661.50	

Full Name (Last, First, Middle Initial) B. SHEILA G LETSCHER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 990D Bren Road East MND08-T203		Transaction ID: PR1159812010181
City Minnetonka	State MN Zip Code 55343	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer UnitedHealth Group, Inc.	Occupation Attorney	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 480.75	

Full Name (Last, First, Middle Initial) C. WILLIAM P WHITELY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address One South Wacker IL014-0910		Transaction ID: PR1159812810181
City Chicago	State IL Zip Code 60608	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 576.90
Name of Employer UnitedHealth Group, Inc.	Occupation CEO, United HealthCare of Illinois	P/R Deduction (\$192.30 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3192.18	

SUBTOTAL of Receipts This Page (optional)	749.97
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 26 / 84

(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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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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. WAYNE F COOK		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 801 Office Center Drive PA020-1008		Transaction ID: PR1159812810181
City Fort Washington	State Zip Code PA 19034	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer United Health Group	Occupation Accountant AARP	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. RICHARD J RASKIN, MD		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 1375 E 9th St., Suite 1100 OH030-3015		Transaction ID: PR1159813510181
City Cleveland	State Zip Code OH 44114	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer United Health Group, Inc.	Occupation Medical Director	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 480.75	

Full Name (Last, First, Middle Initial) C. LOIS E QUAM		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T300		Transaction ID: PR1159813710181
City Minnetonka	State Zip Code MN 55343	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 576.90
Name of Employer United Health Group, Inc.	Occupation CEO, Ovations	P/R Deduction (\$192.30 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4807.50	

SUBTOTAL of Receipts This Page (optional)	684.59
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 27 / 84

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. RICHARD A COLLINS		Date of Receipt M / D / Y
Mailing Address 450 Columbus Blvd CT030-1030		Transaction ID: PR1159814010181
City Hartford	State CT	Zip Code 06115-0450
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer UnitedHealth Group, Inc.	Occupation Director, Underwriting	P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1096.16	

Full Name (Last, First, Middle Initial) B. THOMAS H LINDQUIST		Date of Receipt M / D / Y
Mailing Address 9900 Bren Road East MND08-T300		Transaction ID: PR1159814110181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 461.52
Name of Employer UnitedHealth Group, Inc.	Occupation President, AARP Division, Ovations	P/R Deduction (\$153.84 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2711.43	

Full Name (Last, First, Middle Initial) C. THOMAS G FAUSTMAN		Date of Receipt M / D / Y
Mailing Address 450 Columbus Blvd CT030-0588		Transaction ID: PR1159814310181
City Hartford	State CT	Zip Code 06115
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.00
Name of Employer United Health Group	Occupation V.P. Operations & Services Uniprise	P/R Deduction (\$15.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

SUBTOTAL of Receipts TNs Page (optional)	▶	656.52
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 28 / 84
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. GLENN J REINHARDT		Date of Receipt M / D / Y
Mailing Address 10701 W. Research Drive WI030-S420		Transaction ID: PR1159814410181
City Milwaukee	State WI	Zip Code 53226
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer UnitedHealth Group, Inc.	Occupation Vice President, Finance and Medicare	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. DAVID SWICHMANN		Date of Receipt M / D / Y
Mailing Address 9900 Bren Road East MND08-W3D4		Transaction ID: PR1159814710181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 576.90
Name of Employer UnitedHealth Group, Inc.	Occupation SVP - Corporate Development	P/R Deduction (\$192.90 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4807.50	

Full Name (Last, First, Middle Initial) C. SAUL FELDMAN		Date of Receipt M / D / Y
Mailing Address 405 Market Street CA035-2701		Transaction ID: PR1159815210181
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 230.76
Name of Employer UnitedHealth Group, Inc.	Occupation CEO United Behavioral Health	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1923.00	

SUBTOTAL of Receipts This Page (optional)	837.66
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 28 / 84
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. EUGENE C. CAVANAUGH		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 450 Columbus Blvd CT030-12NB-BB		Transaction ID: PR1159815310181
City Hartford	State CT	Zip Code 06115
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 230.76
Name of Employer UnitedHealth Group, Inc.	Occupation CFO Uniprise	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1653.78	

Full Name (Last, First, Middle Initial) B. PATRICK J. ERLANDSON		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 990D Bren Road E MND08-B315		Transaction ID: PR1159815910181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 576.90
Name of Employer UnitedHealth Group, Inc.	Occupation VP Corporate Controller	P/R Deduction (\$192.90 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4807.50	

Full Name (Last, First, Middle Initial) C. PIERRE A. MCMAHON		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 450 Columbus Blvd CT030-12BB		Transaction ID: PR1159816010181
City Hartford	State CT	Zip Code 06115-0430
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer UnitedHealth Group, Inc.	Occupation General Council - Uniprise	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	837.66
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 30 / 64
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. PATRICIA R SAURO		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-T500		Transaction ID: PR1159816410181
City	State Zip Code	
Minnetonka	MN 55343	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C		57.69
Name of Employer United Health Group, Inc.	Occupation VP Product Development AARP	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 480.75	

Full Name (Last, First, Middle Initial) B. DANIEL J MCATHIE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road E. MNC08-W318		Transaction ID: PR1159816510181
City	State Zip Code	
Minnetonka	MN 55343	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C		200.00
Name of Employer United Health Group, Inc.	Occupation Senior VP Finance & HealthCare Economi	P/R Deduction (\$100.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	

Full Name (Last, First, Middle Initial) C. WILLIAM A MUNSELL		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road E MNC08-W3D1		Transaction ID: PR1159816810181
City	State Zip Code	
Minnetonka	MN 55343	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C		300.00
Name of Employer United Health Group, Inc.	Occupation Chief Operating Officer	P/R Deduction (\$100.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional)	▶	557.69
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 31 / 84
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. JOHN S PENSCHORN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-8092		Transaction ID: PR1159816910181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer UnitedHealth Group, Inc.	Occupation VP Investor Relations	P/R Deduction (\$100.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. SERAFIN F SANDELLA		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 801 Office Center Drive		Transaction ID: PR1159817210181
City Et Washington	State PA	Zip Code 19034
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer United HealthGroup, Inc.	Occupation Director Compliance AARP	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. PAUL D KALLMEYER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 801 Office Center Drive PAD20-1011		Transaction ID: PR1159817410181
City Et Washington	State PA	Zip Code 19034
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer United HealthGroup	Occupation Attorney	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts TNs Page (optional)	360.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 32 / 64
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. SHEILA E McMILLAN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-T300		Transaction ID: PR1159817510181
City Minnetonka	State Zip Code MN 55343	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 230.76
Name of Employer UnitedHealth Group, Inc.	Occupation VP - Finance AARP Division	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1192.26	

Full Name (Last, First, Middle Initial) B. JOHN R MACH JR		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-W130		Transaction ID: PR1159817610181
City Minnetonka	State Zip Code MN 55343	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 240.00
Name of Employer UnitedHealth Group, Inc.	Occupation Chief Medical Officer, Evercare	P/R Deduction (\$80.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 670.00	

Full Name (Last, First, Middle Initial) C. KEVIN W PEARSON		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5225 Wiley Post Way, Suite 500 UTD15-0500		Transaction ID: PR1159817810181
City Salt Lake City	State Zip Code UT 84118	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 225.00
Name of Employer UnitedHealth Group, Inc.	Occupation CEO Ingenix Health Intelligence	P/R Deduction (\$75.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1875.00	

SUBTOTAL of Receipts This Page (optional)	695.76
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 33 / 84

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. TIMOTHY F RYAN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Rd East MNC08-T400		Transaction ID: PR1159817910181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.00
Name of Employer UnitedHealth Group	Occupation Segment General Counsel	P/R Deduction (\$19.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

Full Name (Last, First, Middle Initial) B. L ROBERT DAPPER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-T902		Transaction ID: PR1159818010181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 461.55
Name of Employer UnitedHealth Group	Occupation Senior Vice President Human Capital	P/R Deduction (\$153.85 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3848.25	

Full Name (Last, First, Middle Initial) C. KELLY J DEKEYSER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 450 Columbus Blvd CT030-15NB		Transaction ID: PR1159818410181
City Hartford	State CT	Zip Code 06103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer UnitedHealth Group	Occupation Senior VP, Business Process Outsourcin	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 480.75	

SUBTOTAL of Receipts This Page (optional)	▶	576.24
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 34 / 84

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. TERRY L CAMERON		Date of Receipt M / D / Y
Mailing Address 5225 Wiley Post Way, Suite 500 UT015-0500		Transaction ID: PR1159818510181
City Salt Lake City	State UT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer UnitedHealth Group	Occupation Senior VP Business Development Inge	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 661.50	

Full Name (Last, First, Middle Initial) B. MARK F LINDSAY		Date of Receipt M / D / Y
Mailing Address 1225 New York Ave DC030-1000		Transaction ID: PR1159818610181
City Washington	State DC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 576.90
Name of Employer UnitedHealth Group	Occupation Director Business Development	P/R Deduction (\$192.90 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4807.50	

