Image#	2021	061	R944	9469	424
iiiiaye#	2021	0010	5544	3403	747

06/18/2021 14 : 55

PAGE 1 / 200

FEC FORM 3X	AND	ORT OF DISBU	RSEN		S		Office Use Only	, ,
1. NAME OF COMMITTEE (in fu	-	R PRINT ▼		ple: If typir the lines.	ng, type	12FE4M	5	
UnitedHealth Gr		rated PAC (U		Ith Grou	p PAC)			
ADDRESS (number and Check if different than previously reported. (ACC	street)						20004	
2. FEC IDENTIFICAT		▼ 3.	CITY ▲ IS THIS REPORT	~	IEW N) <b>OR</b>	STATE AM (A)	IENDED	CODE A
July 15 Quarterly October 1 Quarterly January 3 Year-End July 31 Mi Report (No Year Only)	rts: Report (Q1) (c Report (Q2) 5 Report (Q3) 1 Report (YE) d-Year on-election (QY)	Report Cue On: N Due On: N 12-Day PRE-Election Report for the Election	ction on	×	12C)	Sep	12S) in th State	
Terminatio (TER)			ction on	M M /	D = D /	Y Y Y Y Y Y	in th State	e of
5. Covering Period I certify that I have exa Type or Print Name of Signature of Treasurer	Davis Treasurer Davis, Kelly, , ,	s, Kelly, , ,	of my know	Electronically	p Filed] Di	ate 06	/ D D /	2021
NOTE: Submission of fal Office Use Only	se, erroneous, or	Incomplete informa	ation may sub	ect the pers	son signing th	IS Report to th	FEC FO Rev. 05	RM 3X

X

#### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name

FEC Form 3X (Rev. 05/2016)

### UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

R	eport Covering the Period: From:	5 / 01 / Y Y Y Y 2021 Te	b: 05 / 05 / Y Y Y Y 2021
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2021		920699.74
	(b) Cash on Hand at Beginning of Reporting Period	1575219.63	
	(c) Total Receipts (from Line 19)	140259.42	791279.31
	<ul><li>(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)</li></ul>	1715479.05	1711979.05
7.	Total Disbursements (from Line 31)	21000.00	17500.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1694479.05	1694479.05
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

#### For further information contact:

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

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

### DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

### UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Report Covering	the Period: From:	/ D D / Y Y Y Y 01 2021 Te	D: 05 / 05 / 2021
l	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
(a) Individual	(other than loans) From: s/Persons Other itical Committees		
	zed (use Schedule A)	132364.22	693169.68
(ii) Uniter (iii) TOTA	mized	7895.20	98109.63
	11(a)(i) and (ii)▶	140259.42	791279.31
	Party Committees	0.00	0.00
(such as (d) Total Cor	PACs)	0.00	0.00
	(b), and (c)) (Carry Line 33, page 5)	140259.42	791279.31
	tees	0.00	0.00
13. All Loans Rec	ceived	0.00	0.00
	ents Received	0.00	0.00
(Carry Totals 16. Refunds of Co	to Line 37, page 5)	0.00	0.00
	nittees	0.00	0.00
(Dividends, In	terest, etc.)	0.00	0.00
. ,	nedule H3)	0.00	0.00
(b) Levin Fun	ds (from Schedule H5)	0.00	0.00
(c) Total Trans	sfers (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts			704070.04
	5, 16, 17, and 18(c))▶	140259.42	791279.31
20. Total Federal (subtract Line	Receipts 18(c) from Line 19)▶	140259.42	791279.31

Page 3

I

### DETAILED SUMMARY PAGE

of Disbursements

	FEC Form 3X (Rev. 05/2016)		Page 4 COLUMN B Calendar Year-to-Date		
	II. Disbursements	COLUMN A Total This Period			
<ul> <li>Operating Expenditures:</li> <li>(a) Allocated Federal/Non-Federal Activity (from Schedule H4)</li> </ul>					
	(i) Federal Share	0.00	0.00		
	(ii) Non-Federal Share	0.00	0.00		
(b	<ul> <li>Other Federal Operating Expenditures</li> </ul>	0.00	0.00		
(C					
Т	(add 21(a)(i), (a)(ii), and (b))	0.00	0.00		
С	ommitteesontributions to	0.00	0.00		
F	ederal Candidates/Committees nd Other Political Committees	0.00	0.00		
	dependent Expenditures ise Schedule E)	0.00	0.00		
С	oordinated Party Expenditures i2 U.S.C. § 30116(d))				
(i	se Schedule F)	0.00	0.00		
L	oan Repayments Made	0.00	0.00		
L	oans Made	0.00	0.00		
Refunds of Contributions To: (a) Individuals/Persons Other	4				
	Than Political Committees	0.00	0.00		
(b		0.00	0.00		
(C	<ul> <li>Other Political Committees</li> <li>(such as PACs)</li> </ul>	0.00	0.00		
(C	/				
	(add Lines 28(a), (b), and (c))	0.00	0.00		
	ther Disbursements (Including on-Federal Donations)	24000.00	17500.00		
		21000.00	17500.00		
F (a	ederal Election Activity (52 U.S.C. § 30101(2 a) Allocated Federal Election Activity	20))			
χ-	(from Schedule H6)				
	(i) Federal Share	0.00	0.00		
	(ii) "Levin" Share	0.00	0.00		
(b	<ul> <li>Federal Election Activity Paid</li> <li>Entirely With Federal Funds</li> </ul>	0.00	0.00		
(C	) Total Federal Election Activity (add				
	Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00		
	otal Disbursements (add Lines 21(c), 22,				
2	3, 24, 25, 26, 27, 28(d), 29 and 30(c))	21000.00	17500.00		
	tal Federal Disbursements				
	subtract Line 21(a)(ii) and Line 30(a)(ii) om Line 31)	21000.00	47500.00		
		21000.00	17500.00		

### DETAILED SUMMARY PAGE

of Disbursements

COLUMN A

**Total This Period** 

FEC Form 3X (Rev. 05/2016)

### III. Net Contributions/ Operating Expenditures

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

(subtract Line 37 from Line 36) .....

		1		140259.42
	7	-	7	1 1 45 1
				0.00
	 -		-7	0.00
	1.1			
	-		-	140259.42
	7		7	0.00
100				
	-7		-7	0.00
				0.00
	-7-		-7-	0.00

- E					791279.31
		-7		-7	191219.31
- E					0.00
	1	-7	1	-	0.00
- E					791279.31
	1	7		- 7	101210101
- E					0.00
		7		7	
- E					0.00
		-7		-7	0.00
					0.00
		 		 	0.00

COLUMN B

Calendar Year-to-Date

#### Page 5

# Use separate schedule(s)

FOR LINE NUMBER:

PAGE 6 OF

			Use separate schedule(s)	(check only one)						
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13	$\square$	11b 14	11c	12	17
	ny information copied from such Reports and Sta for commercial purposes, other than using the n				or the p		ose of	soliciting	contribut	tions
$\setminus$	NAME OF COMMITTEE (In Full)									
$\rangle$	UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	C)						
۹.	Full Name of Individual (Last, First, Middle Initia GAUDIO, JOSEPH, , ,	l) or Full O	rganization Name		Date of	Re	ceipt			
	Mailing Address 4842 E MOUNTAIN VIEW RD			11	м м 05	/	D D 31	/ Y	y y 2021	Y
	City	State	Zip Code		Trans	acti	on ID :	PR1159	81186197	7
	PARADISE VALLEY	AZ	85253-1539	A	mount	of	Each R	eceipt th	is Period	
	FEC ID number of contributing federal political committee.	С					,		384.	60
	Name of Employer (for Individual)	Осси	pation (for Individual)	- 1	Me	emo	Item			
	United HealthCare Services Inc	Reg	n CEO							
	Receipt For:	Aggregate	Year-to-Date 🔻							
	Primary General		2115.30	P/	R Dedu	uctic	on (\$192	2.30 Bi-V	/eekly)	
	Other (specify) <b>v</b>									
<u> </u>	Full Name of Individual (Last, First, Middle Initia MIGLIORI, RICHARD, , ,	l) or Full O	rganization Name		Date of	Re	ceipt			
	Mailing Address PO BOX 72			™ _ M 05	/	31	/ Y	y y 2021	Y	
	City	State	Zip Code		Transa	actio	on ID :	PR11598	32746197	7
	WAYZATA	MN	A	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С	384.60				60			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P, UHG Chief Medical Officer		Me	emo	Item			
	Receipt For:	Aggregate	Year-to-Date 🔻	1						
	Primary General Other (specify) ▼		2115.30	P/	R Dedu	uctio	on (\$192	2.30 Bi-W	/eekly)	
	Full Name of Individual (Last, First, Middle Initia MILLER, KATHERINE, , ,	l) or Full O	rganization Name		Date of	Re	ceint			
	Mailing Address 2321 HARBOR LAKE DRIVE				M M	/		/ Y	YY	Y
		1 -		41	05		31		2021	
	City ORANGE PARK	State FL	Zip Code 32003-7799						32436197 iis Period	7
	FEC ID number of contributing					01		eceipt ti		_
	federal political committee.	С		15	_	-	y	y	384.0	60
	Name of Employer (for Individual)		pation (for Individual)		Me	emo	Item			
	United HealthCare Services Inc Receipt For:		Network	_						
	Primary General	Aggregate	Year-to-Date <b>V</b>		P Dod	uctic	n (¢10'	2.30 Bi-V	(ookhy)	
	Other (specify)		2115.30		R Deui	uciit	JII (\$192	2.30 DI-V	veekiy)	
s	UBTOTAL of Receipts This Page (optional)								1153.8	30
-	OTAL This Devied float same this line and	-h		Ē						-
1	<b>OTAL</b> This Period (last page this line number on	ııy)	•••••••••••••••••••••••••••••••••••••••				-		1	

FOR LINE NUMBER:

PAGE

7 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)				
II EIWIIZED KEGEIPIJ		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17				
Any information copied from such Reports or for commercial purposes, other than usi	and Statements mang the name and a	ay not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions e to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)	orated PAC (I	JnitedHealth Group P/	4C)				
Full Name of Individual (Last, First, Mid ANDERSON, CRAIG, , ,	dle Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 47 AMATO CIRCLE			M M / D D / Y Y Y Y 05 31 2021				
City WETHERSFIELD	State CT	Zip Code 06109-3971	Transaction ID : PR1575957361977 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		384.60				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In Pres Ntwk Mgmt	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)				
Full Name of Individual (Last, First, Mid B. KELLY, JOHN, , ,	dle Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 4901 HAWTHORNE CO SUITE 304	1	Zin Code	05 / D D / Y Y Y Y Y 2021				
City EDINA	State MN	Zip Code 55436-5802	Transaction ID : PR1575959761977 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		384.60				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Tax	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)				
Full Name of Individual (Last, First, Mid C. COHEN, ADAM, , ,	dle Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 18515 24TH AVE N			05 31 2021				
City PLYMOUTH	State MN	Zip Code 55447-2010	Transaction ID : PR1580863161977           Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		76.92				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Diversity & Inclusion	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)				
SUBTOTAL of Receipts This Page (option	nal)		846.12				
TOTAL This Period (last page this line nu	mber only)						

FOR LINE NUMBER:

PAGE 8 OF

TEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)					
		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17					
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, Middle A. WEBB, ROBERT, , ,	e Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 4516 DREXEL AVENUE			05 31 2021					
City	State MN	Zip Code	Transaction ID : PR1580865361977					
EDINA	IVIIN	55424-1130	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		384.60					
Name of Employer (for Individual)		upation (for Individual)	Memo Item					
United HealthCare Services Inc Receipt For:		P UnitedHIth Grp	_					
Primary General	Aggregate	Year-to-Date <b>V</b>	P/R Deduction (\$192.30 Bi-Weekly)					
Other (specify) ▼		2115.30	F/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle	Initial) or Full O	roanization Name						
B. JOHNSON, THAD, , ,			Date of Receipt					
Mailing Address 9741 GLACIER BAY			05 31 / Y Y Y Y 2021					
City	State	Zip Code	Transaction ID : PR1596304361977					
	MN	55347-2615	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Group Gen Counsel	Memo Item					
Receipt For:		Year-to-Date ▼	-					
Primary General	33 - 3 - 4		P/R Deduction (\$192.30 Bi-Weekly)					
Other (specify) <b>v</b>		, 2115.30						
Full Name of Individual (Last, First, Middle C. SCHUMACHER, DANIEL, , ,	e Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 5401 LARADA LANE			05 31 2021					
City	State	Zip Code	Transaction ID : PR1596305461977					
EDINA	MN	55436-1024	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С	384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) f Strat & Growth Officer	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼						
Other (specify)		2115.30	P/R Deduction (\$192.30 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional	)		1153.80					
	,							
TOTAL This Period (last page this line num	uer unity)							

# Use separate schedule(s)

FOR LINE NUMBER:

PAGE 9 OF

	-	Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12					
			13     14     15     16     17       erson for the purpose of soliciting contributions       a to collicit contributions from queb committee					
NAME OF COMMITTEE (In Full)	g the name and a	doress of any political committe	e to solicit contributions from such committee.					
UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, Midd THEISEN, SCOTT, , ,	le Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 1950 MEADOWWOODS			05 31 2021					
City LONG LAKE	State MN	Zip Code 55356-9312	Transaction ID : PR1596305661977 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		384.60					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Unit CEO	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Midd B. ANDERSON, MICHAEL, , ,	le Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 17907 INVERNESS CUR	RVE		05 31 2021					
City EDEN PRAIRIE	State MN	Zip Code 55347-2155	Transaction ID : PR1596309361977 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Prd	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Midd BORCA, TROY, , ,	le Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 1649 SPRING VALLEY			05 / D D / Y Y Y Y 2021					
City HARTLAND	State WI	Zip Code 53029-2056	Transaction ID : PR1596310461977           Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		76.92					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item					
Receipt For: Primary General Other (specify)	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional	al)		846.12					
TOTAL This Period (last page this line num	nber only)							

FOR LINE NUMBER:

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		Use separate schedule(s)	(ch	(check only one)									
			for each category of the Detailed Summary Page	2	<b>4</b> 11a	11b	11c	12					
	y information copied from such Reports and Sta for commercial purposes, other than using the n												
<u> </u>	NAME OF COMMITTEE (In Full)												
$\rangle$	UnitedHealth Group Incorporated	I PAC (l	UnitedHealth Group F	PAC)									
A.	Full Name of Individual (Last, First, Middle Initia DAVIDSON, TRACY, , ,	l) or Full O	Drganization Name		Date of Receipt								
	Mailing Address 6058 HARBOUR TOWN CIR				05 / D D / Y Y Y Y 2021								
	City WESTERVILLE	State OH	Zip Code 43082-8144				: PR1596 Receipt th	<b>31166197</b> nis Period	7				
	FEC ID number of contributing federal political committee.	С				- 7		384.6	30				
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) P Network		Me	mo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30		P/R Dedu	iction (\$1	92.30 Bi-V	Veekly)					
в.	Full Name of Individual (Last, First, Middle Initia DUNLOP, RICHARD, , ,	l) or Full O	Drganization Name		Date of	Receipt							
	Mailing Address 2964 WYSE COURT	1			м м 05	/ D 3		y y 2021	Y				
	City LEWIS CENTER	State OH	Zip Code 43035-8253				: PR1596 Receipt th	31236197	7				
	FEC ID number of contributing federal political committee.	С			384.60								
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) h Plan CEO		Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	J F	P/R Deduction (\$192.30 Bi-Weekly)								
С.	Full Name of Individual (Last, First, Middle Initia HAFERMANN, JOSEPH, , ,	l) or Full O	Drganization Name		Date of	Receipt							
	Mailing Address 5525 ZENITH AVENUE SOUTH				м м 05	/ D 3		ү ү 2021	Y				
	City EDINA	State MN	Zip Code 55410-2466				Receipt th	31346197	7				
	FEC ID number of contributing federal political committee.	С				y		384.6	30				
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) s Insurance Sols		Me	mo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30		P/R Deduction (\$192.30 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)					,		1153.8	30				
Т	OTAL This Period (last page this line number on	ıly)											

# Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a         11b         11c         12           13         14         15         16         17								
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middle HEUMANN, KURT, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 63 MUIRFIELD COURT			05 / Y Y Y Y 2021								
City SAINT LOUIS	State MO	Zip Code 63141-7372	Transaction ID : PR1596313761977 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		88.46								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 486.53	P/R Deduction (\$44.23 Bi-Weekly)								
Full Name of Individual (Last, First, Middle HIGGINS, MARY, , ,	Initial) or Full C	Date of Receipt									
Mailing Address 54 BELCREST ROAD			05 / D D / Y Y Y Y Y 2021								
	State CT	Zip Code	Transaction ID : PR1596313861977								
WEST HARTFORD		06107-3304	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		76.92								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For:	Aggregate	Year-to-Date 🔻									
Other (specify) ▼		423.06	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle LAGERSTROM, EDWARD, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 2248 SHADYWOOD ROA			05 / 0 0 / 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0								
City WAYZATA	State MN	Zip Code 55391-9223	Transaction ID : PR1596315061977           Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) s Ntwk	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			549.98								
TOTAL This Period (last page this line numb	er only)										

## SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

# Use separate schedule(s)

FOR LINE NUMBER:

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			Use separate schedule(s)				(check only one)								
	EMIZED RECEIPTS	for each category of the Detailed Summary Page			11a 13		11b	11c	12 16	17					
	y information copied from such Reports and Sta for commercial purposes, other than using the r				for the		oose of	soliciting	contribu	tions					
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (L	InitedHealth Group PA	AC)											
A.	Full Name of Individual (Last, First, Middle Initia ROSENTHAL, DANIEL, , ,	al) or Full Or	ganization Name	Date of Receipt											
	Mailing Address 8 VIA HERMOSA				05 / D D / Y Y Y Y 2021										
	City ORINDA	State CA	Zip Code 94563-1828		Transaction ID : PR1596317361977 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	C					7	-	384.	60					
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) n CEO		Me	emo	ltem								
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 2115.30	•	P/R Dedu	uctio	on (\$192	2.30 Bi-W	/eekly)						
B.	Full Name of Individual (Last, First, Middle Initia STURKEY, DAVID, , ,	al) or Full Or	ganization Name		Date of	Re	ceipt								
	Mailing Address 117 KELLER BLVD			05	/	D D 31	/ Y	y y 2021	Y						
	City CLEMSON	State SC	Zip Code 29631-2149						1846197 is Period	7					
	FEC ID number of contributing federal political committee.	С	78.00												
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) KA VP SIs Acct Mgmt			Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 429.00	P/R Deduction (\$39.00 Bi-Weekly)											
С.	Full Name of Individual (Last, First, Middle Initia TODD, JEFFREY, , ,	al) or Full Or	ganization Name		Date of	Re	ceipt								
	Mailing Address 467 PRAIRIE WAY SOUTH				05	/	D D D 31		y y 2021						
	City BAYPORT	State MN	Zip Code 55003-1607						31906197 is Period	7					
	FEC ID number of contributing federal political committee.	С			<u> </u>		7	. ,	50.	00					
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) nderwriting		Me	emo	Item								
	Receipt For: Primary General Other (specify)	Aggregate	P/R Deduction (\$25.00 Bi-Weekly)												
s	UBTOTAL of Receipts This Page (optional)			•			,		512.0	50					
т	OTAL This Period (last page this line number or	nly)		•			,	-							

# Use separate schedule(s)

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IТ	EMIZED RECEIPTS	Use separate schedule(s)		(checl	(check only one)								
11			for each category of the Detailed Summary Page		11a 13		1b 4	11c 15	12	Г	17		
	y information copied from such Reports and S for commercial purposes, other than using the			erson for	the	purpo	se of :	soliciting	g contri	ibutic	ons		
	NAME OF COMMITTEE (In Full)												
	UnitedHealth Group Incorporate	ed PAC (I	UnitedHealth Group PA	NC)									
Α.	Full Name of Individual (Last, First, Middle Ini SANDY, LEWIS, , ,		Organization Name	Date of Receipt									
	Mailing Address 1317 MONTVALE RIDGE DR			05 / D D / Y Y Y Y 05 31 2021							]		
	City CARY	State NC	Zip Code 27519-1015		Transaction ID : PR1600598761977 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С				-,			38	84.60	)		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Clin Advancement		Me	emo l	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R	Dedu	uction	(\$192	.30 Bi-W	/eekly)	)			
в.	Full Name of Individual (Last, First, Middle Ini PETERSON, MATTHEW, , ,	tial) or Full C	Organization Name	Da	ate of	Rece	eipt	t					
	Mailing Address 2260 FOX STREET						D D 31	/ Y	2021	Y Y	1		
	ORONO	State MN	Zip Code 55356-8316					PR16026 eceipt th		-			
	FEC ID number of contributing federal political committee.	С				- 7		- 45-	38	84.60	)		
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) O Ancillary & Ind/Sgt CAO	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Ini MALONEY, JEFFREY, , ,	tial) or Full C	Organization Name	Da	ate of	Rece	eipt						
	Mailing Address 6327 PASADENA POINT BL	/D S	Zip Code	4 6	05	/	31	L	2021	L.,	]		
	City GULFPORT	FL	33707-3867					PR1613		-			
	FEC ID number of contributing federal political committee.	С				9		,	19	92.30	)		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		Me	emo I	tem						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1057.65	P/R Deduction (\$96.15 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)		•••••					9	96	61.50			
Т	OTAL This Period (last page this line number	only)		Γ						-	Ū		

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	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17								
Any information copied from such Reports and or for commercial purposes, other than using	d Statements mather the name and a	ay not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	4C)								
Full Name of Individual (Last, First, Middle EMERSON, PAUL, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 18855 MEADOW VIEW BL	VD		05 / D D / Y Y Y Y 05 / 31 / 2021								
City PRIOR LAKE	State MN	Zip Code 55372-3133	Transaction ID : PR1806750361977 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) Optum360 Services Inc		upation (for Individual) Unit CEO	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. ANDERSON, CATHERINE, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 57 SIMMONS LANE			05 / D D / Y Y Y Y Y 2021								
City SEVERNA PARK	State MD	Zip Code 21146-1921	Transaction ID : PR1903550761977 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 Strat Initiv	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle SANTELLI, JOHN, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 25510 BIRCH BLUFF ROA	1	7.0.4	05 / D D / Y Y Y Y 2021								
City EXCELSIOR	State MN	Zip Code 55331-8520	Transaction ID : PR1903622061977           Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 2 CIO	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			1153.80								
TOTAL This Period (last page this line numb	er only)										

# Use separate schedule(s)

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		Use separate schedule(s)	(check o	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a		11b	11c	12					
Any information copied from such Reports and												
or for commercial purposes, other than using t	ne name and a	aaress of any political committee	e to solicit o	contril	outions f	rom such	n committe	96.				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle A. STEERUP, LORI, , ,	nitial) or Full C	rganization Name	Date	of Re	eceipt							
Mailing Address 7019 DONLEA LANE				05 31 2021								
City EDEN PRAIRIE	State MN	Zip Code 55346-3164				PR19036 Receipt th	<b>52866197</b> is Period	7				
FEC ID number of contributing federal political committee.	С						76.9	92				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Human Capital Partner		Mem	o Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 423.06	P/R D	educt	ion (\$38.	.46 Bi-We	ekly)					
Full Name of Individual (Last, First, Middle WEYMOUTH, PAUL, , ,	nitial) or Full C	rganization Name	Date	of Re	eceipt							
Mailing Address 317 WRIGHTS MILL RD			05		31	) / Y	y y 2021	Y				
City COVENTRY	State CT	Zip Code 06238-1559						7				
FEC ID number of contributing federal political committee.	С	Occupation (for Individual) Bus Seg CIO			384.60							
Name of Employer (for Individual) Optum Services, Inc					o Item							
Receipt For:	1	Year-to-Date ▼										
Other (specify) ▼		2115.30	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle DUPERRE, BRIAN, , ,	nitial) or Full C	rganization Name	Date	of Re	eceipt		903636961977 ipt this Period 384.60 Bi-Weekly) Y 2021 1910417361977 ipt this Period 76.92					
Mailing Address 100 LONG HILL DRIVE	State	Zin Code	05	5	31		2021					
City SOMERS	CT	Zip Code 06071-1272						1				
FEC ID number of contributing federal political committee.	С		Ē		y			92				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) uty Gen Counsel		Mem	o Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional).		•			,	. ,	538.4	4				
TOTAL This Period (last page this line number	er only)				-	1.40						

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

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

FOR LINE NUMBER:

(check only one)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗     11a     11b     11c     12       13     14     15     16     17									
Any information copied from such Reports and s or for commercial purposes, other than using the			erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (	UnitedHealth Group PA	.C)									
Full Name of Individual (Last, First, Middle In GILDERNICK, AMY, , ,	iitial) or Full C	Organization Name	Date of Receipt									
Mailing Address 2709 WILLIAMS GRANT			05 / D D / Y Y Y Y Y 2021									
City DE PERE	State WI	Zip Code	Transaction ID : PR2119475261977									
		54115-9456	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		40.00									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item									
Receipt For:	Aggregate	Year-to-Date V										
Primary General Other (specify) ▼		220.00	P/R Deduction (\$20.00 Bi-Weekly)									
Full Name of Individual (Last, First, Middle In B. KANNE, KATHLEEN, , ,	itial) or Full C	Organization Name	Date of Receipt									
Mailing Address 4826 PALOMINO COURT												
City ERIE	State PA	Zip Code	Transaction ID : PR2119479661977									
		16506-6624	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) Optum Services, Inc		1 ( )	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle In C. MACE-MEADOR, HEATHER, , ,	iitial) or Full C	P/R Deduction (\$192.30 Bi-W Organization Name Date of Receipt	Date of Receipt									
Mailing Address 13531 CARLTON OAKS												
City	State	Zip Code	Transaction ID : PR2119482561977									
SAN ANTONIO	TX	78232-4902	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		40.00									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Memo Item									
Receipt For:	· · · ·											
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 220.00	P/R Deduction (\$20.00 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			464.60									
TOTAL This Period (last page this line number												