Full Name (Last, First, Middle Initial) C. MATTHEW M DAVIES		Date of Receipt M / D / Y
Mailing Address 800 N. Magnolia Ave, Suite 800 FL028-1029		Transaction ID: PR1159819010181
City Orlando	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer UnitedHealth Group	Occupation CEO, Health Plans	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 838.42	

SUBTOTAL of Receipts This Page (optional)	907.58
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 35 / 84
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. THOMAS J QUIRK		Date of Receipt M / D / Y
Mailing Address 5800 Granite Parkway, ste 900 TX033-1000		Transaction ID: PR1159819110181
City	State	
Plano	TX	Amount of Each Receipt this Period 115.38
FEC ID number of contributing federal political committee. C		P/R Deduction (\$38.46 Bi-Weekly)
Name of Employer UnitedHealth Group	Occupation CEO Dallas/Austin Health Plan Aggregate Year-to-Date ▼ 847.66	
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. CHARLES C PITTS		Date of Receipt M / D / Y
Mailing Address 3700 Colonnade Parkway AL001-0607		Transaction ID: PR1159819210181
City	State	
Birmingham	AL	Amount of Each Receipt this Period 115.38
FEC ID number of contributing federal political committee. C		P/R Deduction (\$38.46 Bi-Weekly)
Name of Employer UnitedHealth Group	Occupation CEO, UnitedHealthCare of AL, LA & MS Aggregate Year-to-Date ▼ 861.50	
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. AMY K KNAPP		Date of Receipt M / D / Y
Mailing Address Two Penn Plaza, 7th Floor NY038-1000		Transaction ID: PR1159819310181
City	State	
New York	NY	Amount of Each Receipt this Period 346.14
FEC ID number of contributing federal political committee. C		P/R Deduction (\$115.38 Bi-Weekly)
Name of Employer UnitedHealth Group	Occupation Regional President, Eastern Region, UH Aggregate Year-to-Date ▼ 2884.50	
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	576.90
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 36 / 64
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. WILLIAM E MOELLER		Date of Receipt M / D / Y
Mailing Address 233 North Michigan Ave IL014-0300		Transaction ID: PR1159819510181
City Chicago	State Zip Code IL 60601	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 230.76
Name of Employer UnitedHealth Group	Occupation CEO UnitedHealthcare Illinois	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1576.86	

Full Name (Last, First, Middle Initial) B. LYNELLE IRELAN		Date of Receipt M / D / Y
Mailing Address 333 North Alabama St Ste 350 IND35-1000		Transaction ID: PR1159819610181
City Indianapolis	State Zip Code IN 46204	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer UnitedHealth Group, Inc.	Occupation Executive Director LifeMark	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. ROBERT FLESHNER		Date of Receipt M / D / Y
Mailing Address 441 B East-West Highway MDD31-1000		Transaction ID: PR1159819710181
City Bethesda	State Zip Code MD 20817	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer UnitedHealth Group	Occupation CEO UHC of the Mid Atlantic	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 981.50	

SUBTOTAL of Receipts This Page (optional)	376.14
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 37 / 64

(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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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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. REED V TUCKSON, M.D.		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-T902		Transaction ID: PR1159819810181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 346.14
Name of Employer UnitedHealth Group	Occupation Sr. V.P. Consumer Health & Medical Car	P/R Deduction (\$115.38 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2884.50	

Full Name (Last, First, Middle Initial) B. DONNA L. HOFFMEIER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 1225 New York Ave, Nw, Suite 475 DC03D-1000		Transaction ID: PR1162354510181
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 210.00
Name of Employer UnitedHealth Group, Inc.	Occupation Public Affairs	P/R Deduction (\$70.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1510.00	

Full Name (Last, First, Middle Initial) C. STEVEN MATTHEWS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 7 Hanover Square NYD37-1000		Transaction ID: PR11530189410181
City New York	State NY	Zip Code 10004
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer UnitedHealth Group, Inc.	Occupation Public Affairs	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 480.75	

SUBTOTAL of Receipts This Page (optional)	613.83
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 38 / 64
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. JESS E SWEELY		Date of Receipt M / D / Y
Mailing Address 8045 Leesburg Pke Ste 650 VA026-1000		Transaction ID: PR1530189710181
City	State	
Vienna	VA	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C		576.93
Name of Employer UnitedHealth Group, Inc.	Occupation Chief Operating Officer	P/R Deduction (\$182.31 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4807.75	

Full Name (Last, First, Middle Initial) B. JOHN KIRCHNER		Date of Receipt M / D / Y
Mailing Address 172 West State St., Suite 102 NJ040-1000		Transaction ID: PR1530180510181
City	State	
Trenton	NJ	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C		115.38
Name of Employer UnitedHealth Group, Inc.	Occupation Vice President	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 881.50	

Full Name (Last, First, Middle Initial) C. SHIVRAJ J DESAI		Date of Receipt M / D / Y
Mailing Address The Wannamaker Building 100 Penn S PA040-1000		Transaction ID: PR1530787510181
City	State	
Philadelphia	PA	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C		115.38
Name of Employer UnitedHealth Group, Inc.	Occupation Medical Director	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 881.50	

SUBTOTAL of Receipts This Page (optional)	807.89
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 38 / 64

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. LESLIE GIDDENS ROBINSON		Date of Receipt M / D / Y
Mailing Address 8045 Leesburg Pike Ste 650 VA026-1000		Transaction ID: PR1530798310181
City Vienna	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 346.14
Name of Employer UnitedHealth Group, Inc.	Occupation SVP Medical Management	P/R Deduction (\$115.38 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2884.50	

Full Name (Last, First, Middle Initial) B. DEBORAH MATES CHASKES		Date of Receipt M / D / Y
Mailing Address 8045 Leesburg Pike Ste 650 VA026-1000		Transaction ID: PR1530798510181
City Vienna	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer UnitedHealth Group, Inc.	Occupation Attorney	P/R Deduction (\$100.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) C. THELMA DUGGIN		Date of Receipt M / D / Y
Mailing Address 8045 Leesburg Pike Ste 650 VA026-1000		Transaction ID: PR1530799210181
City Vienna	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 576.93
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$192.31 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4807.75	

SUBTOTAL of Receipts This Page (optional)	1223.07
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 40 / 84

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. RICHARD H MCCASKILL JR		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Rd East MNC08-T500		Transaction ID: PR1550188710181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 346.14
Name of Employer UnitedHealth Group, Inc.	Occupation Administration	P/R Deduction (\$115.38 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2307.60	

Full Name (Last, First, Middle Initial) B. MARY G SHINHAM		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 100 Penn Square, FL9 PAD40-1000		Transaction ID: PR1550180910181
City Philadelphia	State PA	Zip Code 19107
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. JACQUELYN E ALBRIGHT		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T202		Transaction ID: PR1550181010181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 88.55
Name of Employer UnitedHealth Group, Inc.	Occupation Attorney	P/R Deduction (\$28.85 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 721.25	

SUBTOTAL of Receipts This Page (optional)	492.89
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 41 / 84
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. DAVID P INGRAHAM		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-T500		Transaction ID: PR1550191110181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 201.93
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$67.31 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1134.60	

Full Name (Last, First, Middle Initial) B. CYNTHIA ADAMS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9700 Bissonnet Suite 2300/2500 TX037-E288		Transaction ID: PR1551003910181
City Houston	State TX	Zip Code 77036-8000
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.62
Name of Employer UnitedHealth Group, Inc.	Occupation Medical Services	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 288.50	

Full Name (Last, First, Middle Initial) C. DAVID R ASTAR		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 12125 Technology Drive MND02-D100		Transaction ID: PR1551005110181
City Eden Prairie	State MN	Zip Code 55344
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer UnitedHealth Group, Inc.	Occupation COO Ingenix	P/R Deduction (\$100.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2300.00	

SUBTOTAL of Receipts This Page (optional)	▶	536.55
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 42 / 64
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. ROBERT J BOHNENKAMP		Date of Receipt * * / * * / * * * *	
Mailing Address 9900 Bren Road East MNC08-W300		Transaction ID: PR1551005610181	
City State Zip Code Minnetonka MN 55343	Amount of Each Receipt this Period 115.38		
FEC ID number of contributing federal political committee. C		P/R Deduction (\$38.46 Bi-Weekly)	
Name of Employer UnitedHealth Group, Inc.	Occupation Systems	Aggregate Year-to-Date ▼ 661.50	
Receipt For: Primary General Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MICHAEL J BRESOLIN		Date of Receipt * * / * * / * * * *	
Mailing Address 1900 E Golf Rd #200/300 IL035-0300		Transaction ID: PR1551005710181	
City State Zip Code Schaumburg IL 60173	Amount of Each Receipt this Period 60.00		
FEC ID number of contributing federal political committee. C		P/R Deduction (\$20.00 Bi-Weekly)	
Name of Employer UnitedHealth Group, Inc.	Occupation Health Care	Aggregate Year-to-Date ▼ 500.00	
Receipt For: Primary General Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. TIMOTHY J HEADY		Date of Receipt * * / * * / * * * *	
Mailing Address 5901 Lincoln Drive MND12-S234		Transaction ID: PR1551122510181	
City State Zip Code Edina MN 55438	Amount of Each Receipt this Period 120.00		
FEC ID number of contributing federal political committee. C		P/R Deduction (\$40.00 Bi-Weekly)	
Name of Employer UnitedHealth Group, Inc.	Occupation Management	Aggregate Year-to-Date ▼ 840.00	
Receipt For: Primary General Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	295.38
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 43 / 84

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. CHRISTOPHER R R HOCK		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 450 Columbus Blvd CT030-13NB		Transaction ID: PR1551128910181
City Hartford	State CT	Zip Code 06103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.62
Name of Employer UnitedHealth Group, Inc.	Occupation Management	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 257.74	

Full Name (Last, First, Middle Initial) B. JAMES T JARRATT		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-E115		Transaction ID: PR1551132110181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer UnitedHealth Group, Inc.	Occupation Customer Relations	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 861.50	

Full Name (Last, First, Middle Initial) C. JEFFREY W W KAGAN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 2950 Expressway Drive South Ste 24 NYD33-1000		Transaction ID: PR1551132310181
City Islandia	State NY	Zip Code 11749-1412
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer UnitedHealth Group, Inc.	Occupation Financial Analyst	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	210.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 44 / 84
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. MICHAEL C MATTEO		Date of Receipt M / D / Y
Mailing Address 450 Columbus Blvd CT030-15NB		Transaction ID: PR1551133410181
City Hartford	State CT	Zip Code 06103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer UnitedHealth Group, Inc.	Occupation Management	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 480.75	

Full Name (Last, First, Middle Initial) B. KAREN ELIZABETH WILLIAMSON		Date of Receipt M / D / Y
Mailing Address Americhoice 8045 Leesburg Pike Ste VA028-1000		Transaction ID: PR1551136510181
City Vienna	State VA	Zip Code 22182
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11.55
Name of Employer UnitedHealth Group, Inc.	Occupation Sales	P/R Deduction (\$3.85 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 289.30	

Full Name (Last, First, Middle Initial) C. DAWN M OWENS		Date of Receipt M / D / Y
Mailing Address 450 Columbus Blve CT030-15NB		Transaction ID: PR1551160310181
City Hartford	State CT	Zip Code 06103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 576.00
Name of Employer UnitedHealth Group, Inc.	Occupation Management	P/R Deduction (\$192.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4800.00	

SUBTOTAL of Receipts This Page (optional)	▶	645.24
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 45 / 84

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. CATHERINE M PERRY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 8051 East Maplewood Ave. #300 CO030-1000		Transaction ID: PR1551160410181
City Greenwood Village	State CO	Zip Code 80111
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer UnitedHealth Group, Inc.	Occupation Nurse	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. MILES R PORTER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-W212		Transaction ID: PR1551160610181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer UnitedHealth Group, Inc.	Occupation Information Systems	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. ERIKA A ROGERS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 2080 East 20th Street CA060-1000		Transaction ID: PR1551160710181
City Chico	State CA	Zip Code 95528
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer UnitedHealth Group, Inc.	Occupation Management	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	120.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 46 / 84

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. THOMAS J VALERIUS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T850		Transaction ID: PR1551161310181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 230.76
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1023.00	

Full Name (Last, First, Middle Initial) B. LOIS T WEIHRAUCH		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-W130		Transaction ID: PR1551161410181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.00
Name of Employer UnitedHealth Group, Inc.	Occupation Computer Systems	P/R Deduction (\$15.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) C. RONALD G WHITE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T830		Transaction ID: PR1551161510181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer UnitedHealth Group, Inc.	Occupation Sales	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 961.50	

SUBTOTAL of Receipts This Page (optional)	391.14
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 47 / 64

(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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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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. ANTHONY R CARR		Date of Receipt M / D / Y
Mailing Address 13821 Nw 12th St FL075-1000		Transaction ID: PR1554323410181
City Sunrise	State FL	Zip Code 33323
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.00
Name of Employer UnitedHealth Group, Inc.	Occupation Sales	P/R Deduction (\$15.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

Full Name (Last, First, Middle Initial) B. JOHN O ENDERLE		Date of Receipt M / D / Y
Mailing Address 450 Columbus Blvd CT030-075B		Transaction ID: PR1554323510181
City Hartford	State CT	Zip Code 06103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 33.00
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$11.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) C. CHRISTINE M HARRIS		Date of Receipt M / D / Y
Mailing Address 450 Columbus Blvd CT030-11NA		Transaction ID: PR1554323810181
City Hartford	State CT	Zip Code 06103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer UnitedHealth Group, Inc.	Occupation Marketing	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	108.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 48 / 64
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. RICK M JELINEK		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-T500		Transaction ID: PR1554323910181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 144.00
Name of Employer UnitedHealth Group, Inc.	Occupation Senior Management	P/R Deduction (\$48.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1018.74	

Full Name (Last, First, Middle Initial) B. CYNTHIA H JOHNSON		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 3700 Colonnade Parkway AL001-0201		Transaction ID: PR1554324010181
City Birmingham	State AL	Zip Code 35243
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.62
Name of Employer UnitedHealth Group, Inc.	Occupation Sales	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 288.50	

Full Name (Last, First, Middle Initial) C. JOSEPH J MCERLANE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5402 Parkdale Drive #300 MND25-2500		Transaction ID: PR1554324110181
City Minneapolis	State MN	Zip Code 55418
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer UnitedHealth Group, Inc.	Occupation Management	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 480.75	

SUBTOTAL of Receipts This Page (optional)	236.31
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 48 / 84

(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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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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. MICHAEL RADU		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 3141 North Third Ave AZ060-S120		Transaction ID: PR1554324510181
City	State	
Phoenix	AZ	85013
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer UnitedHealth Group, Inc.	Occupation Marketing	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 480.75	

Full Name (Last, First, Middle Initial) B. CATHERINE E SPILLANE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9700 Bissonnet Suite 2300/2500 TX037-0100		Transaction ID: PR1554324610181
City	State	
Houston	TX	77036-8000
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer UnitedHealth Group, Inc.	Occupation Administration	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 480.75	

Full Name (Last, First, Middle Initial) C. KIRK E STAPLETON		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-S13B		Transaction ID: PR1554324710181
City	State	
Edina	MN	55438
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer UnitedHealth Group, Inc.	Occupation Network Development	P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

SUBTOTAL of Receipts This Page (optional)	▶	285.38
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 60 / 64

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. CRAIG C ANDERSON		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 450 Columbus Blvd CT030-15NB		Transaction ID: PR1575957310181
City Hartford	State CT	Zip Code 06103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 480.75	

Full Name (Last, First, Middle Initial) B. KAREN L ERICKSON		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-N110		Transaction ID: PR1575957610181
City Edina	State MN	Zip Code 55436
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 120.00
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$40.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 820.00	

Full Name (Last, First, Middle Initial) C. MARIO F FABRIZIO JR		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 6150 Trenton Lane N MND13-N300		Transaction ID: PR1575957710181
City Plymouth	State MN	Zip Code 55442
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 225.00
Name of Employer UnitedHealth Group, Inc.	Occupation Data Systems Management	P/R Deduction (\$75.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1475.00	

SUBTOTAL of Receipts This Page (optional)	▶	402.69
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 51 / 84
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. CATHERINE B KILLIAN		Date of Receipt M / D / Y
Mailing Address The Wannamaker Building 100 Penn S PA040-1000		Transaction ID: PR1575957810181
City Philadelphia	State PA	Zip Code 19107
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 230.76
Name of Employer UnitedHealth Group, Inc.	Occupation Public Relations	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1023.00	

Full Name (Last, First, Middle Initial) B. ERNEST MONFILETTO		Date of Receipt M / D / Y
Mailing Address The Wannamaker Building 100 Penn S PA040-1000		Transaction ID: PR1575958110181
City Philadelphia	State PA	Zip Code 19107
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 230.76
Name of Employer UnitedHealth Group, Inc.	Occupation Computer Operations	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1023.00	

Full Name (Last, First, Middle Initial) C. LEE D VALENTA		Date of Receipt M / D / Y
Mailing Address 12125 TECHNOLOGY DRIVE MND02-D100		Transaction ID: PR1575958510181
City EDEN PRAIRIE	State MN	Zip Code 55344
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 576.90
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$192.30 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3741.40	

SUBTOTAL of Receipts This Page (optional)	1038.42
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 52 / 64

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. PATRICK J BYRNE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 8300 Olson Memorial HWY MND10-5203		Transaction ID: PR1580863010181
City Golden Valley	State MN	Zip Code 55427
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 861.50	