## SCHEDULE A (FEC Form 3X) DEOFIDTO

# Use separate schedule(s)

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17							
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorporation	ted PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle In NYGARD, KEITH, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 8056 CARPENTER CREEK	AVENUE		05 31 2021							
City LAS VEGAS	State NV	Zip Code 89113-3685	Transaction ID : PR2119485061977 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		40.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Reg Adhr	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 220.00	P/R Deduction (\$20.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle In VANASTEN, SUSAN, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address N2249 NICOLE COURT			05 / D D / Y Y Y Y Y 05 31 2021							
City	State	Zip Code	Transaction ID : PR2119492661977							
KAUKAUNA	WI	54130-9462	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		80.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Telesls Dir	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 440.00	P/R Deduction (\$40.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle In C. WRIGHT, GREGORY, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 10471 STRAND TERRACE			05 / 05 / 2021							
City SANTA ANA	State CA	Zip Code 92705-1495	Transaction ID : PR2119494161977 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			504.60							
TOTAL This Period (last page this line numbe	r only)									

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IТ				e separate schedule(s)	(cł	neck on	ly oi	ne)						
11				each category of the tailed Summary Page		<b>×</b> 11a 13		11b 14	11c		2	17		
	y information copied from such Reports and Sta for commercial purposes, other than using the					for the		pose of	soliciting	g cont	ributic	ons		
	NAME OF COMMITTEE (In Full)			5.1										
$\rangle$	UnitedHealth Group Incorporated	d PAC (l	Jnite	edHealth Group PA	(C)									
Α.	Full Name of Individual (Last, First, Middle Initia HULTGREN, BROR, , ,	al) or Full C	rganiz	ation Name	Date of Receipt									
	Mailing Address 408 22ND ST					05 / D / Y Y Y Y 2021								
	City GOLDEN	State CO	Z	ip Code 80401-2452	_	Transaction ID : PR2133133261977           Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С								3	384.60	)		
	Name of Employer (for Individual) United HealthCare Services Inc		upatio In CEC	n (for Individual) D		M	lemo	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	o-Date ▼ 2115.30		P/R Dec	lucti	on (\$19:	2.30 Bi-V	Veekly	/)				
B.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name PUTNAM, T JEFFREY, , ,						f Re	eceipt						
	Mailing Address 303 ELMWOOD PLACE WEST			'in Codo		05	/	31	) / Y	202	ү ү 1			
	City MINNEAPOLIS	State MN	2	ïp Code 55419-1349					PR2133		-			
	FEC ID number of contributing federal political committee.	С		Amoun			leceipt th		1100 384.60	)				
	Name of Employer (for Individual) United HealthCare Services Inc		•	n (for Individual) o CFO	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-	o-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initia	al) or Full C	rganiz	ation Name		Date o	f Re	eceipt						
	Mailing Address 400 SOUTH STEELE ST UNIT					<sup>M</sup> 05		31	JL	202	1			
	City DENVER	State CO		ip Code 80209-3536	_			-	PR2145 Receipt th					
	FEC ID number of contributing federal political committee.	С				Ē		<b>y</b>	, ,	2	230.76	5		
	Name of Employer (for Individual) United HealthCare Services Inc		upatio Plan (	n (for Individual) CEO		N	lemo	o Item						
	Receipt For: Primary General Other (specify)	Aggregate	ggregate Year-to-Date ▼ 1269.18					P/R Deduction (\$115.38 Bi-Weekly)						
$\vdash$	UBTOTAL of Receipts This Page (optional)				_			, . , .	· · ·	ç	999.96			

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171			Use separate schedule(s)	(check only one)									
			for each category of the Detailed Summary Page	✗ 11a         11b         11c         12           13         14         15         16         17									
	y information copied from such Reports and Stat for commercial purposes, other than using the n			rson for the purpose of soliciting contributions									
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)									
Α.	Full Name of Individual (Last, First, Middle Initial RUMMEL, LEAH, , ,	l) or Full Or	rganization Name	Date of Receipt									
	Mailing Address 12100 TRAUTWEIN ROAD			M M / D D / Y Y Y Y 05 31 2021									
	City AUSTIN	State TX	Zip Code 78737-9358	Transaction ID : PR2145729561977 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		76.92									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initial SMITH, DANNETTE, , ,	Date of Receipt											
	Mailing Address 4200 ALDEN DRIVE	1 -		05 / <u>31</u> / <u>Y Y Y Y</u> 2021									
	City EDINA	State MN	Zip Code 55416-5010	Transaction ID : PR2145729961977 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		384.60									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Deputy Gen Counsel	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)									
С.	Full Name of Individual (Last, First, Middle Initial LEWIS, KURT, , ,	l) or Full Or	rganization Name	Date of Receipt									
	Mailing Address 961 RIVER FOREST DRIVE	Otota	The Oaste	05 / D D / Y Y Y Y 05 31 2021									
	City MAINEVILLE	State OH	Zip Code 45039-7720	Transaction ID : PR2203967561977           Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) United HealthCare Services Inc			upation (for Individual) Plan CEO	Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)		•	846.12									
т	OTAL This Period (last page this line number on	ly)	•										

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17								
			person for the purpose of soliciting contributions be to solicit contributions from such committee.								
UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middl BEAULE, JEAN-FRANCOIS, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 7 STRATFORD RD			05 31 2021								
City FARMINGTON	State CT	Zip Code 06032-1444	Transaction ID : PR2225813661977 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		230.76								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) PHIth Advancement	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1269.18	P/R Deduction (\$115.38 Bi-Weekly)								
Full Name of Individual (Last, First, Middl B. MCGUIRE, MICHAEL, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 437 DRURY LANE			05 / D D / Y Y Y Y 2021								
City WYCKOFF	State NJ	Zip Code 07481-2204	Transaction ID : PR2225818861977 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		192.30								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) I Plan CEO	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1057.65	P/R Deduction (\$96.15 Bi-Weekly)								
Full Name of Individual (Last, First, Middl C. RYAN, JOHN, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 45 WESTMORELAND LN			M M / D D / Y Y Y Y 05 / 31 2021								
City NAPERVILLE	State IL	Zip Code 60540-5817	Transaction ID : PR2225819661977 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) sion CEO	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optiona	l)		807.66								
TOTAL This Period (last page this line num	ber only)										

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		Use separate schedule(s)	(checl	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X	H	_	11b	11c	12				
Any information copied from such Reports and			erson for		ourpo							
or for commercial purposes, other than using t	ne name and a	adress of any political committee	e to solic	it cont	ribut	tions fr	rom such	1 committ	ee.			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)									
Full Name of Individual (Last, First, Middle I A. CARCIONE, JOSEPH, , ,	nitial) or Full C	rganization Name	Date of Receipt									
Mailing Address 11 CARRIAGE WAY			05 31 2021									
City WHITE PLAINS	State NY	Zip Code 10605-5424		Transaction ID : PR2247626861977 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С				-,			115.4	40			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Dir/CMO		Me	mo l	ltem						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 634.70	P/R	Dedu	ction	า (\$57.7	70 Bi-We	ekly)				
Full Name of Individual (Last, First, Middle I KANTOLA, KEVIN, , ,	nitial) or Full C	rganization Name	Da	te of	Rece	eipt						
Mailing Address 7031 HALSTEAD DRIVE			IV	05 <sup>™</sup>	/	D D 31	/ Y	2021	Y			
City MINNETRISTA	State MN	Zip Code 55364-3201						<b>2706197</b> is Period	7			
FEC ID number of contributing federal political committee.	C	C Occupation (for Individual) VP IT			384.60							
Name of Employer (for Individual) Optum Services, Inc					mo l	ltem						
Receipt For:	Aggregate	Year-to-Date <b>V</b>										
Other (specify) ▼		2115.30	P/R	Dedu	ction	n (\$192	2.30 Bi-W	(eekly)				
Full Name of Individual (Last, First, Middle I C. O'BRIEN, DENNIS, , ,	nitial) or Full C	rganization Name	Da	te of	Rece	eipt						
Mailing Address 61 LOUGHLIN AVE				05 <sup>M</sup>	/	D D 31	JЦ	y y 2021				
City COS COB	State CT	Zip Code 06807-2621						52736197 is Period	7			
FEC ID number of contributing federal political committee.	С			_	,			384.0	60			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n CEO	P/R Deduction (\$192.30 Bi-Weekly)									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30										
SUBTOTAL of Receipts This Page (optional)					,		9	884.6	60			
TOTAL This Period (last page this line number	er only)						1.45					

### SCHEDULE A (FEC Form 3X) DEOFIDTO

FOR LINE NUMBER:

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		Use separate schedule(s)			(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a	a	11b	11c	12	<b>_</b>			
Any information copied from such Reports and or for commercial purposes, other than using the											
NAME OF COMMITTEE (In Full)				551111	~~~~						
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle I GARODIA, SANJAY, , ,	nitial) or Full C	rganization Name	Date	of R	eceipt						
Mailing Address 110 COVINGTON COURT			м 0		31	D / Y	ү ү 2021	Y			
City OAK BROOK	State IL	Zip Code 60523-2574					62786197 iis Period	7			
FEC ID number of contributing federal political committee.	С						76.9	92			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Unit COO		Mem	o Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R D	educt	ion (\$38	.46 Bi-We	eekly)				
Full Name of Individual (Last, First, Middle I PRINCE, JOHN, , ,					eceipt						
Mailing Address 546 HARRINGTON ROAD				05 / Y Y Y Y 2021							
City WAYZATA	State MN	Zip Code 55391-1550					7 <b>3846197</b> iis Period	7			
FEC ID number of contributing federal political committee.	С			384.60							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Grp Pres & COO		Mem	o Item						
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify) ▼		2115.30	P/R D	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I CRONN, CHRISTOPHER, , ,	,	rganization Name	Date	of R	eceipt						
Mailing Address 1122 COLORADO STREET SUITE 2399 City	- State	Zip Code		5	31		2021 52296197				
AUSTIN	TX	78701-2132					is Period				
FEC ID number of contributing federal political committee.	С		Ē		<b>y</b>	. ,	115.:	38			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) t Affs Dir		Mem	o Item						
Receipt For: Primary General Other (specify)	Year-to-Date 634.59	P/R D	)educ	tion (\$57	7.69 Bi-We	eekly)					
SUBTOTAL of Receipts This Page (optional)					, ,	,	576.9	90			
TOTAL This Period (last page this line numbe	er only)										

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

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

FOR LINE NUMBER:

(check only one)

PAGE 23 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12 13 14 15 16 17						
or for commercial purposes, other than using			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	.C)						
Full Name of Individual (Last, First, Middle <b>A.</b> KEPLEY CARRIER, ANGELA, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 3219 PENINSULA DRIVE			05 / D D / Y Y Y Y 2021						
City JAMESTOWN	State NC	Zip Code 27282-8717	Transaction ID : PR2402317761977						
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 220.00	P/R Deduction (\$20.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle MCGRATH, STACY, , ,									
Mailing Address 5801 CHOWEN AVE S			05 31 2021						
City EDINA	State MN	Zip Code 55410-2759	Transaction ID : PR2402318561977           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		40.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 220.00	P/R Deduction (\$20.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. HIGA, JOY, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 2208 ELM AVENUE			05 / D D / Y Y Y Y 05 31 2021						
	State CA	Zip Code 90266-2809	Transaction ID : PR2402446261977						
	UA	90206-2009	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef Compl Off & SVP Reg Affs	Memo Item						
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)		•	464.60						
TOTAL This Period (last page this line numb	per only)								

FOR LINE NUMBER:

PAGE 24 OF

	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17							
			person for the purpose of soliciting contributions ee to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle A. ALEXANDER, CORY, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 4203 BRADLEY LANE			05 31 2021							
City	State	Zip Code	Transaction ID : PR2405428861977							
CHEVY CHASE	MD	20815-5234	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		384.60							
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item							
United HealthCare Services Inc		P Corp Affairs								
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General			P/R Deduction (\$192.30 Bi-Weekly)							
Other (specify) <b>v</b>		2115.30								
Full Name of Individual (Last, First, Middle B. WEE, KATHLYN, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 2225 46TH ST NW			05 31 2021							
City	State	Zip Code	Transaction ID : PR2408545061977							
WASHINGTON	DC	20007-1032	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Primary     General       Other (specify) ▼		1538.40	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. BALTHAZOR, PAUL, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 2002 SUGARWOOD DRIV	Έ		05 / D D / Y Y Y Y 05 31 2021							
City	State	Zip Code	Transaction ID : PR2437120761977							
ORONO	MN	55356-9339	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item							
Optum Services, Inc	Bus	Segment COO								
Receipt For:	Aggregate	Year-to-Date 🔻								
Primary General Other (specify)		2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			1153.80							
TOTAL This Period (last page this line numb	er only)									

## SCHEDULE A (FEC Form 3X) DEOFIDTO

# Use separate schedule(s)

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17								
			erson for the purpose of soliciting contributions to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) UnitedHealth Group Inco	rporated PAC (I	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, NESS, LAURA, , ,	Middle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 10550 PINNACLE V	VAY		05 31 Y Y Y Y 2021								
City WOODBURY	State MN	Zip Code 55129-4282	Transaction ID : PR2437121561977           Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment COO	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, COSGRIFF, JOHN, , ,	Middle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 1875 HUNTER LAN	1		05 / D / Y Y Y Y Y 2021								
City MENDOTA HEIGHTS	State MN	Zip Code 55118-4110	Transaction ID : PR2437121661977 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Bus Dev	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, C. EDELSON, BRETT, , ,	Middle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 4600 DREXEL AVE		Zin Oode	05 / D D / Y Y Y Y 2021								
City EDINA	State MN	Zip Code 55424-1132	Transaction ID : PR2437127161977         Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (or	btional)		1153.80								
TOTAL This Period (last page this line	e number only)										

# Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12							
			13     14     15     16     17       erson for the purpose of soliciting contributions       to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle A. RAINEY, PETER, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 8850 COUNTY ROAD 26			05 31 2021							
City MINNETRISTA	State MN	Zip Code 55359-9445	Transaction ID : PR2437127561977 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Corp Controller	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. LIPPERT, ROBIN, , ,		rganization Name	Date of Receipt							
Mailing Address 6711 POINTE LAKE LUC		7. 0.4	05 / D D / Y Y Y Y 2021							
City CHANHASSEN	State MN	Zip Code 55317-8434	Transaction ID : PR2439928061977 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ef of Staff	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. HEYMAN, STEPHEN, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 5300 SHERRILL AVENUE	1		05 / D D / Y Y Y Y 05 / 31 2021							
City CHEVY CHASE	State MD	Zip Code 20815-3720	Transaction ID : PR2444265761977 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Strategy & Partnerships	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional	)		1153.80							
TOTAL This Period (last page this line num	ber only)									

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PAGE 27 OF

TEMIZED RECEIPTS		for one of a set of the	(check only one)							
		for each category of the Detailed Summary Page	<b>≭</b> 11a 11b 11c 12							
			13     14     15     16     17       person for the purpose of soliciting contributions       se to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middl ULLSPERGER, DEWAYNE, , ,	e Initial) or Full O	Date of Receipt								
Mailing Address 4440 AVONDALE			05 / Y Y Y Y 05 31 2021							
City MINNETONKA	State MN	Zip Code 55345-2754	Transaction ID : PR2444561361977							
			Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		384.60							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Actuary	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middl 3. LANGER, DONALD, , ,										
Mailing Address 5110 OAK RAMBLING D	Mailing Address 5110 OAK RAMBLING DRIVE									
City	State	Zip Code	Transaction ID : PR2445015461977							
ΚΑΤΥ	TX	77494-1971	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Primary     General       Other (specify) ▼		2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middl C. ALCOREZA, LENYS, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 675 THALIA POINT RD			05 31 2021							
City VIRGINIA BEACH	State VA	Zip Code 23452-1815	Transaction ID : PR2445016861977							
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Sales	Memo Item							
Receipt For: Primary General Other (specify)	I	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)							

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IT.			Use separate schedule(s)			(check only one)									
ITEMIZED RECEIPTS			for each category of the Detailed Summary Page				11b 14	11c	12	17					
	y information copied from such Reports and St for commercial purposes, other than using the						pose of	soliciting	g contrib	utions					
	NAME OF COMMITTEE (In Full)														
$\rangle$	UnitedHealth Group Incorporate	d PAC (l	UnitedHealth Group PA	AC)											
A.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name RENFRO, LARRY, , ,					Date of Receipt									
	Mailing Address 8656 BLUE FLAG WAY		Zip Code		05 / 05 / Y Y Y Y 05 / 31 / 2021										
	City NAPLES	State FL	_			-	PR2460								
	FEC ID number of contributing federal political committee.	С			<u> </u>				384	.60					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) e Chairman UHG		M	emo	tem								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	]	P/R Ded	ucti	on (\$19)	2.30 Bi-V	Veekly)						
в.	Full Name of Individual (Last, First, Middle Initi KNARR, KEVIN, , ,	al) or Full C	Organization Name		Date of	Re	eceipt								
	Mailing Address 4806 HUTCHINS PLACE NW				м м 05	/	31	/ Y	2021	Y					
	City WASHINGTON	State DC	Zip Code 20007-1528	Transaction ID : PR2484542 Amount of Each Receipt this											
	FEC ID number of contributing federal political committee.	С			384.60										
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) SVP UnitedHIth Grp			Memo Item										
	Receipt For:	Aggregate		-											
	Other (specify) ▼		1538.40				P/R Deduction (\$192.30 Bi-Weekly)								
C.	Full Name of Individual (Last, First, Middle Initi TROPEANO, DANIEL, , ,	al) or Full C	Organization Name		Date of	Re	eceipt								
	Mailing Address 606 BROOKSIDE AVE	State	Zip Code		05	1	31	PR2484	2021	_					
	City WAYNE	PA	19087-4826	_			-	leceipt th							
	FEC ID number of contributing federal political committee.	С			Ľ.	_	y		192	2.30					
	Name of Employer (for Individual) United HealthCare Services Inc	Hlth	upation (for Individual) Plan CEO		M	emo	o Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1057.65	]   '	P/R Deduction (\$96.15 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			•			y.		961	.50					
т	OTAL This Period (last page this line number o	only)		•											

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171			Use separate schedule(s)	(ch	eck only	/ on	e)					
ITEMIZED RECEIPTS			for each category of the Detailed Summary Page		<b>1</b> 1a		11b	11c	12	,		
	y information copied from such Reports and S for commercial purposes, other than using the											
	NAME OF COMMITTEE (In Full)								Commu	90.		
UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC												
Α.	Full Name of Individual (Last, First, Middle Ini MANDERFELD, THOMAS, , ,	rganization Name		Date of	Ree	ceipt						
	Mailing Address 3760 WEST CALHOUN PARI	<way< td=""><td></td><td></td><td><sup>M</sup> 05</td><td>/</td><td>D D D 31</td><td>/ Y</td><td>2021</td><td>Y</td></way<>			<sup>M</sup> 05	/	D D D 31	/ Y	2021	Y		
	City MINNEAPOLIS	State MN	Zip Code 55410-1118						<b>9796197</b> is Period	7		
	FEC ID number of contributing federal political committee.	С			<u> </u>		<b>,</b> ,		384.6	50		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Investor Relations		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30		P/R Ded	uctic	on (\$192	.30 Bi-W	eekly)			
в.	Full Name of Individual (Last, First, Middle Ini MCMAHON, DIRK, , ,	itial) or Full O	rganization Name		Date of	Ree	ceipt					
	Mailing Address 60 WILDHURST ROAD			05 / D D / Y Y Y Y 2021								
	City EXCELSIOR	State MN	Zip Code 55331-8461						57061977	7		
	FEC ID number of contributing federal political committee.	C	3331-0401		Amount of Each Receipt this Period 384.60							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) sident UHG & COO	_	Memo Item							
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Ini SMITH, KARA, , ,	itial) or Full O	rganization Name		Date of	Ree	ceipt					
	Mailing Address 3917 TERRY PLACE				<sup>M</sup> 05	/	D D D 31	/ Y	2021	Y		
	City ALEXANDRIA	State VA	Zip Code 22304-1737						7536197 is Period	7		
	FEC ID number of contributing federal political committee.	С			<u> </u>	_	,	, <u>,</u>	384.6	60		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs		Me	emo	ltem					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	]	P/R Deduction (\$192.30 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)			•			, .	. ,	1153.8	0		
Т	OTAL This Period (last page this line number	only)		•			- -	1 415				

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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			for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17								
An or	y information copied from such Reports and State for commercial purposes, other than using the nar	ments may me and ad	y not be sold or used by any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.								
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (U	InitedHealth Group PA	AC)								
Α.	Full Name of Individual (Last, First, Middle Initial) PURDY, PATRICIA, , ,	or Full Or	ganization Name	Date of Receipt								
	Mailing Address 3615 THORNAPPLE STREET			05 / D D / Y Y Y Y 05 2021								
	City CHEVY CHASE	State MD	Zip Code 20815-4113	Transaction ID : PR2541300661977								
		C		Amount of Each Receipt this Period 384.60								
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) External Affairs	Memo Item								
	Receipt For:       A         Primary       General         Other (specify) ▼	ggregate \	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Initial) RAMSAY, RICHARD, , ,	or Full Or	ganization Name	Date of Receipt								
	Mailing Address 543 E LURAY AVE			05 31 2021								
	City ALEXANDRIA	State VA	Zip Code 22301-1605	Transaction ID : PR2542542261977           Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		100.00								
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Regl Affs	Memo Item								
	Receipt For:       A         Primary       General         Other (specify) ▼	ggregate \	Year-to-Date ▼ 550.00	P/R Deduction (\$50.00 Bi-Weekly)								
c.	Full Name of Individual (Last, First, Middle Initial) YAU, ANNE, , ,	or Full Or	ganization Name	Date of Receipt								
	Mailing Address 9905 WOODLAND DRIVE			05 / D / Y Y Y Y 2021								
	City SILVER SPRING	State MD	Zip Code 20902-4047	Transaction ID : PR2543582561977								
		C	20302-4047	Amount of Each Receipt this Period 384.60								
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item								
	United HealthCare Services Inc	VP E	xternal Affs									
	Receipt For:     A       Primary     General       Other (specify)	ggregate \	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)			869.20								
т	OTAL This Period (last page this line number only	)	•									

## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b		11c	12	17				
	y information copied from such Reports and State for commercial purposes, other than using the na				or the		pose		oliciting	contribu	tions				
$\Big\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	UnitedHealth Group PA	C)											
Α.	Full Name of Individual (Last, First, Middle Initial) DAVENPORT, ALLISON, , ,	or Full O	Drganization Name	C	Date of Receipt										
	Mailing Address 141 PELHAM ROAD				05 / D D / Y Y Y Y 05 31 2021										
		State PA	Zip Code	Transaction ID : PR2552313661977											
	PHILADELPHIA	FA	19119-2661	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С			384.60										
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) Gen Mgmt		Memo Item										
	Peopint For:		Year-to-Date ▼												
	Primary General Other (specify) ▼		2115.30	P/	R Ded	uctio	on (\$	192.3	30 Bi-W	/eekly)					
В.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name BRYANT, JEREMY, , ,						Date of Receipt								
	Mailing Address 4534 MYSTIQUE WAY				05 / 0 D / Y Y Y Y 2021										
	City	State	Zip Code		Trans	acti	ion II	D : Pl	R25529	6136197	7				
	ROSWELL	GA	30075-2087	A	mount	of	Each	n Red	ceipt th	is Period					
	FEC ID number of contributing federal political committee.				-		-9	76.	92						
	Name of Employer (for Individual) United HealthCare Services Inc	Pccupation (for Individual) Memo Item													
	Receipt For:     A       Primary     General       Other (specify) ▼	Primary General P/R Deduction (\$38.46 Bi-Weekly)													
С.	Full Name of Individual (Last, First, Middle Initial) COLEMAN, MICHAEL, , ,	or Full O	Drganization Name		Date of	Re	ceipt	t							
	Mailing Address 842 NAGLE STREET				<sup>M</sup> 05	/		31	/ Y	y y 2021	Y				
	City	State	Zip Code		Trans	acti	ion I	D : P	R25529	96146197	7				
	HOUSTON	ТХ	77003-1266	A	mount	of	Each	n Red	ceipt th	is Period					
	FEC ID number of contributing federal political committee.	С					y		y	76.	92				
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) Gen Mgmt		Me	emo	lten	n							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)											
s	UBTOTAL of Receipts This Page (optional)						7		9	538.4	14				
т	OTAL This Period (last page this line number only	y)	•	Ī			-		-						

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

FOR LINE NUMBER:

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			Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS			for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         1'										
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any p address of any political committee	erson for the purpose of soliciting contributions										
$\setminus$	NAME OF COMMITTEE (In Full)													
	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group PA	AC)										
Α.	Full Name of Individual (Last, First, Middle Initi FLANNERY, SCOTT, , ,	al) or Full O	organization Name	Date of Receipt										
	Mailing Address 8508 TRELADY CT			05 31 Y Y Y Y 2021										
	City PLANO	State TX	Zip Code 75024-6827	Transaction ID : PR2552962361977 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		192.30										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) I Plan CEO	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1057.65	P/R Deduction (\$96.15 Bi-Weekly)										
в.	Full Name of Individual (Last, First, Middle Initi JAMES, GREGORY, , ,	al) or Full O	organization Name	Date of Receipt										
	Mailing Address 2323 KINGS POINT DRIVE			05 / 05 / 2021										
	City	State	Zip Code	Transaction ID : PR2552963261977										
	LARGO	FL	33774-1009	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		76.92										
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Dir	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)										
С.	Full Name of Individual (Last, First, Middle Initi KIDAMBI, NARASIMHAN, , ,	al) or Full O	organization Name	Date of Receipt										
	Mailing Address 18477 85TH AVE N	1 -		05 / D D / Y Y Y Y 2021										
	City MAPLE GROVE	State MN	Zip Code 55311-1663	Transaction ID : PR2552963861977           Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		40.00										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Bus Anlys	Memo Item										
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 220.00	P/R Deduction (\$20.00 Bi-Weekly)										
⊢	UBTOTAL of Receipts This Page (optional)			309.22										

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

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

FOR LINE NUMBER:

(check only one)