Full Name (Last, First, Middle Initial) B. DAVID L COLE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 8300 Olson Memorial HWY MND10-W120		Transaction ID: PR1580863210181
City Golden Valley	State MN	Zip Code 55427
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 861.50	

Full Name (Last, First, Middle Initial) C. G RICHARD COOK		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5800 Granite PKWY STE 900 TX033-1000		Transaction ID: PR1580863310181
City Plano	State TX	Zip Code 75024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 861.50	

SUBTOTAL of Receipts This Page (optional)	▶	346.14
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 53 / 64
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. TOM M DAVIS		Date of Receipt M / D / Y
Mailing Address 5975 Castle Creek PKWY N DR STE 1 IND40-1000		Transaction ID: PR1580863510181
City Indianapolis	State IN	Zip Code 46250
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 120.00
Name of Employer UnitedHealth Group, Inc.	Occupation Director Sales	P/R Deduction (\$40.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. DAVID B OSTLER		Date of Receipt M / D / Y
Mailing Address 2525 Lake Park Boulevard UTD15-0500		Transaction ID: PR1580864610181
City West Valley City	State UT	Zip Code 84120
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer UnitedHealth Group, Inc.	Occupation Marketing	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. THOMAS S PAUL		Date of Receipt M / D / Y
Mailing Address 9900 Bren Road East MND08-T500		Transaction ID: PR1580864710181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer UnitedHealth Group, Inc.	Occupation Pharmacy	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 981.50	

SUBTOTAL of Receipts This Page (optional)	▶	285.38
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 54 / 64
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. JIMMIE L POGUE		Date of Receipt M / D / Y
Mailing Address 801 Office Center Drive PA020-1000		Transaction ID: PR1580864810181
City Fort Washington	State Zip Code PA 19034	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer UnitedHealth Group, Inc.	Occupation Health Care	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 480.75	

Full Name (Last, First, Middle Initial) B. PAMELA J SAUNDERS		Date of Receipt M / D / Y
Mailing Address 145 Commercial St ME009-1000		Transaction ID: PR1580865010181
City Portland	State Zip Code ME 04101	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1253.80	

Full Name (Last, First, Middle Initial) C. KAREN R SCHIEVELBEIN		Date of Receipt M / D / Y
Mailing Address 425 Market St Floor 12/13/27 CA035-2700		Transaction ID: PR1580865110181
City San Francisco	State Zip Code CA 94105	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 230.76
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1923.00	

SUBTOTAL of Receipts This Page (optional)	318.45
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 55 / 64

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. JOSEPH O WEISSENBORN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-T850		Transaction ID: PR1580865410181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 255.00
Name of Employer UnitedHealth Group, Inc.	Occupation HR Benefits	P/R Deduction (\$85.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2125.00	

Full Name (Last, First, Middle Initial) B. GEORGE E BENNETT		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 4170 Ashford Dunwoody RD Sba 100 GA035-1000		Transaction ID: PR1586303610181
City Atlanta	State GA	Zip Code 30319
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. WILLIAM S BOJAN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-T205		Transaction ID: PR1586303710181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 120.00
Name of Employer UnitedHealth Group, Inc.	Occupation Risk Management	P/R Deduction (\$40.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	405.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 66 / 84

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. BRIGID A BONNER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-W212		Transaction ID: PR1596303810181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer UnitedHealth Group, Inc.	Occupation Information Technology	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. CHARLES A BOWLES		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address P.O Box 9472 PAB6D-1000		Transaction ID: PR1596303910181
City Minneapolis	State MN	Zip Code 55440-9472
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer UnitedHealth Group, Inc.	Occupation Sales & Marketing	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 480.75	

Full Name (Last, First, Middle Initial) C. PAUL H GULSTRAND		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 6300 Olson Memorial HWY MND10-E112		Transaction ID: PR15963D4010181
City Golden Valley	State MN	Zip Code 55427
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 961.50	

SUBTOTAL of Receipts This Page (optional)	▶	233.07
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 57 / 64

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. RICHARD J HUGHES		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 8300 Olson Memorial Hwy MND10-S268		Transaction ID: PR1596304110181
City Golden Valley	State MN	Zip Code 55427
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer UnitedHealth Group, Inc.	Occupation Administration	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. PAMELA NHURSH		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 8300 Olson Memorial HWY MND10-S203		Transaction ID: PR1596304210181
City Golden Valley	State MN	Zip Code 55427
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer UnitedHealth Group, Inc.	Occupation Accountant	P/R Deduction (\$25.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	

Full Name (Last, First, Middle Initial) C. JOHN KING		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 450 Columbus Blvd CT030-03NB		Transaction ID: PR1596304410181
City Hartford	State CT	Zip Code 06103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer UnitedHealth Group, Inc.	Occupation Sales	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	135.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 58 / 64

(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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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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. GAYE ADAMS MASSEY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-T500		Transaction ID: PR1596304510181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer UnitedHealth Group, Inc.	Occupation Attorney	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 480.75	

Full Name (Last, First, Middle Initial) B. JAY S MATUSHAK		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-T700		Transaction ID: PR1596304610181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.62
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 288.50	

Full Name (Last, First, Middle Initial) C. MICHAEL JOHN McDONNELL		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-N205		Transaction ID: PR1596304710181
City Edina	State MN	Zip Code 55438
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 231.00
Name of Employer UnitedHealth Group, Inc.	Occupation Attorney	P/R Deduction (\$77.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1925.00	

SUBTOTAL of Receipts This Page (optional)	▶	323.31
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 58 / 64

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. GEORGE L MIKAN III		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 8900 Bren Road East MNC08-T700		Transaction ID: PR1596304810181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 230.76
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1023.00	

Full Name (Last, First, Middle Initial) B. CAROL B MORNESS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 8300 Olson Memorial HWY MND10-E112		Transaction ID: PR1596304910181
City Golden Valley	State MN	Zip Code 55427
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer UnitedHealth Group, Inc.	Occupation Underwriting	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 861.50	

Full Name (Last, First, Middle Initial) C. PAMELA J RUSSO		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 425 Market St FL 12/13/27 CA035-2700		Transaction ID: PR1596305010181
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.62
Name of Employer UnitedHealth Group, Inc.	Occupation Personnel	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 288.50	

SUBTOTAL of Receipts This Page (optional)	390.76
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 60 / 84
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. METE SAHIN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 800 King Farm Blvd Ste 600 MD051-1000		Transaction ID: PR1596305110181
City Rockville	State MD	Zip Code 20850
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 230.76
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1023.00	

Full Name (Last, First, Middle Initial) B. SCOTT E THEISEN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-W385		Transaction ID: PR1596305610181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 480.75	

Full Name (Last, First, Middle Initial) C. ROGER A WEBER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 6300 Olson Memorial Hwy MND10-W115		Transaction ID: PR1596305710181
City Golden Valley	State MN	Zip Code 55427
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.62
Name of Employer UnitedHealth Group, Inc.	Occupation Administration	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 288.50	

SUBTOTAL of Receipts This Page (optional)	323.07
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 61 / 84

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. GEOFFREY ALAN GOTHRO		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-T700		Transaction ID: PR1596306810181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer UnitedHealth Group, Inc.	Occupation Marketing	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 884.58	

Full Name (Last, First, Middle Initial) B. THOMAS D LEWIS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 3938 N Causeway Blvd STE 2100 LA035-1000		Transaction ID: PR1596306910181
City Metairie	State LA	Zip Code 70002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 884.58	

Full Name (Last, First, Middle Initial) C. ROBERT W OBERRENDER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T380		Transaction ID: PR1596307010181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 87.00
Name of Employer UnitedHealth Group, Inc.	Occupation Cash Management	P/R Deduction (\$29.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 687.00	

SUBTOTAL of Receipts This Page (optional)	▶	317.78
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 62 / 64

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. ROBERT REBITZER		Date of Receipt M / D / Y
Mailing Address 425 Market St Fl 12/13/27 CA035-2700		Transaction ID: PR1596307110181
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 442.29	

Full Name (Last, First, Middle Initial) B. KEVINJOE SWANSON		Date of Receipt M / D / Y
Mailing Address One Research Drive #300B MA085-1800		Transaction ID: PR1596307310181
City Westborough	State MA	Zip Code 01581
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.00
Name of Employer UnitedHealth Group, Inc.	Occupation Sales	P/R Deduction (\$15.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 345.00	

Full Name (Last, First, Middle Initial) C. DIANE L BEDNAR FLYNN		Date of Receipt M / D / Y
Mailing Address 9900 Bren Road East MND08-W130		Transaction ID: PR1596309710181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer UnitedHealth Group, Inc.	Occupation Health Care Services	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

SUBTOTAL of Receipts This Page (optional)	▶	162.69
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 63 / 64

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. LISA M BEHNKE		Date of Receipt M / D / Y
Mailing Address Two Penn Plaza 6/7 Floors NY036-1000		Transaction ID: PR1596309810181
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer UnitedHealth Group, Inc.	Occupation Medicine	P/R Deduction (\$100.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2100.00	

Full Name (Last, First, Middle Initial) B. JAMES M BLETZER		Date of Receipt M / D / Y
Mailing Address Two Penn Plaza 6/7 Floors NY036-1000		Transaction ID: PR1596310210181
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer UnitedHealth Group, Inc.	Occupation Sales	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) C. JAMES M BOGDAN		Date of Receipt M / D / Y
Mailing Address 5901 Lincoln Drive MND12-S204		Transaction ID: PR1596310310181
City Edina	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.00
Name of Employer UnitedHealth Group, Inc.	Occupation Management	P/R Deduction (\$19.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 399.00	

SUBTOTAL of Receipts This Page (optional)	417.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 64 / 84
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. TROY A BDRCA		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-T500		Transaction ID: PR1596310410181
City	State	Zip Code
Minnnetonka	MN	55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) B. THOMAS R BRADY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9200 Worthington Road OH020-301D		Transaction ID: PR1596310510181
City	State	Zip Code
Westerville	OH	43082
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 230.76
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1615.32	

Full Name (Last, First, Middle Initial) C. ROBERT W BURG		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 2700 Midwest Drive WI010-100D		Transaction ID: PR1596310810181
City	State	Zip Code
Onalaska	WI	54650
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 120.00
Name of Employer UnitedHealth Group, Inc.	Occupation Attorney	P/R Deduction (\$40.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 840.00	

SUBTOTAL of Receipts This Page (optional)	▶	390.76
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 65 / 84

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. PATRICIA M CARROLL		Date of Receipt M / D / Y
Mailing Address 9700 Bissonnet, Suite 2300/2500 TX037-0100		Transaction ID: PR1596311110181
City Houston	State TX	Zip Code 77036-8000
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer UnitedHealth Group, Inc.	Occupation Customer Relations	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) B. JEFFREY S COOK		Date of Receipt M / D / Y
Mailing Address 5959 Northwest Pkwy Ste 107 TX081-1000		Transaction ID: PR1596311310181
City San Antonio	State TX	Zip Code 78249
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.62
Name of Employer UnitedHealth Group, Inc.	Occupation Network Management	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 242.34	

Full Name (Last, First, Middle Initial) C. RAMON E GOTO		Date of Receipt M / D / Y
Mailing Address 13821 NW 12th St FL075-1000		Transaction ID: PR1596311510181
City Sunrise	State FL	Zip Code 33323
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 403.83	

SUBTOTAL of Receipts This Page (optional)	122.31
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 66 / 84

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. ANNE D DEFLUSCO		Date of Receipt M / D / Y
Mailing Address 450 Columbus Blvd CT030-15NA		Transaction ID: PR1596311710181
City Hartford	State Zip Code CT 06103	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.62
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 242.34	

Full Name (Last, First, Middle Initial) B. JEFFREY P DOOLEY		Date of Receipt M / D / Y
Mailing Address 9009 Corporate Lake Drive FL021-1021		Transaction ID: PR1596312110181
City Tampa	State Zip Code FL 33624	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.62
Name of Employer UnitedHealth Group, Inc.	Occupation Sales	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 242.34	

Full Name (Last, First, Middle Initial) C. RICHARD G DUNLOP		Date of Receipt M / D / Y
Mailing Address 9200 Worthington Road OH020-301D		Transaction ID: PR1596312310181
City Westerville	State Zip Code OH 43082	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$25.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

SUBTOTAL of Receipts This Page (optional)	144.24
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 67 / 84
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. KEITH A EPPERSON		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-N230		Transaction ID: PR1596312410181
City Edina	State MN	Zip Code 55436
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.00
Name of Employer UnitedHealth Group, Inc.	Occupation Actuary	P/R Deduction (\$15.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

Full Name (Last, First, Middle Initial) B. JILLIAN R FOUCRE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 233 North Michigan Ave ILD14-3605		Transaction ID: PR1596312710181
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer UnitedHealth Group, Inc.	Occupation Senior Management	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) C. STEVAN D GARCIA		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-N110		Transaction ID: PR1596312910181
City Edina	State MN	Zip Code 55436
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer UnitedHealth Group, Inc.	Occupation Data Systems	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 403.83	

SUBTOTAL of Receipts This Page (optional)	162.69
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 68 / 84
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. RANDY P GILES		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 2000 West Loop South Suite #800/70 TX035-1000		Transaction ID: PR1596313210181
City Houston	State TX	Zip Code 77027
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer UnitedHealth Group, Inc.	Occupation Health Care	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 807.66	

Full Name (Last, First, Middle Initial) B. RONALD H HARMS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-S11D		Transaction ID: PR1596313510181
City Edina	State MN	Zip Code 55436
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 230.76
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1615.32	

Full Name (Last, First, Middle Initial) C. EDWARD J HAWLEY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 2700 Midwest Drive WI010-1000		Transaction ID: PR1596313810181
City Onalaska	State WI	Zip Code 54650
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer UnitedHealth Group, Inc.	Occupation Health Care	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 807.66	

SUBTOTAL of Receipts This Page (optional)	461.52
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 68 / 84
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. KURT A HEJMANN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 13855 Riverport Drive MO050-1000		Transaction ID: PR1596313710181
City Maryland Heights	State Zip Code MO 63043	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 36.00
Name of Employer UnitedHealth Group, Inc.	Occupation Information Networking	P/R Deduction (\$12.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	

Full Name (Last, First, Middle Initial) B. DALE JONES		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 10 Cadillac Drive #200 TN002-1002		Transaction ID: PR1596314210181
City Brentwood	State Zip Code TN 37027	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer UnitedHealth Group, Inc.	Occupation Health Care	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 807.68	

Full Name (Last, First, Middle Initial) C. NANETTE R KARTSONIS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MN008-W130		Transaction ID: PR1596314810181
City Minnetonka	State Zip Code MN 55343	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer UnitedHealth Group, Inc.	Occupation Sales	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

SUBTOTAL of Receipts TN's Page (optional)	211.38
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 70 / 84

(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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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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. EDWARD LAGERSTROM		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-T430		Transaction ID: PR1596315010181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer UnitedHealth Group, Inc.	Occupation Information Systems	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 807.66	

Full Name (Last, First, Middle Initial) B. KATHLEENA MALLATT		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 2717 N 118th Circle Ste 300 NE010-3700		Transaction ID: PR1596315410181
City Omaha	State NE	Zip Code 68164-9672
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 120.00
Name of Employer UnitedHealth Group, Inc.	Occupation Health Care	P/R Deduction (\$40.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 840.00	

Full Name (Last, First, Middle Initial) C. BRIAN C MURRAY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T700		Transaction ID: PR1596316210181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 28.86
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$9.62 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 202.02	

SUBTOTAL of Receipts This Page (optional)	▶	284.24
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 71 / 84
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. THOMAS CHARLES REKART		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 12125 Technology Drive MNC002-0100		Transaction ID: PR1596316710181
City Eden Prairie	State MN	Zip Code 55344
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer UnitedHealth Group, Inc.	Occupation Information Systems	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 403.83	

Full Name (Last, First, Middle Initial) B. JOHN H RENNICK JR		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 823D Rainview Rd #315 NC015-1000		Transaction ID: PR1596316810181
City Charlotte	State NC	Zip Code 28210-3253
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer UnitedHealth Group, Inc.	Occupation Doctor	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 403.83	

Full Name (Last, First, Middle Initial) C. JAMISON RICE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-S200		Transaction ID: PR1596316910181
City Edina	State MN	Zip Code 55438
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.62
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 242.34	

SUBTOTAL of Receipts This Page (optional)	150.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 72 / 84

(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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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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. STEPHAN S RODGERS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MN012-S200		Transaction ID: PR1596317110181
City Edina	State MN	Zip Code 55436
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 346.14
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$115.38 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2422.98	

Full Name (Last, First, Middle Initial) B. DANIEL I ROSENTHAL		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 13621 NW 12Th St FLD75-1000		Transaction ID: PR1596317310181
City Sunrise	State FL	Zip Code 33323
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 403.83	

Full Name (Last, First, Middle Initial) C. KEVIN J RUTH		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 80 King Farm Blvd Ste 800 MDD51-1000		Transaction ID: PR1596317410181
City Rockville	State MD	Zip Code 20850
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 225.00
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$75.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1575.00	

SUBTOTAL of Receipts This Page (optional)	▶	628.83
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 73 / 84
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. MANJEL A SELVA		Date of Receipt M / D / Y
Mailing Address 13821 NW 12th St FL075-1000		Transaction ID: PR1596317710181
City Sunrise	State FL	Zip Code 33323
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer UnitedHealth Group, Inc.	Occupation Doctor	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 403.83	

Full Name (Last, First, Middle Initial) B. JUAN R SERRANO		Date of Receipt M / D / Y
Mailing Address 5900 Granite Parkway Ste 900 TX033-1000		Transaction ID: PR1596317810181
City Plano	State TX	Zip Code 75024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 403.83	