PAGE 33 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		] 11b	b	11c	12							
	y information copied from such Reports and Statemer for commercial purposes, other than using the name																
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PA						anu		5001								
/ A.	Full Name of Individual (Last, First, Middle Initial) or LOVELADY, JOHN, , ,	Full Orga	anization Name		Date of Receipt												
	Mailing Address 5378 BUENA VISTA DR				M M 05	_		31	/ Y	ү ү 2021	Y						
	City Sta FRISCO TX		Zip Code		Trans	acti	ion	ID : P	R25529	6426197	7						
	FRISCO TX		75034-2253	_ A	moun	t of	Eac	ch Re	ceipt th	is Period							
	FEC ID number of contributing federal political committee.					_	-	_	-	384.	60						
	Name of Employer (for Individual) Optum Services, Inc	· ·	ation (for Individual) us Ops		М	emo	b Ite	em									
	Receipt For:     Aggr.       Primary     General       Other (specify) ▼	egate Ye	ear-to-Date ▼ 2115.30	Ρ/	R Ded	uctio	on (S	\$192.:	30 Bi-W	′eekly)							
B.	Full Name of Individual (Last, First, Middle Initial) or PAULUS, LESLIE, , ,							Date of Receipt									
	Mailing Address 305 E TUCKEY LN		1		05 / D D / Y Y Y Y 2021												
	City Sta PHOENIX AZ		Zip Code 85012-1048							6526197 is Period	7						
	FEC ID number of contributing federal political committee.				Memo Item												
	Name of Employer (for Individual) United HealthCare Services Inc	Occupa Med D	ation (for Individual) Pir														
	Receipt For:     Aggr       Primary     General       Other (specify) ▼	egate Ye	ear-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)													
с.	Full Name of Individual (Last, First, Middle Initial) or POTTER, DONALD, , ,	Full Orga	anization Name		Date of	f Re	eceip	ot									
	Mailing Address 116 FULLER LANE				м м 05	/	D	31	/ Y	y y 2021	Y						
	City Sta WINNETKA IL	te	Zip Code							96546197	7						
			60093-4213	A	moun	t of	Eac	ch Re	ceipt th	is Period							
	FEC ID number of contributing federal political committee.						y		9	69.	22						
	Name of Employer (for Individual) United HealthCare Services Inc	1 1	ation (for Individual)		М	emc	b Ite	em									
	Pagaint For:	1	Business Development ear-to-Date ▼ 380.71	P/R Deduction (\$34.61 Bi-Weekly)													
s	UBTOTAL of Receipts This Page (optional)		<b>&gt;</b>							530.	74						
	OTAL This Period (last page this line number only)		<b>r</b>	Ì			,		7								

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17							
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle A. STREIT, BARRY, , ,	Initial) or Full C	Organization Name	Date of Receipt 05 31 2021 Transaction ID : PR2552966761977 Amount of Each Receipt this Period 384.60							
Mailing Address 5421 KELLOGG AVENUE										
City EDINA	State MN	Zip Code 55424-1604								
FEC ID number of contributing federal political committee.	C									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Telesales & Bus Dev	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle PROSKAUER, DANIEL, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 240 DERBY STREET			05 / D D / Y Y Y Y Y 2021							
City NEWTON	State MA	Zip Code 02465-1006	Transaction ID : PR2553475061977							
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Data Analytics	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.53	P/R Deduction (\$19.23 Bi-Weekly)							
Full Name of Individual (Last, First, Middle VOJTA, DENEEN, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 125 WALKER AVE S	01-1-	05 / D D / Y Y Y Y Y 2021								
City WAYZATA	State MN	Zip Code 55391-1724	Transaction ID : PR2553475561977           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 Bus Initiv Clin Aff	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			807.66							
TOTAL This Period (last page this line numb	er only)									

## SCHEDULE A (FEC Form 3X) DEOFIDTO

# Use separate schedule(s)

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12	 						
Any information copied from such Reports and										
or for commercial purposes, other than using th	he name and a	ddress of any political committee	e to solicit contributions from such committee							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ted PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle In A. REIDY, GREGORY, , ,	ull Name of Individual (Last, First, Middle Initial) or Full Organization Name REIDY, GREGORY, , ,									
Mailing Address 1005 BLAKEFIELD DRIVE	05 31 Y Y Y Y Y 05 31 2021									
City BRENTWOOD	State TN	Zip Code 37027-8479	Transaction ID : PR2554013361977 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In CEO								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle In <b>B.</b> CLUTE, DANIEL, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name CLUTE, DANIEL, , ,									
Mailing Address 7756 N 85TH STREET										
City OMAHA	State NE	Zip Code 68122-1281	Transaction ID : PR2560064461977 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		76.92							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) d Dir	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼	P/R Deduction (\$38.46 Bi-Weekly)							
Primary General Other (specify) ▼		423.06								
Full Name of Individual (Last, First, Middle In GIANCURSIO, DONALD, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name GIANCURSIO, DONALD, , ,									
Mailing Address 72 MIDNIGHT RIDGE DR			05 / D D / Y Y Y Y Y 2021							
City LAS VEGAS	State NV	Zip Code 89135-1680	Transaction ID : PR2560064961977 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) Plan CEO	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			846.12							
TOTAL This Period (last page this line numbe	r only)			П						

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PAGE 36 OF

				se separate schedule(s)	(check only one)										
111	EMIZED RECEIPTS			r each category of the etailed Summary Page	<b>X</b> 11a 11b 11c				12						
	y information copied from such Reports and Sta for commercial purposes, other than using the n														
	NAME OF COMMITTEE (In Full)														
$\Big\rangle$	UnitedHealth Group Incorporated	PAC (l	Unit	edHealth Group PA	C)										
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name KUNEMUND, GREGG, , ,						Date of	Re	ceipt							
Mailing Address 3169 NEAL COURT								05 31 Y Y Y Y 2021							
	City CUMMING	State GA	4	Zip Code 30041-6111		Transaction ID : PR2560065361977 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С				384.60									
	Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) Hth Plan CEO regate Year-to-Date ▼ 2115.30				P/R Deduction (\$192.30 Bi-Weekly)								
	Receipt For: Primary General Other (specify) ▼	Aggregate													
	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name LIPPMAN, SHELDON, , ,						Re	ceipt							
	Mailing Address 55 CLIFFIELD ROAD						/	D D 31	/ Y	y y 2021	Y				
	City BEDFORD	State NY		Zip Code 10506-1210	Transaction ID : PR2560 Amount of Each Receipt t										
	FEC ID number of contributing federal political committee.	С			· · · · · · · ·						4.00				
	Name of Employer (for Individual) United HealthCare Services Inc	cupatio d Dir	on (for Individual)		Me	emo	Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1067.00			P/R Deduction (\$97.00 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initia LOBERG, ANGELA, , ,	l) or Full O	Drganiz	zation Name		Date of	Re	ceipt							
	Mailing Address 2837 EAST PARK PLACE						05 / D D / Y Y Y Y 2021								
	City MILWAUKEE	State WI	4	Zip Code 53211-3845					PR2560 eceipt th						
	FEC ID number of contributing federal political committee.				<u> </u>	_	y	. ,	7	6.92					
	Name of Employer (for Individual) United HealthCare Services Inc	•	on (for Individual) 9 SIs Acct Mgt		Me	emo	Item								
	Receipt For: Primary General Other (specify)	Aggregate	Aggregate Year-to-Date ▼ 423.06				P/R Deduction (\$38.46 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)			•				9		65	5.52				
т	OTAL This Period (last page this line number or	ıly)		•••••							-				

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			for each category of the Detailed Summary Page	×	11a 13		11b	11c	12	<b></b>	17	
	y information copied from such Reports and Sta for commercial purposes, other than using the				for the	purp	ose of		contrib		17	
	NAME OF COMMITTEE (In Full)											
$\rangle$	UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	AC)								
Α.	Full Name of Individual (Last, First, Middle Initia MILICH, DAVID, , ,	al) or Full O	rganization Name		Date of Receipt							
	Mailing Address 2702 BIRCHMERE COURT				05 31 2021							
	City KATY	State TX	Zip Code 77450-1303		Transaction ID : PR2560066061977 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С					-		384	4.60		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Me	emo	ltem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30		P/R Ded	uctio	n (\$192	2.30 Bi-W	/eekly)			
в.	Full Name of Individual (Last, First, Middle Initia BURDICK, STEVEN, , ,	al) or Full O	rganization Name		Date of	Rec	eipt					
	Mailing Address 28961 SOMERS DRIVE				<sup>M</sup> 05	1	D D 31	/ Y	2021	Y		
	City NAPLES	State FL	Zip Code 34119-0915	-				PR25603				
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period								
	Name of Employer (for Individual) United HealthCare Services Inc	Occu RVF		Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P	P/R Deduction (\$38.46 Bi-Weekly)							
С.	Full Name of Individual (Last, First, Middle Initia NOEL, TIMOTHY, , ,	al) or Full O	rganization Name		Date of	Rec	eipt					
	Mailing Address 4316 FREMONT AVENUE SOL	JTH			<sup>M</sup> 05	/	D D D 31	/ Y	2021	Y		
	City MINNEAPOLIS	State MN	Zip Code 55409-1721					PR2560: eceipt th				
	FEC ID number of contributing federal political committee.	С					,	. y	384	4.60		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CEO		Memo Item							
Receipt For:     Aggr       Primary     General       Other (specify)			Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)			•			, .	9	846	6.12		
т	OTAL This Period (last page this line number o	nly)		•			_					

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		Use separate schedule(s)	(ch	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12	<u> </u>		
Any information copied from such Reports and or for commercial purposes, other than using the											
NAME OF COMMITTEE (In Full)			- 10 30					Commu			
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle I LUND, BRIAN, , ,	nitial) or Full C	organization Name		Date of	Re	ceipt					
Mailing Address 11471 NORTH SHORE DRI	VE			05 / D D / Y Y Y Y 2021							
City GRANTSBURG	State WI	Zip Code 54840-8059		Transaction ID : PR2561457661977 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С					7		78.	00		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Tax		Me	emo	Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 429.00	] F	P/R Dedu	uctio	on (\$39.	.00 Bi-We	eekly)			
Full Name of Individual (Last, First, Middle I B. WILLSON, JOSH, , ,											
Mailing Address 201 ADAMS CT		Zip Code		05 / 31 / 2021 Transaction ID : PR2564802561977							
City COLLEYVILLE	State TX							7			
FEC ID number of contributing federal political committee.	C	76034-6811		Amount of Each Receipt this Period							
Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) RVP SLS SB and Spec Ben				Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I C. CARLSON, CHRISTOPHER, , ,	nitial) or Full C	organization Name		Date of	Re	ceipt					
Mailing Address 10618 WEST RIVER ROAD				05 <sup>M</sup>	/	31	) / Y	y 2021	Ŷ		
City BROOKLYN PARK	State MN	Zip Code 55443-1233						80266197 his Period	7		
FEC ID number of contributing federal political committee.	С			<u> </u>		y .		192.:	30		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Innovation		Me	emo	Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1057.65	P/R Deduction (\$96.15 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			•			,	. ,	347.2	22		
TOTAL This Period (last page this line numbe	r only)		•								

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<b>MIZED RECEIPTS</b> Information copied from such Reports and St commercial purposes, other than using the ME OF COMMITTEE (In Full) <b>nitedHealth Group Incorporate</b> II Name of Individual (Last, First, Middle Initi IANSEN, PAUL, , , ailing Address 18430 62ND PLACE NORTH	name and ad	Idress of any political committee	X       11a       11b       11c       12         13       14       15       16       17         erson for the purpose of soliciting contributions to solicit contributions from such committee.       AC)							
commercial purposes, other than using the ME OF COMMITTEE (In Full) nitedHealth Group Incorporate	name and ad	Idress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.							
nitedHealth Group Incorporate			NC)							
ll Name of Individual (Last, First, Middle Initi IANSEN, PAUL, , ,			NC)							
IANSEN, PAUL, , ,	al) or Full Or	nemination. Name								
ailing Address 18430 62ND PLACE NORTH		ganization Name	Date of Receipt							
			M M / D D / Y Y Y Y Y 05 31 2021							
y APLE GROVE	State MN	Zip Code 55311-4585	Transaction ID : PR2564802761977           Amount of Each Receipt this Period							
C ID number of contributing deral political committee.	С		194.00							
		pation (for Individual) Grp Controller	Memo Item							
Primary General Other (specify) ▼	Aggregate \	Year-to-Date ▼ 1067.00	P/R Deduction (\$97.00 Bi-Weekly)							
	al) or Full Or	ganization Name	Date of Receipt							
	05 / D / Y Y Y Y 2021									
			Transaction ID : PR2564803361977							
	INJ	07430-2977	Amount of Each Receipt this Period							
8	С		384.60							
		,	Memo Item							
eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
	al) or Full Or	ganization Name	Date of Receipt							
ailing Address 5004 ARDEN AVE			05 31 2021							
	State MN	Zip Code 55424-1314	Transaction ID : PR2564803461977 Amount of Each Receipt this Period							
8	С		384.60							
nited HealthCare Services Inc			Memo Item							
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
TOTAL of Receipts This Page (optional)		•	963.20							
	hited HealthCare Services Inc   accipt For:   Primary   Other (specify) ▼   II Name of Individual (Last, First, Middle Initi   IARDEN, PAUL, , , ,   ailing Address 9 VAN MULEN STREET   ty   AHWAH   CC ID number of contributing   deral political committee.   ame of Employer (for Individual)   ited HealthCare Services Inc   accipt For:   Primary   General   Other (specify) ▼   II Name of Individual (Last, First, Middle Initi   AOQUIST, DARREN, , ,   ailing Address 5004 ARDEN AVE   ty DINA CC ID number of contributing deral political committee. ame of Employer (for Individual) hited HealthCare Services Inc cecipt For: Pimary General Other (specify) TOTAL of Receipts This Page (optional)	hited HealthCare Services Inc Mkt d   acceipt For: Aggregate N   Primary General   Other (specify) ▼ Image: Services Inc   III Name of Individual (Last, First, Middle Initial) or Full Or   ARDEN, PAUL, , , ,   ailing Address 9 VAN MULEN STREET   ty State   AHWAH NJ   C   C   ame of Employer (for Individual)   ited HealthCare Services Inc   ame of Employer (for Individual)   Other (specify) ▼   III Name of Individual (Last, First, Middle Initial) or Full Or   AQQUIST, DARREN, , ,   ailing Address 5004 ARDEN AVE   ty   MN   C ID number of contributing   deral political committee.   arme of Individual (Last, First, Middle Initial) or Full Or   AOQUIST, DARREN, , ,   ailing Address 5004 ARDEN AVE   ty   DINA   C   me of Employer (for Individual)   bereipt For:   Primary   General   Other (specify)   C Image: State of Employer (for Individual) Occur Regn Occur Regn Other (specify) Image: State of Employer (for Individual) Occur Regn Other (specify) Image: State of Employer (for Individual) Occur Regn Other (specify) Image: State of Employer (for Individual) Occur Regn Other (specify) Image: State of Employer (for Individual) Occur Regn Other (specify) Image: State of Employer (for Individual) Occur Regn Image: State of Employer (for In	hited HealthCare Services Inc Mkt Grp Controller   aceipt For: Aggregate Year-to-Date ▼   Other (specify) ▼ 1067.00     II Name of Individual (Last, First, Middle Initial) or Full Organization Name   IARDEN, PAUL, , ,     ailing Address 9 VAN MULEN STREET     by   AHWAH     State   Zip Code   AHWAH     C     ame of Employer (for Individual)   ide HealthCare Services Inc     Primary   General   Other (specify) ▼     Aggregate Year-to-Date     Aggregate Year-to-Date     Aggregate Year-to-Date     Aggregate Year-to-Date     Aggregate Year-to-Date     Aggregate Year-to-Date     Y     Aggregate Year-to-Date     Aggregate Year-to-Date     Aggregate Year-to-Date     Aggregate Year-to-Date     Y     Aggregate Year-to-Date     Aggregate Year-to-Date     Aggregate Year-to-Date     Aggregate Year-to-Date     Aggregate Year-to-Date     Y     Aggregate Year-to-Date     Aggregate Year-to-Date     Y   Dill Na     C     Aggregate Year-to-Date     MN     State							