Full Name (Last, First, Middle Initial) C. DAVID G STURKEY		Date of Receipt M / D / Y
Mailing Address 107 Westpark Blvd Ste 110 SC020-1000		Transaction ID: PR1596318410181
City Columbia	State SC	Zip Code 29210
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer UnitedHealth Group, Inc.	Occupation Health Care	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 807.68	

SUBTOTAL of Receipts This Page (optional)	230.75
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 74 / 84
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. ROXANNE THOMAS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-T615		Transaction ID: PR1596318910181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.62
Name of Employer UnitedHealth Group, Inc.	Occupation Administrative	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 242.34	

Full Name (Last, First, Middle Initial) B. CHRIS B TURNAU		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-T390		Transaction ID: PR1596319110181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer UnitedHealth Group, Inc.	Occupation Tax Specialist	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) C. ROSEMARY VEMTO		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 1900 E Golf Road #200/300 IL035-0300		Transaction ID: PR1596319310181
City Schaumburg	State IL	Zip Code 60173
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer UnitedHealth Group, Inc.	Occupation Medicine	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 403.83	

SUBTOTAL of Receipts This Page (optional)	122.31
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 75 / 84

(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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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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. FRANK M VIERLING		Date of Receipt M / D / Y
Mailing Address 2700 Midwest Drive WI010-1000		Transaction ID: PR1596319410181
City Onalaska	State WI	
Zip Code 54650		Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C		P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) B. M LAURIE WASSERSTEIN		Date of Receipt M / D / Y
Mailing Address 450 Columbus Blvd CT030-12NB		Transaction ID: PR1596319510181
City Hartford	State CT	
Zip Code 06103		Amount of Each Receipt this Period 57.69
FEC ID number of contributing federal political committee. C		P/R Deduction (\$19.23 Bi-Weekly)
Name of Employer UnitedHealth Group, Inc.	Occupation Information Systems	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 403.83	

Full Name (Last, First, Middle Initial) C. MYRON R WERLEY		Date of Receipt M / D / Y
Mailing Address 5901 Lincoln Drive MND12-N123		Transaction ID: PR1596319810181
City Edina	State MN	
Zip Code 55438		Amount of Each Receipt this Period 37.50
FEC ID number of contributing federal political committee. C		P/R Deduction (\$12.50 Bi-Weekly)
Name of Employer UnitedHealth Group, Inc.	Occupation Insurance	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 282.50	

SUBTOTAL of Receipts This Page (optional)	125.19
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 76 / 84

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. WILLIAM R WILSON		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 450 Columbus Blvd CT028-095B		Transaction ID: PR1596320010181
City Hartford	State CT	Zip Code 06103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer UnitedHealth Group, Inc.	Occupation Underwriting	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) B. JANET P WRIGHT		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 920D Worthington Road OH020-301D		Transaction ID: PR1596320110181
City Westerville	State OH	Zip Code 43082
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer UnitedHealth Group, Inc.	Occupation Information Systems	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) C. JANET K WUORENMA		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-W130		Transaction ID: PR1596320210181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer UnitedHealth Group, Inc.	Occupation Administration	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 403.83	

SUBTOTAL of Receipts This Page (optional)	▶	117.69
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 77 / 84
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. EDWARD J WHEELER		Date of Receipt M / D / Y
Mailing Address 84 Warner Road OH910-1000		Transaction ID: PR1600594410181
City Hubbard	State Zip Code OH 44425	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 120.00
Name of Employer UnitedHealth Group, Inc.	Occupation Mktg & Strategic Performance	P/R Deduction (\$40.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 720.00	

Full Name (Last, First, Middle Initial) B. STEVE L BROECKERT		Date of Receipt M / D / Y
Mailing Address 2700 MIDWEST DRIVE WI010-1000		Transaction ID: PR1600597210181
City ONALASKA	State Zip Code WI 54650	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.62
Name of Employer UnitedHealth Group, Inc.	Occupation Securities	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.80	

Full Name (Last, First, Middle Initial) C. JOHN P DODDY		Date of Receipt M / D / Y
Mailing Address 131 MORRISTOWN ROAD NJ006-1200		Transaction ID: PR1600597310181
City BASKING RIDGE	State Zip Code NJ 07920	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer UnitedHealth Group, Inc.	Occupation Information Systems	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	214.62
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 78 / 84
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. MARGUERITE EDWARDS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9008 CORPORATE LAKE DRIVE FL021-0540		Transaction ID: PR1600597410181
City TAMPA	State FL	Zip Code 33634
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer UnitedHealth Group, Inc.	Occupation Management	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 769.20	

Full Name (Last, First, Middle Initial) B. MICHAEL ILE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 LINCOLN DRIVE MND12-S200		Transaction ID: PR1600597610181
City EDINA	State MN	Zip Code 55436
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer UnitedHealth Group, Inc.	Occupation Management	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 384.60	

Full Name (Last, First, Middle Initial) C. THOMAS J O'BRIEN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 680 OAKMONT LANE #200 IL036-1000		Transaction ID: PR1600597810181
City WESTMONT	State IL	Zip Code 60559
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer UnitedHealth Group, Inc.	Occupation Management	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 769.20	

SUBTOTAL of Receipts This Page (optional)	▶	288.45
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 78 / 84

(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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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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. LISA VANDERHEYDEN		Date of Receipt M / D / Y
Mailing Address 815D TRENTON LN N MND13-N400		Transaction ID: PR1600598010181
City PLYMOUTH	State MN	Zip Code 55442
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer UnitedHealth Group, Inc.	Occupation Information Systems	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. STEPHEN B GREENBERG		Date of Receipt M / D / Y
Mailing Address 1925 ISAAC NEWTON SQ STE 300 VAD19-1000		Transaction ID: PR1600598410181
City RESTON	State VA	Zip Code 20191
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer UnitedHealth Group, Inc.	Occupation Operations	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 385.37	

Full Name (Last, First, Middle Initial) C. MICHAEL D MICHAUX		Date of Receipt M / D / Y
Mailing Address 12125 TECHNOLOGY DRIVE MND02-D245		Transaction ID: PR1600598510181
City EDEN PRAIRIE	State MN	Zip Code 55344
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.62
Name of Employer UnitedHealth Group, Inc.	Occupation Attorney	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 219.28	

SUBTOTAL of Receipts This Page (optional)	▶	152.31
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 80 / 84
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. LEWIS G SANDY			Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 LINCOLN DRIVE MND12-N205			Transaction ID: PR1600598710181
City	State	Zip Code	
EDINA	MN	55436	Amount of Each Receipt this Period 195.00
FEC ID number of contributing federal political committee. C			P/R Deduction (\$65.00 Bi-Weekly)
Name of Employer UnitedHealth Group, Inc.		Occupation Doctor	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 1235.00	

Full Name (Last, First, Middle Initial) B. MICHAEL P CAUTIN			Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T500			Transaction ID: PR1602667510181
City	State	Zip Code	
Minnetonka	MN	55343	Amount of Each Receipt this Period 57.69
FEC ID number of contributing federal political committee. C			P/R Deduction (\$19.23 Bi-Weekly)
Name of Employer UnitedHealth Group, Inc.		Occupation Information Systems	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 348.14	

Full Name (Last, First, Middle Initial) C. MATTHEW W PETERSON			Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-S286			Transaction ID: PR1602669910181
City	State	Zip Code	
Edina	MN	55436	Amount of Each Receipt this Period 120.00
FEC ID number of contributing federal political committee. C			P/R Deduction (\$40.00 Bi-Weekly)
Name of Employer UnitedHealth Group, Inc.		Occupation Human Resources	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 720.00	

SUBTOTAL of Receipts This Page (optional)	372.69
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 81/84
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. JEFF W MALONEY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 8900 Bren Road East MNC08-W130		Transaction ID: PR1613243510181
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 230.76
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1307.64	

Full Name (Last, First, Middle Initial) B. LAURA M BRANKER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 8045 Leesburg Pike VA028-1000		Transaction ID: PR1613243610181
City Vienna	State VA	Zip Code 22182
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 86.55
Name of Employer UnitedHealth Group, Inc.	Occupation Public Relations	P/R Deduction (\$28.85 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 481.60	

Full Name (Last, First, Middle Initial) C. ALLEN LAWRENCE FINKELSTEIN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 2 Gateway Center NJ040-1000		Transaction ID: PR1620989010181
City Newark	State NJ	Zip Code 07102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer UnitedHealth Group, Inc.	Occupation Administration	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 578.90	

SUBTOTAL of Receipts This Page (optional)	432.69
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 82 / 84
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. VALERIE GREY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 7 Hanover Square NY037-1000		Transaction ID: PR1620989210181
City State Zip Code New York NY 10004	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 57.69
Name of Employer UnitedHealth Group, Inc.	Occupation Information Systems	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 288.45	

Full Name (Last, First, Middle Initial) B. DANIEL S WALLER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-W385		Transaction ID: PR1632360010181
City State Zip Code Minnetonka MN 55343	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 86.55
Name of Employer UnitedHealth Group, Inc.	Occupation Management	P/R Deduction (\$28.85 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 348.20	

Full Name (Last, First, Middle Initial) C. STEVE R KOOREN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 6150 Trenton Lane N MND13-N400		Transaction ID: PR1653443210181
City State Zip Code Plymouth MN 55442	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 173.07
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$57.69 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 578.90	

SUBTOTAL of Receipts This Page (optional)	317.31
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 83 / 84

(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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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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. FEATHER O HOUSTON		Date of Receipt * * / * * / * * * *	
Mailing Address The Wannamaker Building 100 Penn Sq PA040-1000		Transaction ID: PR1653446110181	
City Philadelphia	State PA	Zip Code 19107	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C		P/R Deduction (\$50.00 Bi-Weekly)	
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	Aggregate Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial) B. JOYCE A LARKIN		Date of Receipt * * / * * / * * * *	
Mailing Address 9900 Bren Road East MND08-T500		Transaction ID: PR1677771610181	
City Minnetonka	State MN	Zip Code 55343	Amount of Each Receipt this Period 230.76
FEC ID number of contributing federal political committee. C		P/R Deduction (\$76.92 Bi-Weekly)	
Name of Employer UnitedHealth Group, Inc.	Occupation Public Relations	Aggregate Year-to-Date ▼ 481.52	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	390.76
TOTAL This Period (last page this line number only)	30803.62

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

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

FOR LINE NUMBER: PAGE 84 / 84

(check only one)

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

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NAME OF COMMITTEE (In Full) United Health Group Incorporated Political Fund	
Full Name (Last, First, Middle Initial) A. Arizona Democratic Party	Date of Receipt M / D / Y 10 / 18 / 2004
Mailing Address 291 D North Central Avenue	Transaction ID: 20548370
City State Zip Code Phoenix AZ 85012	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C	Refund of Excessive Contribution
Name of Employer Receipt For: Primary General Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 2500.00

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	2500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)

A. Obama For Illinois Inc

Mailing Address P.O. Box 802799

City Chicago State IL Zip Code 60680

Purpose of Disbursement

Candidate Name
Barack Obama

Office Sought: House Disbursement For: 2004
 Senate Primary General
 President
 State: IL District: 2 Other (specify) ▼

011
Category/
Type

Transaction ID: 20547602

Date of Disbursement

10 / 20 / 2004

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. A Lot of People Supporting Tom Daschle

Mailing Address P O Box 1656

City Sioux Falls State SD Zip Code 57101

Purpose of Disbursement

Candidate Name
Tom Daschle

Office Sought: House Disbursement For: 2004
 Senate Primary General
 President
 State: SD District: 2 Other (specify) ▼

011
Category/
Type

Transaction ID: 20548365

Date of Disbursement

10 / 21 / 2004

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

C. McCollum for Congress

Mailing Address 2484 Burke Ave E

City North St Paul State MN Zip Code 55109

Purpose of Disbursement

Candidate Name
Betty McCollum

Office Sought: House Disbursement For: 2004
 Senate Primary General
 President
 State: MN District: 4 Other (specify) ▼

011
Category/
Type

Transaction ID: 20548367

Date of Disbursement

10 / 25 / 2004

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

6000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 86 / 94

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. Committe To Re-Elect Ed Towns

Mailing Address 438 Lewis Avenue

City State Zip Code
Brooklyn NY 11233

Purpose of Disbursement

Candidate Name
Rep. Edolphus Towns

Office Sought: House Senate President
State: NY District: 10
Disbursement For: 2004
Primary General Other (specify) ▼

011
Category/
Type

Transaction ID: 20548368
Date of Disbursement

10 / 25 / 2004

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)
B. People For Patty Murray U S Senate Campaign

Mailing Address PO Box 3662

City State Zip Code
Seattle WA 98124

Purpose of Disbursement

Candidate Name
Sen. Patty Murray

Office Sought: House Senate President
State: WA District: 1
Disbursement For: 2004
Primary General Other (specify) ▼

011
Category/
Type

Transaction ID: 20548366
Date of Disbursement

10 / 25 / 2004

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

9000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 87 / 94

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. Pat Frank

Mailing Address C/O Frank Sanchez
1106 W Coral Street

City Tampa State FL Zip Code 33602

Purpose of Disbursement
Void - Pat Frank - Returned

Candidate Name
Patrick Frank

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: FL District

011
Category/
Type

Transaction ID: 20549344
Date of Disbursement

10 / 15 / 2004

Amount of Each Disbursement this Period

-200.00

Void - Pat Frank - Returned

Full Name (Last, First, Middle Initial)
B. Harvey Hilderbran Campaign

Mailing Address P.O. Box 204270

City Kerrville State TX Zip Code 78026

Purpose of Disbursement
Harvey Hilderbran, STATE HOUSE 53rd TX

Candidate Name
Representative Harvey Hilderbran

Office Sought: x House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: TX District 53

011
Category/
Type

Transaction ID: 20547600
Date of Disbursement

10 / 20 / 2004

Amount of Each Disbursement this Period

250.00

Harvey Hilderbran, STATE HOUSE 53rd TX

Full Name (Last, First, Middle Initial)
C. Texans for Rick Perry

Mailing Address P.O. Box 12428

City Austin State TX Zip Code 78711-2428

Purpose of Disbursement
Rick Perry, GOVERNOR TX

Candidate Name
Rick Perry

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: TX District

011
Category/
Type

Transaction ID: 20548963
Date of Disbursement

10 / 21 / 2004

Amount of Each Disbursement this Period

5000.00

Rick Perry, GOVERNOR TX

SUBTOTAL of Disbursements This Page (optional) ▶

5050.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 88 / 94

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)

A. Bill Zedler Campaign

Mailing Address 5502 Hidden Trails

City Arlington State TX Zip Code 76017

Purpose of Disbursement
Bill Zedler, STATE HOUSE 98th TX

Candidate Name
TX Rep. Bill Zedler

Office Sought: House
 Senate
 President

Disbursement For: 2004
Primary General
Other (specify) ▼

State: TX District 98

011
Category/
Type

Transaction ID: 20547603

Date of Disbursement

10 / 21 / 2004

Amount of Each Disbursement this Period

500.00

Bill Zedler, STATE HOUSE
98th TX

Full Name (Last, First, Middle Initial)

B. Texans for Bob Deuell

Mailing Address P.O. Box 5609

City Greenville State TX Zip Code 75404

Purpose of Disbursement
Bob Deuell, STATE SENATE TX

Candidate Name
TX Sen. Bob Deuell

Office Sought: House
 Senate
 President

Disbursement For: 2004
Primary General
Other (specify) ▼

State: TX District 2

011
Category/
Type

Transaction ID: 20548251

Date of Disbursement

10 / 21 / 2004

Amount of Each Disbursement this Period

1000.00

Bob Deuell, STATE SENATE
TX

Full Name (Last, First, Middle Initial)

C. Glenda Dawson Campaign

Mailing Address 4803 W. Orange

City Pearland State TX Zip Code 77581

Purpose of Disbursement
Glenda Dawson, STATE HOUSE 29th TX

Candidate Name
TX Rep. Glenda Dawson

Office Sought: House
 Senate
 President

Disbursement For: 2004
Primary General
Other (specify) ▼

State: TX District 29

011
Category/
Type

Transaction ID: 20548252

Date of Disbursement

10 / 21 / 2004

Amount of Each Disbursement this Period

500.00

Glenda Dawson, STATE HOUSE
29th TX

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 Page

FOR LINE NUMBER:
(check only one)

PAGE 89 / 94

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. John Davis Campaign

Mailing Address 14807 Tumbling Falls

City Houston State TX Zip Code 77062

Purpose of Disbursement
John Davis, STATE HOUSE 129th TX

Candidate Name
Representative John Davis

Office Sought: House
Senate
President

State: TX District: 12

Disbursement For: 2004
Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 20548253
Date of Disbursement

10 / 21 / 2004

Amount of Each Disbursement this Period

500.00

John Davis, STATE HOUSE
129th TX

Full Name (Last, First, Middle Initial)
B. Myra Crowover Campaign

Mailing Address P.O. Box 51322

City Denton State TX Zip Code 76206

Purpose of Disbursement
Myra Crowover, STATE HOUSE 64th TX

Candidate Name
Representative Myra Crowover

Office Sought: House
Senate
President

State: TX District: 64

Disbursement For: 2004
Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 20548254
Date of Disbursement

10 / 21 / 2004

Amount of Each Disbursement this Period

500.00

Myra Crowover, STATE HOU-
SE 64th TX

Full Name (Last, First, Middle Initial)
C. Kip Averitt Campaign

Mailing Address P.O. Box 20883

City Waco State TX Zip Code 76702

Purpose of Disbursement
Kip Averitt, STATE SENATE TX

Candidate Name
TX Sen. Kip Averitt

Office Sought: House
 Senate
President

State: TX District: 22

Disbursement For: 2004
Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 20548255
Date of Disbursement