### SCHEDULE A (FEC Form 3X) - . . . . . . .

## Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12						
			13     14     15     16     17       berson for the purpose of soliciting contributions       e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incor	-								
Full Name of Individual (Last, First, M A. WICKS, TIMOTHY, , ,	liddle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3227 CASCO CIRCL POBOX 352	E		05 / 1 2021						
City WAYZATA	State MN	Zip Code 55391-9717	Transaction ID : PR2565448661977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		384.60						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, M CARTER, WILLIAM, , ,	liddle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address PO BOX 920679	1		05 / Y Y Y Y Y 2021						
City HOUSTON	State TX	Zip Code 77292-0679	Transaction ID : PR2565448761977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs Acct Mgt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, M C. KUNST, THOMAS, , ,	liddle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 4872 103RD STREE	T State	Zip Code							
City PLEASANT PRAIRIE	WI	Zip Code 53158-6516	Transaction ID : PR2566302161977           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		153.84						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 846.12	P/R Deduction (\$76.92 Bi-Weekly)						
SUBTOTAL of Receipts This Page (opt	ional)		615.36						
TOTAL This Period (last page this line	number only)								

### SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

## Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 41 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a ☐ 11b ☐ 11c ☐ 12							
An	y information copied from such Reports and Stater	mente mo	, ,	13 14 15 16 17							
	for commercial purposes, other than using the nan										
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (L	JnitedHealth Group PA	.C)							
A.	Full Name of Individual (Last, First, Middle Initial)	or Full Or	rganization Name	Date of Receipt							
	Mailing Address 5118 FAIRGLEN LANE										
		State	Zip Code	Transaction ID : PR2571777961977							
	CHEVY CHASE	MD	20815-6517	_ Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		384.60							
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Comm	Memo Item							
	Receipt For: Ad	aareaate `	Year-to-Date ▼	_							
	Primary General Other (specify) ▼	ggrogato	2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Initial)	or Full Or	rganization Name	Date of Receipt							
	Mailing Address 9501 WEXCROFT DRIVE			05 / 0 / Y Y Y Y 2021							
	City	State	Zip Code	Transaction ID : PR2571778261977							
-	BRENTWOOD	TN	37027-3824	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		154.00							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item							
	Receipt For:     Ag       Primary     General       Other (specify) ▼	ggregate	Year-to-Date ▼ , 847.00	P/R Deduction (\$77.00 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initial)	or Full Or	rganization Name	Date of Receipt							
-	Mailing Address 6890 CANTERBURY LANE			05 31 2021							
		State	Zip Code	Transaction ID : PR2571778361977							
	EDEN PRAIRIE	MN	55346-2904	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		78.00							
	Name of Employer (for Individual) Optum Services, Inc		ipation (for Individual) Sen Mgmt	Memo Item							
	Receipt For: Ad	aareaate `	Year-to-Date ▼								
	Primary General Other (specify)		429.00	P/R Deduction (\$39.00 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)			616.60							
T	OTAL This Period (last page this line number only)	)	•	· · · · · · · · · · · · · · · · · · ·							

## Use separate schedule(s)

FOR LINE NUMBER:

PAGE 42 OF

		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a         11b         11c         12           13         14         15         16         1						
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle A. HINTON, DUSTIN, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address W132N6475 MARACH RD			05 31 2021						
City MENOMONEE FALLS	State WI	Zip Code 53051-6085	Transaction ID : PR2571978761977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		444.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1669.38	P/R Deduction (\$222.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. CARLSON, KEVIN, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 4511 BROWNDALE AVEN			05 / D D / Y Y Y Y 05 31 2021						
City EDINA	State MN	Zip Code	Transaction ID : PR2572590061977						
		55424-1142	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		192.30						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For:	Aggregate	Year-to-Date 🔻	P/R Deduction (\$96.15 Bi-Weekly)						
Other (specify) ▼		1057,65							
Full Name of Individual (Last, First, Middle WIFFLER, THOMAS, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1421 SOMERFIELD DRIVE			05 / D D / Y Y Y Y 2021						
City BOLINGBROOK	State IL	Zip Code 60490-3207	Transaction ID : PR2572992761977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Unit CEO	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			1020.90						
TOTAL This Period (last page this line number	er only)								

## Use separate schedule(s)

FOR LINE NUMBER:

PAGE 43 OF

		Use separate schedule(s)	(chec	(check only one)							
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page		11a 13	111		11c	12	47	
	y information copied from such Reports and Sta for commercial purposes, other than using the r			erson fo	r the p	ourpose	e of soli		contribu		
	NAME OF COMMITTEE (In Full)										
$\rangle$	UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	AC)							
Α.	Full Name of Individual (Last, First, Middle Initia QUINN, PATRICK, , ,	al) or Full O	rganization Name	D	ate of	Receip	ot				
	Mailing Address 16933 TODD EVAN TRAIL				05 / 05 / Y Y Y Y 2021						
	City CHESTERFIELD	State MO	Zip Code 63005-4641	Transaction ID : PR2573518761977 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С				-9-		-g=-	192	.30	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Me	mo Ite	m				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1057.65	P/R Deduction (\$96.15 Bi-Weekly)							
в.	Full Name of Individual (Last, First, Middle Initia KANE, BRIAN, , ,	al) or Full O	rganization Name	D	ate of	Receip	ot				
	Mailing Address 4615 ROANOAKE ROAD	State Zin Code				/ D	31	Y	2021	Y	
	City GOLDEN VALLEY	State MN	Zip Code 55422-5254						7916197		
	FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period 384.60								
	Name of Employer (for Individual) Optum Services, Inc	Occupation (for Individual) SVP Comm			Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initia MASTERS, SCOTT, , ,	al) or Full O	rganization Name	D	ate of	Receip	ot				
	Mailing Address 1894 VILLAGE GLEN DRIVE	1			05 31 2021						
	City SAINT JOHNS	State FL	Zip Code 32259-9215						<b>796619</b> s Perioc		
	FEC ID number of contributing federal political committee.	С		ļ		y		y	77.	.00	
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP C	ipation (for Individual) Clms		Me	mo Ite	m				
Receipt For:       Aggree         Primary       General         Other (specify)			Year-to-Date ▼ 423.50	P/R Deduction (\$38.50 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)					9		,	653.	.90	
т	OTAL This Period (last page this line number or	nly)	••••••			-		-			

### SCHEDULE A (FEC Form 3X) COLIDITO

## Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17						
Any information copied from such Reports and or for commercial purposes, other than using th			person for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)		_							
ight angle UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle I A. WOHNOUTKA, CHRISTOPHER, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 17597 HIBISCUS AVE			05 31 2021						
City LAKEVILLE	State MN	Zip Code 55044-3906	Transaction ID : PR2574981961977						
		55044-5900	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
United HealthCare Services Inc	Dir	Тах							
Receipt For:	Aggregate	Year-to-Date 🔻							
Primary General		423.06	P/R Deduction (\$38.46 Bi-Weekly)						
Other (specify)		120.00	1						
Full Name of Individual (Last, First, Middle I	nitial) or Full C	rganization Name							
B. SIMPSON, TRENT, , ,			Date of Receipt						
Mailing Address 3111 NORCREST AVE N	Chatta	Zin Oode	05 / D D / Y Y Y Y 05 31 2021						
City STILLWATER	State MN	Zip Code 55082-1779	Transaction ID : PR2574985061977						
		33002-1119	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General			P/R Deduction (\$38.46 Bi-Weekly)						
Other (specify) ▼		, 423.06							
Full Name of Individual (Last, First, Middle I C. CIANFROCCO, HEATHER, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 4478 MIDDLE ROAD			05 31 2021						
City	State	Zip Code	Transaction ID : PR2574986261977						
ALLISON PARK	PA	15101-1110	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
Optum Services, Inc	Bus	Segment CEO							
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General		2115 20	P/R Deduction (\$192.30 Bi-Weekly)						
Other (specify)		2115.30	1						
SUBTOTAL of Receipts This Page (optional)			538.44						
TOTAL This Period (last page this line numbe	r only)								

## Use separate schedule(s)

FOR LINE NUMBER:

PAGE 45 OF

ITEMIZED RECEIPTS						(check only one)							
11			for each category of the Detailed Summary Page				]11b	11c	12	<u> </u>			
	y information copied from such Reports and S												
or	for commercial purposes, other than using the	name and a	ddress of any political committee	e to s	olicit co	ntrib	outions 1	from such	n committ	ee.			
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)									
Α.	Full Name of Individual (Last, First, Middle Init BURNETT, JAMIE, , ,	,	rganization Name		Date of Receipt								
	Mailing Address 4625 EWING AVENUE SOUT				05 / D / Y Y Y Y 2021								
	City MINNEAPOLIS	State MN	Zip Code 55410-1745						98826197 is Period	7			
	FEC ID number of contributing federal political committee.	С			<u> </u>		-		78.0	00			
	Name of Employer (for Individual) Optum Services, Inc	Occi VP I	upation (for Individual) T		M	emo	tem Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 429.00	]	P/R Ded	ucti	on (\$39	.00 Bi-We	ekly)				
в.	Full Name of Individual (Last, First, Middle Init LANG, HEATHER, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt						
	Mailing Address 1210 RIVER TERRACE DRIV				05	1	31	) / Y	2021	Y			
	City BLOOMINGTON	State MN	Zip Code						9146197	7			
		_	55431-4230		Amoun	t of	Each F	leceipt th	is Period	_			
	FEC ID number of contributing federal political committee.	C		76.92									
	Name of Employer (for Individual)Occupation (for Individual)United HealthCare Services IncDeputy Gen Counsel Mgr						Memo Item						
	Receipt For:	Aggregate	Year-to-Date ▼										
	Other (specify) ▼		423.06	] '	P/R Deduction (\$38.46 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Init SJOBLAD, BETHANY, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt						
	Mailing Address 10730 PERRY DRIVE NORTH	1			<sup>M</sup> 05	1	31		y y 2021	Y			
	City BROOKLYN PARK	State MN	Zip Code 55443-4700						00916197 is Period	7			
	FEC ID number of contributing federal political committee.	С			Ľ.		y		384.0	60			
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		M	emo	o Item						
	Receipt For: Primary General Other (specify)	Aggregate	P/R Deduction (\$192.30 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)						,		539.5	52			
T T	OTAL This Period (last page this line number	only)		- •									

## Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12							
			13     14     15     16     17       berson for the purpose of soliciting contributions     e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)	the name and a	duress of any pointed commute								
UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle <b>DUNCAN, MICHELE</b> , , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 3038 FAIRWAY CIRCLE			05 31 2021							
City CHASKA	State MN	Zip Code 55318-3408	Transaction ID : PR2575029661977           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Compliance	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. MADDOX, JEFFREY, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 7810 HANOVER ST			05 / 31 / 2021							
City DALLAS	State TX	Zip Code 75225-8220	Transaction ID : PR2575039561977 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) I Plan CEO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle ALLENBURG, THOMAS, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 6620 IROQUOIS TRAIL	State	Zin Oode	05 / D D / Y Y Y Y 2021							
City EDINA	MN	Zip Code 55439-1016	Transaction ID : PR2575039861977 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		76.92							
Name of Employer (for Individual) United HealthCare Services Inc	Occi VP I	upation (for Individual) Mktg	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional	)		846.12							
TOTAL This Period (last page this line num	ber only)									