10 / 21 / 2004

Amount of Each Disbursement this Period

1000.00

Kip Averitt, STATE SENATE
TX

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 Page

FOR LINE NUMBER:
(check only one)

PAGE 90 / 94

<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input checked="" type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. Robert Duncan Campaign

Mailing Address P.O. Box 2909

City Lubbock State TX Zip Code 79408

Purpose of Disbursement
Robert Duncan, STATE SENATE TX

Candidate Name
Senator Robert Duncan

Office Sought: House Disbursement For: 2004
 Senate Primary General
President Other (specify) ▼

State: TX District: 28

011
Category/
Type

Transaction ID: 20548257
Date of Disbursement

10 / 21 / 2004

Amount of Each Disbursement this Period

1000.00

Robert Duncan, STATE SENA-
TE TX

Full Name (Last, First, Middle Initial)
B. Fraser for Texas Senate

Mailing Address 101 Hwy 281
#3D1

City Marble Falls State TX Zip Code 78654

Purpose of Disbursement
Troy Fraser, STATE SENATE TX

Candidate Name
Senator Troy Fraser

Office Sought: House Disbursement For: 2004
 Senate Primary General
President Other (specify) ▼

State: TX District: 24

011
Category/
Type

Transaction ID: 20548259
Date of Disbursement

10 / 21 / 2004

Amount of Each Disbursement this Period

1000.00

Troy Fraser, STATE SENATE
TX

Full Name (Last, First, Middle Initial)
C. Linda Harper-Brown Campaign

Mailing Address 125 E John Carpenter Fwy,
#250

City Irving State TX Zip Code 75062

Purpose of Disbursement
Linda Harper-Brown, STATE HOUSE 105th TX

Candidate Name
TX Rep. Linda Harper-Brown

Office Sought: House Disbursement For: 2004
Senate Primary General
President Other (specify) ▼

State: TX District: 10

011
Category/
Type

Transaction ID: 20548260
Date of Disbursement

10 / 21 / 2004

Amount of Each Disbursement this Period

500.00

Linda Harper-Brown, STATE
HOUSE 105th TX

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 91 / 94

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)

A. Carl Isett Campaign

Mailing Address 3817 62nd Drive

City Lubbock State TX Zip Code 79413

Purpose of Disbursement
Carl Isett, STATE HOUSE 84th TX

Candidate Name
Representative Carl Isett

Office Sought: House
Senate
President

Disbursement For: 2004
Primary General
Other (specify) ▼

State: TX District: B4

011
Category/
Type

Transaction ID: 20548261

Date of Disbursement

10 / 21 / 2004

Amount of Each Disbursement this Period

500.00

Carl Isett, STATE HOUSE
84th TX

Full Name (Last, First, Middle Initial)

B. Jodie Laubenberg Campaign

Mailing Address P.O. Box 1154

City Wylie State TX Zip Code 75008

Purpose of Disbursement
Jodie Laubenberg, STATE HOUSE 89th TX

Candidate Name
TX Rep. Jodie Laubenberg

Office Sought: House
Senate
President

Disbursement For: 2004
Primary General
Other (specify) ▼

State: TX District: B9

011
Category/
Type

Transaction ID: 20548344

Date of Disbursement

10 / 21 / 2004

Amount of Each Disbursement this Period

500.00

Jodie Laubenberg, STATE
HOUSE 89th TX

Full Name (Last, First, Middle Initial)

C. Jon Lindsay Campaign

Mailing Address P.O. Box 2783

City Houston State TX Zip Code 77252

Purpose of Disbursement
Jon Lindsay, STATE SENATE TX

Candidate Name
Senator Jon Lindsay

Office Sought: House
 Senate
President

Disbursement For: 2004
Primary General
Other (specify) ▼

State: TX District: 7

011
Category/
Type

Transaction ID: 20548345

Date of Disbursement

10 / 21 / 2004

Amount of Each Disbursement this Period

500.00

Jon Lindsay, STATE SENATE
TX

SUBTOTAL of Disbursements This Page (optional) ▶

1500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. Brian McCall Campaign

Mailing Address 609 W. 15th St.,
#200

City State Zip Code
Plano TX 75075-8876

Purpose of Disbursement
Brian McCall, STATE HOUSE 66th TX

Candidate Name
Representative Brian McCall

Office Sought: House
Senate
President

Disbursement For: 2004
Primary General
Other (specify) ▼

State: TX District: 66

011
Category/
Type

Transaction ID: 20548348
Date of Disbursement

10 / 21 / 2004

Amount of Each Disbursement this Period

500.00

Brian McCall, STATE HOUSE
66th TX

Full Name (Last, First, Middle Initial)
B. Ken Mercer Campaign

Mailing Address P.O. Box 781301

City State Zip Code
San Antonio TX 78726-1301

Purpose of Disbursement
Ken Mercer, STATE HOUSE 117th TX

Candidate Name
TX Rep. Ken Mercer

Office Sought: House
Senate
President

Disbursement For: 2004
Primary General
Other (specify) ▼

State: TX District: 11

011
Category/
Type

Transaction ID: 20548350
Date of Disbursement

10 / 21 / 2004

Amount of Each Disbursement this Period

250.00

Ken Mercer, STATE HOUSE
117th TX

Full Name (Last, First, Middle Initial)
C. Steve Ogden Campaign

Mailing Address P.O. Box 3128

City State Zip Code
Bryan TX 77805-3128

Purpose of Disbursement
Steve Ogden, STATE SENATE TX

Candidate Name
Senator Steve Ogden

Office Sought: House
 Senate
President

Disbursement For: 2004
Primary General
Other (specify) ▼

State: TX District: 5

011
Category/
Type

Transaction ID: 20548351
Date of Disbursement

10 / 21 / 2004

Amount of Each Disbursement this Period

1000.00

Steve Ogden, STATE SENATE
TX

SUBTOTAL of Disbursements This Page (optional) ▶

1750.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)

A. Gene Seaman Campaign

Mailing Address 4825 Ocean Drive

City State Zip Code
Corpus Christi TX 78412

Purpose of Disbursement
Gene Seaman, STATE HOUSE 32nd TX

Candidate Name
Representative Gene Seaman

Office Sought: House Senate President
Disbursement For: 2004
Primary General Other (specify) ▼

State: TX District: 32

011
Category/
Type

Transaction ID: 20548353

Date of Disbursement

10 / 21 / 2004

Amount of Each Disbursement this Period

500.00

Gene Seaman, STATE HOUSE
32nd TX

Full Name (Last, First, Middle Initial)

B. Todd Staples for Texas Senate

Mailing Address P.O. Box 2208

City State Zip Code
Palestine TX 75802

Purpose of Disbursement
Todd Staples, STATE SENATE TX

Candidate Name
Senator Todd Staples

Office Sought: House Senate President
Disbursement For: 2004
Primary General Other (specify) ▼

State: TX District: 3

011
Category/
Type

Transaction ID: 20548355

Date of Disbursement

10 / 21 / 2004

Amount of Each Disbursement this Period

1000.00

Todd Staples, STATE SENATE
TX

Full Name (Last, First, Middle Initial)

C. Coalition to Elect Larry Taylor

Mailing Address B11 Cowards Creek Dr.

City State Zip Code
Friendswood TX 77548

Purpose of Disbursement
Larry Taylor, STATE HOUSE 24th TX

Candidate Name
TX Rep. Larry Taylor

Office Sought: House Senate President
Disbursement For: 2004
Primary General Other (specify) ▼

State: TX District: 24

011
Category/
Type

Transaction ID: 20548357

Date of Disbursement

10 / 21 / 2004

Amount of Each Disbursement this Period

500.00

Larry Taylor, STATE HOUSE
24th TX

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 Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. Texans for Tommy Williams

Mailing Address P.O. Box 8069

City The Woodlands State TX Zip Code 77381

Purpose of Disbursement
Tommy Williams, STATE SENATE TX

Candidate Name
TX Sen. Tommy Williams

Office Sought: House Disbursement For: 2004
 Senate Primary General
 President Other (specify) ▼

State: TX District: 4

Transaction ID: 20548360
Date of Disbursement
10 / 21 / 2004

Amount of Each Disbursement this Period
1000.00

Tommy Williams, STATE SENATE TX

Full Name (Last, First, Middle Initial)
B. Van Arsdale Campaign

Mailing Address 8318 Reid Lake

City Houston State TX Zip Code 77064

Purpose of Disbursement
Corbin Van Arsdale, STATE HOUSE 130th TX

Candidate Name
TX Rep. Corbin Van Arsdale

Office Sought: House Disbursement For: 2004
 Senate Primary General
 President Other (specify) ▼

State: TX District: 13

Transaction ID: 20548361
Date of Disbursement
10 / 21 / 2004

Amount of Each Disbursement this Period
250.00

Corbin Van Arsdale, STATE HOUSE 130th TX

SUBTOTAL of Disbursements This Page (optional)	▶	1250.00
TOTAL This Period (last page this line number only)	▶	18050.00