FOR LINE NUMBER:

PAGE 47 OF

ITEMIZED RECEIPTS	Use separate schedule(s)	(check only one)							
I ENILED KEVEILIS		for each category of the Detailed Summary Page	✗ 11a         11b         11c         12           13         14         15         16         17						
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle I JORDAN, GARELL, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 6104 S 64TH DRIVE			05 31 2021						
City LAVEEN	State AZ	Zip Code 85339-2917	Transaction ID : PR2575050261977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		192.30						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1057.65	P/R Deduction (\$96.15 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I B. FITZPATRICK, JOSEPH, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 3936 CAMPELLO CURVE			05 31 2021						
City CHASKA	State MN	Zip Code 55318-4639	Transaction ID : PR2575053761977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) Fin	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) ▼		2115.30	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I LINDSAY, VIVIAN, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 14930 SW 39 ST		1	05 / D D / Y Y Y Y Y 2021						
City DAVIE	State FL	Zip Code 33331-2767	Transaction ID : PR2575054961977           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)	·		961.50						
TOTAL This Period (last page this line number	er only)								

FOR LINE NUMBER:

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						(check only one)						
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page				]11b	11c	12	<u> </u>		
	y information copied from such Reports and St for commercial purposes, other than using the											
	NAME OF COMMITTEE (In Full)		duress of any political committee	; 10 3				TOTT SUCI	i commu			
	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group PA	NC)								
Α.	Full Name of Individual (Last, First, Middle Init	ial) or Full O	rganization Name		Date of Receipt							
	Mailing Address 8800 RUMFIELD RD				05 / 05 / 2021							
	City NORTH RICHLAND HILLS	State TX	Zip Code 76182-6131						<b>)5946197</b> is Period	7		
	FEC ID number of contributing federal political committee.	С			<u> </u>		- <b>J</b> -	т. т.	78.0	00		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		М	emo	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 429.00		P/R Ded	lucti	on (\$39	.00 Bi-We	ekly)			
в.	Full Name of Individual (Last, First, Middle Initi ALLEN, MARK, , ,	ial) or Full O	rganization Name		Date o	f Re	eceipt					
	Mailing Address 11359 ENTREVAUX DRIVE			м м 05	1	D D D 31		2021	Y			
	City	State MN	Zip Code 55347-2862						6026197	7		
			_	Amoun	t of	Each F	leceipt th	is Period				
	FEC ID number of contributing federal political committee.	С		153.84								
	Name of Employer (for Individual) Optum Services, Inc	Occi VP	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$76.92 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initi MCEVOY, AMY, , ,	ial) or Full O	rganization Name		Date o	f Re	eceipt					
	Mailing Address 11230 CEDAR POINTE DR S	Otata	Zia Ocda		05		31		2021			
	City MINNETONKA	State MN	Zip Code 55305-2983	_					06226197 is Period	/		
	FEC ID number of contributing federal political committee.	С			Ľ.		9	. ,	40.0	00		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		M	emo	o Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 220.00	P/R Deduction (\$20.00 Bi-Weekly)								
⊢	UBTOTAL of Receipts This Page (optional)		· · · · · · · · · · · · · · · · · · ·				, , , ,	, ,	271.8	34		

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17						
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle I CURRIE, ULYSSES, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 8232 GUNNAR DRIVE			05 31 2021						
City FULTON	State MD	Zip Code 20759-2218	Transaction ID : PR2575064161977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		60.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 330.00	P/R Deduction (\$30.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I <b>B.</b> ZAETTA, CHRISTOPHER, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 5840 RIDGE ROAD			05 / D D / Y Y Y Y Y 2021						
City EXCELSIOR	State MN	Zip Code 55331-8153	Transaction ID : PR2575068361977						
	_	00001-0100	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Group Gen Counsel	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Primary     General       Other (specify) ▼		2115.30	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 9916 DUSTY WINDS AVE			05 / D D / Y Y Y Y 05 31 2021						
City LAS VEGAS	State NV	Zip Code 89117-5986	Transaction ID : PR2575068961977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ctor Technology	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			521.52						
TOTAL This Period (last page this line numbe	r only)								

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17						
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle I ISMERT, JENNY, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 8494 E HAWAII LN			05 / Y Y Y Y 2021						
City DENVER	State CO	Zip Code 80231-2732	Transaction ID : PR2575070061977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I B. CHRISTIAN, DENISE, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 5 WINGATE COURT			05 / D D / Y Y Y Y 2021						
City FLOURTOWN	State PA	Zip Code 19031-1117	Transaction ID : PR2575071461977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Clin Ops	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I C. NICHOLS, SANDRA, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 12706 YOUNG LANE			M M / D D / Y Y Y Y Y 05 31 2021						
City NORTH POTOMAC	State MD	Zip Code 20878-6112	Transaction ID : PR2575074561977           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
United HealthCare Services Inc		upation (for Individual) 2 CMO	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			846.12						
TOTAL This Period (last page this line numbe	er only)								

FOR LINE NUMBER:

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			Use separate schedule(s)	(check only one)						
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         1						
	for commercial purposes, other than using the			erson for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	JnitedHealth Group P	AC)						
A.	Full Name of Individual (Last, First, Middle Ini BAUSCH, REBECCA, , ,	tial) or Full C	rganization Name	Date of Receipt						
	Mailing Address 26 BELLAIR DRIVE			05 / D D / Y Y Y Y 2021						
	City DOBBS FERRY	State NY	Zip Code 10522-3502	Transaction ID : PR2575079361977           Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		384.60						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In Growth Off	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)						
в.	Full Name of Individual (Last, First, Middle Ini O'NEILL, AUDREY, , ,	itial) or Full C	organization Name	Date of Receipt						
	Mailing Address 71 CHESTNUT RIDGE RD	1		05 31 2021						
	City QUEENSBURY	State NY	Zip Code 12804-7317	Transaction ID : PR2575089461977 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		38.46						
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.53	P/R Deduction (\$19.23 Bi-Weekly)						
C.	Full Name of Individual (Last, First, Middle Ini HEROLD, STACI, , ,	tial) or Full C	rganization Name	Date of Receipt						
	Mailing Address 15008 GREEN OAKS TR SE	State	Zip Code	05 / 31 / 2021 Transaction ID : PR2575093061977						
	PRIOR LAKE FEC ID number of contributing	MN	55372-2159	Amount of Each Receipt this Period						
	federal political committee.	С		76.92						
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Technology	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)			499.98						
Т	OTAL This Period (last page this line number	only)								

## Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12						
			13     14     15     16     17       berson for the purpose of soliciting contributions       e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)	,	<u> </u>							
UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P/	4C)						
Full Name of Individual (Last, First, Middle A. VIESTA, RICHARD, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1 COMPASS COURT			05 31 2021						
City OYSTER BAY	State NY	Zip Code 11771-1602	Transaction ID : PR2575098561977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Actuary	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. BENARDETTE, DANIEL, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 4752 YORK AVE S			Mom         /         J         2021           Transaction ID : PR2575102861977         Amount of Each Receipt this Period						
City MINNEAPOLIS	State MN	Zip Code 55410-1868							
FEC ID number of contributing federal political committee.	С		192.30						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1057.65	P/R Deduction (\$96.15 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. CHAMPION, PHEBE, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 437 E GERMANN RD #4			05 / D D / Y Y Y Y 2021						
City SAN TAN VALLEY	State AZ	Zip Code 85140-7106	Transaction ID : PR2575108361977           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		50.00						
Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) Cust Service	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 275.00	P/R Deduction (\$25.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optiona	l)		319.22						
TOTAL This Period (last page this line num	ber only)								

#### Image# 202106189449469476

### SCHEDULE A (FEC Form 3X) COLIDITO

## Use separate schedule(s)

FOR LINE NUMBER:

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			Use	(ch	(check only one)						
11	EMIZED RECEIPTS			each category of the ailed Summary Page		<b>×</b> 11a		11b	11c	12	
	y information copied from such Reports and Sta										
or	for commercial purposes, other than using the r	name and a	address	of any political committee	to s	olicit con	tribi	utions fr	om suci	n commit	tee.
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	Unite	dHealth Group PA	C)						
A.	Full Name of Individual (Last, First, Middle Initia HAYDEN, KARI, , ,	l) or Full O	rganiza	tion Name		Date of	Re	ceipt			
	Mailing Address 6109 BANEY COURT					05	/	D D 31	/ Y	y y 2021	Y
	City MINNETONKA	State MN		o Code 55345-6301						11036197 iis Period	
	FEC ID number of contributing federal political committee.	С							- 7-	76.	92
	Name of Employer (for Individual) United HealthCare Services Inc		upation Ops	(for Individual)		Me	emo	Item			
Receipt For:       Aggregat         Primary       General         Other (specify) ▼			Year-to	-Date ▼ 423.06		P/R Dedu	uctic	on (\$38.4	46 Bi-We	eekly)	
в.	Full Name of Individual (Last, First, Middle Initia MORSCH, MARK, , ,	l) or Full O	)rganiza	ition Name		Date of	Re	ceipt			
	Mailing Address 6344 GOLDEN LILY WAY	1		05 / D D / Y Y Y Y 2021							
	City SAN DIEGO	State CA	·	o Code 02130-6836	-					<b>1516197</b> iis Period	
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) VP Gen Mgmt				76.92					
	Name of Employer (for Individual) Optum Services, Inc					Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to	o-Date ▼ 423.06		P/R Dedu	ictio	ın (\$38.4	16 Bi-W€	ekly)	
с.	Full Name of Individual (Last, First, Middle Initia DEWALL, PATRICK, , ,	l) or Full O	Organiza	tion Name		Date of	Re	ceipt			
	Mailing Address 7662 RIDGEVIEW WAY					05	/	D D 31	/ Y	2021	Y
	City CHANHASSEN	State MN		o Code 5317-4507				-		14536197 his Period	
	FEC ID number of contributing federal political committee.	С				<u> </u>		<b>,</b>		192.	30
	Name of Employer (for Individual) Optum Services, Inc		•	(for Individual) n Counsel Mgr		Memo Item					
Receipt For:       Aggregate         Primary       General         Other (specify)			Year-to	D-Date ▼ 1057.65		P/R Dedu	uctio	on (\$96. <sup>∙</sup>	15 Bi-We	eekly)	
s	UBTOTAL of Receipts This Page (optional)			•••••				,		346.	14
т	OTAL This Period (last page this line number or	ıly)		•••••		<u> </u>		,	-		

FOR LINE NUMBER:

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			Use separate schedule(s)	(check only one)						
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17						
	y information copied from such Reports and S for commercial purposes, other than using the			person for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full)									
$\rangle$	UnitedHealth Group Incorporate	ed PAC (I	UnitedHealth Group P	AC)						
Α.	Full Name of Individual (Last, First, Middle Init PETERSOHN, PATRICK, , ,	ial) or Full C	Drganization Name	Date of Receipt						
	Mailing Address 16413 BIRCH STREET			05 / D D / Y Y Y Y 05 31 2021						
	City OVERLAND PARK	State KS	Zip Code 66085-7842	Transaction ID : PR2575148361977           Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		384.60						
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Reg VP of SIs	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)						
в.	Full Name of Individual (Last, First, Middle Init PELNER, DAVID, , ,	ial) or Full C	Drganization Name	Date of Receipt						
	Mailing Address 1200 WEST MINNEHAHA PAI			05 / D D / Y Y Y Y Y 2021						
	City	State MN	Zip Code	Transaction ID : PR2575155961977						
	MINNEAPOLIS FEC ID number of contributing federal political committee.	C	55419-1163	Amount of Each Receipt this Period 38.46						
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Real Estate Svs	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.53	P/R Deduction (\$19.23 Bi-Weekly)						
<u>с</u> .	Full Name of Individual (Last, First, Middle Init THOMAS, DIANE, , ,	ial) or Full C	Drganization Name	Date of Receipt						
	Mailing Address 2701 KING JAMES AVE			05 / 0 0 / 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0						
	City SAINT CHARLES	State IL	Zip Code 60174-7827	Transaction ID : PR2575156461977           Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		153.84						
	United HealthCare Services Inc		cupation (for Individual) Pres	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 846.12	P/R Deduction (\$76.92 Bi-Weekly)						
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number of			576.90						

### SCHEDULE A (FEC Form 3X) DEAEIDTA

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17						
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions						
UnitedHealth Group Incorporation	ted PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle In HAMANN, CHAD, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 7638 RIDGEVIEW WAY			05 / Y Y Y Y 2021						
City CHANHASSEN	State MN	Zip Code 55317-4507	Transaction ID : PR2575170161977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) Tax	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle II B. REICHLING, KRISTIN, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 6516 TINGDALE AVENUE			05 / 10 / Y Y Y Y Y 05 31 2021						
City EDINA	State MN	Zip Code 55439-1440	Transaction ID : PR2575186861977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Human Capital	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle In C. DEMARIS, PETER, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 2301 OLIVER AVE S	I		05 / D D / Y Y Y Y 05 / 31 / 2021						
City MINNEAPOLIS	State MN	Zip Code 55405-2448	Transaction ID : PR2575191861977           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Nktg eComm	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			1153.80						
TOTAL This Period (last page this line numbe	r only)								

## Use separate schedule(s)

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12 12 14 15 16 17							
Any information copied from such Reports ar or for commercial purposes, other than using	d Statements ma the name and a	l ay not be sold or used by any p address of any political committe	13     14     15     16     17       person for the purpose of soliciting contributions       te to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpor	ated PAC (I	UnitedHealth Group P	4C)							
Full Name of Individual (Last, First, Middle CHAN, DERRICK, , ,	e Initial) or Full C	Organization Name	Date of Receipt							
Mailing Address 1773 CANYON OAKS LN			05 31 2021							
City LAKE FOREST	State CA	Zip Code 92610-3016	Transaction ID : PR2575200561977 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		115.38							
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) Fin	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 634.59	P/R Deduction (\$57.69 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. CONDON, CRAIG, , ,	Initial) or Full C	Organization Name	Date of Receipt							
Mailing Address 268 OAK LANDING WAY			05 31 Y Y Y Y 05 31							
City SEVERNA PARK	State MD	Zip Code 21146-3116	Transaction ID : PR2575203161977 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) S Unit CEO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. FRANCIS, KEVIN, , ,	Initial) or Full C	Organization Name	Date of Receipt							
Mailing Address 15815 MINNETONKA BL		7.0.1	05 / 0 / Y Y Y Y 05 / 31 2021							
City MINNETONKA	State MN	Zip Code 55345-1410	Transaction ID : PR2575203361977 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Chief Actuary	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional	)		884.58							
TOTAL This Period (last page this line num	per only)									

## Use separate schedule(s)

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			Use separate schedule(s)	(ch	(check only one)						
			for each category of the Detailed Summary Page	>	<b>1</b> 1a		11b	11c	12		
	nformation copied from such Reports and Stat										
	commercial purposes, other than using the n	ame and ad	ddress of any political committee	to so	Dicit con	itrid	utions t	rom sucr	1 committ	ee.	
	nitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)							
<b>A</b> C	II Name of Individual (Last, First, Middle Initial ARRIS, DONNA, , ,	) or Full Or	rganization Name		Date of	Re	ceipt				
Ma	iling Address 27 WEST WILLOW LN				<sup>M</sup> 05	/	D 31	) / Y	ү ү 2021	Y	
Cit	y HARLESTOWN	State RI	Zip Code 02813-1727	_					21256197 is Period	7	
	C ID number of contributing leral political committee.	С					7		76.9	92	
Ur	me of Employer (for Individual) ited HealthCare Services Inc		upation (for Individual) Gen Mgmt		Me	emo	Item				
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	F	P/R Dedu	uctio	on (\$38.	.46 Bi-We	eekly)		
	II Name of Individual (Last, First, Middle Initial TORDAHL, PAUL, , ,	) or Full Or	rganization Name		Date of	Re	ceipt				
	ailing Address 7001 W 175TH AVENUE		05 / D / Y Y Y Y 2021						Y		
Cit	y DEN PRAIRIE	State MN	Zip Code 55346-2161	-			-		21306197	7	
FE	C ID number of contributing leral political committee.	C	Amount of Each Receipt this Period						60		
	ame of Employer (for Individual) ited HealthCare Services Inc	Occu VP (		Me	emo	Item					
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	F	P/R Dedu	ıctic	on (\$192	2.30 Bi-W	′eekly)			
	II Name of Individual (Last, First, Middle Initial	) or Full Or	rganization Name		Date of	Re	ceipt				
Ma	iling Address 6624 IROQUOIS TRAIL				05	/	31	) / Y	y y 2021	Y	
Cit	y DINA	State MN	Zip Code 55439-1065						2 <b>1466197</b> is Period	7	
	C ID number of contributing leral political committee.	С			<u> </u>		<b>y</b>	. ,	115.3	38	
Name of Employer (for Individual) Optum Services, Inc		Occu Bus	Memo Item								
Re	Ceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 634.59	F	P/R Dedu	uctio	on (\$57	.69 Bi-We	ekly)		
SUB	TOTAL of Receipts This Page (optional)						,	,	576.9	90	
тот	AL This Period (last page this line number on	ly)	····· •					- 41-			

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

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

FOR LINE NUMBER:

(check only one)

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		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12									
Any information copied from such Reports a or for commercial purposes, other than usir	and Statements mang the name and a	l ay not be sold or used by any po ddress of any political committee	13     14     15     16     17       erson for the purpose of soliciting contributions to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)	orated PAC (I	JnitedHealth Group PA	NC)									
Full Name of Individual (Last, First, Mido A. KOENIG, ERICA, , ,	lle Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 5985 PRESTWICK COL	IRT		05 31 2021									
City	State	Zip Code	Transaction ID : PR2575215061977									
EXCELSIOR	MN	55331-4412	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Human Capital	Memo Item									
Receipt For:		Year-to-Date ▼										
Primary General Other (specify) ▼		2115.30	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Midc B. TRUXAL, WILLIAM, , ,	lle Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 226 HARBOR VIEW LA	NE		05 31 2021									
City	State	Zip Code	Transaction ID : PR2575218461977									
LARGO	FL	33770-4007	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ision CEO	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Midc C. WILSON, ADAM, , ,	lle Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 336 SALEM CHURCH F			05 / D D / Y Y Y Y 05 31 2021									
City SUNFISH LAKE	State MN	Zip Code 55118-4719	Transaction ID : PR2575218661977									
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef of Staff	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 634.59	P/R Deduction (\$57.69 Bi-Weekly)									
SUBTOTAL of Receipts This Page (option	al)		884.58									
TOTAL This Period (last page this line nur	mber only)											

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ITEMIZED RECEIPTS			for each category of the Detailed Summary Page		<b>×</b> 11a		11b	11c	12			
Ar	y information copied from such Reports and S	tatements ma	av not be sold or used by any p	erson	13 for the	pur	14 pose of	15 soliciting	16 contribut	17 tions		
	for commercial purposes, other than using the											
$\setminus$	NAME OF COMMITTEE (In Full)											
	UnitedHealth Group Incorporate		United Health Group PA	4C)								
v	Full Name of Individual (Last, First, Middle Ini	tial) or Full O	rganization Name									
Α.	SHORS, MATTHEW, , ,			_	Date of Receipt							
	Mailing Address 4649 EWING AVENUE SOUT	Ή			05	1	31	) / Y	2021	Y		
	City	State	Zip Code		Trans	act		PR25752	22236197	7		
	MINNEAPOLIS	MN	55410-1745	_	Amount	tof	Each R	leceipt th	is Period			
	FEC ID number of contributing	С							384.0	60		
	federal political committee.	U			<u></u>	-	-	7				
	Name of Employer (for Individual)	Occi	upation (for Individual)		M	emo	Item					
	United HealthCare Services Inc	Sr D										
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	_				0 00 D' M				
	Other (specify) V		2115.30	11	P/R Dea	ucti	on (\$192	2.30 Bi-W	еекіу)			
				1								
B	Full Name of Individual (Last, First, Middle Ini SANTORO, MICHAEL, , ,	tial) or Full O	rganization Name		Date of	Be	ceipt					
	Mailing Address 18 OLD FIRE ROAD				Date of Receipt							
					05	Ŀ	31		2021			
	City	State CT	Zip Code						2266197	7		
	TRUMBULL		06611-1431	_	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		384.60								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ops		M	emo	ltem					
	Receipt For:	Aggregate	Year-to-Date ▼		P/R Deduction (\$192.30 Bi-Weekly)							
	Primary General			111								
	Other (specify) <b>v</b>		, 2115.30									
C.	Full Name of Individual (Last, First, Middle Ini KRUTA, DARLENE, , ,	tial) or Full O	rganization Name		Date of	Re	ceipt					
	Mailing Address 9243 GREEN BRIAR RD				M M	_	D D	) / Y	YY	Y		
				_	05	Ι.	31		2021			
	City BLOOMINGTON	State MN	Zip Code 55437-1939	$\vdash$					23256197 is Period	7		
	FEC ID number of contributing				Amoun				is renou	_		
	federal political committee.	С					9	y	76.9	92		
	Name of Employer (for Individual)	Occi	upation (for Individual)		М	emo	tem					
	United HealthCare Services Inc	VP (	Gen Mgmt									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Other (specify)		423.06	11	P/R Ded	ucti	on (\$38	.46 Bi-We	ekly)			
						-			046 4	12		
s	UBTOTAL of Receipts This Page (optional)		•	•		-	y	<b>y</b>	846.′	12		
т	OTAL This Period (last page this line number	only)		•								

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12						
			13     14     15     16     17       erson for the purpose of soliciting contributions       to collicit contributions from such committee						
NAME OF COMMITTEE (In Full)	g the name and a	doress of any political committe	e to solicit contributions from such committee.						
	rated PAC (l	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middl GRUNDHOEFER, BRYAN, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1500 STAG MEADOW			05 31 2021						
City SAN ANTONIO	State TX	Zip Code 78248-1346	Transaction ID : PR2575232761977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.00						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) D Med Grp Non Physn	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2112.00	P/R Deduction (\$192.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middl B. KIRKPATRICK, SUSAN, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 417 STERLING STREET			05 / D D / Y Y Y Y 2021						
City LANCASTER	State MA	Zip Code 01523-1847	Transaction ID : PR2575233661977						
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Risk Management	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middl c. CHOATE, THOMAS, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 8222 STONE MASON C			05 / D D / Y Y Y Y 05 / 31 2021						
City WINDERMERE	State FL	Zip Code 34786-5624	Transaction ID : PR2575247861977           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.			444.00						
		upation (for Individual) Unit CEO	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1707.84	P/R Deduction (\$222.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optiona	l)		904.92						
TOTAL This Period (last page this line num	ber only)								

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IT.				Use separate schedule(s)	(cł	heck on	ly oi	ne)							
11	EMIZED RECEIPTS			for each category of the Detailed Summary Page		<b>×</b> 11a 13		11b	11c		12 16	17			
Ar	y information copied from such Reports and St for commercial purposes, other than using the	atements m	nay r addr	not be sold or used by any pe	erson	for the	pur	pose of	soliciting	g con	tributi	ons			
<u> </u>	NAME OF COMMITTEE (In Full)														
	UnitedHealth Group Incorporate	d PAC (	(Un	itedHealth Group PA	(C)										
A.	Full Name of Individual (Last, First, Middle Initi DIMARTINO, TIMOTHY, , ,	al) or Full (	Orga	nization Name		Date o	of Re	eceipt							
	Mailing Address 49605 KEYCOVE ST					05 31 2021									
	City CHESTERFIELD	State MI		Zip Code 48047-2361	_				PR2575			,			
	FEC ID number of contributing federal political committee.				Amount of Each Receipt this Period 76.92										
	Name of Employer (for Individual) United HealthCare Services Inc			tion (for Individual) VP SIs Acct Mgt		N	lemo	o Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Yea	ar-to-Date ▼ 423.06		P/R Dec	ducti	on (\$38	.46 Bi-W	eekly)	)				
в.	Full Name of Individual (Last, First, Middle Initi DARRAH, JACQUELINE, , ,	al) or Full (	Orga	nization Name		Date o	of Re	eceipt							
	Mailing Address 6725 YORK AVENUE SOUTH				05 / 31 / 2021 Transaction ID : PR2575248561977										
	City EDINA	State MN		Zip Code 55435-3235											
	FEC ID number of contributing federal political committee.	C			Amount of Each Receipt this Period 76.92										
	Name of Employer (for Individual) Optum Services, Inc		•	tion (for Individual) c Gen Counsel		N	lemo	o Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Yea	ar-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initi BRANT, PAUL, , ,	al) or Full (	Orga	nization Name		Date o	of Re	eceipt							
	Mailing Address 17 ROCKY BROOK ROAD					05		31	JL	202	- 1 C				
	City WILTON	State CT		Zip Code 06897-1919					PR2575 Receipt th			•			
	FEC ID number of contributing federal political committee.	С				Ē		y	, ,		76.9	2			
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) /P SIs Acct Mgt		N	1em	o Item							
	Receipt For: Primary General Other (specify)	Aggregate	e Yea	ar-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)										
	UBTOTAL of Receipts This Page (optional)				- '			9	· · ·		230.7	6			

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17									
	y information copied from such Reports and Stat for commercial purposes, other than using the na			erson for the purpose of soliciting contributions									
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	UnitedHealth Group PA	.C)									
Α.	Full Name of Individual (Last, First, Middle Initial KORF, GRETCHEN, , ,	) or Full C	Organization Name	Date of Receipt									
	Mailing Address 3180 CYPRESS CIRCLE S	Chata	Zie Oode	05 / 05 / 2021									
	City MEDINA	State MN	Zip Code 55340-8807	Transaction ID : PR2575252261977 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		384.60									
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) PFin	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)									
B.	Full Name of Individual (Last, First, Middle Initial KUETER, DANIEL, , ,	) or Full C	Organization Name	Date of Receipt									
	Mailing Address 1500 WINGATE DRIVE	1		05 31 / Y Y Y Y Y									
	City DELAWARE	State OH	Zip Code 43015-9200	Transaction ID : PR2575255861977 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		384.60									
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Is Segment CFO	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)									
C.	Full Name of Individual (Last, First, Middle Initial BACHMANN, ANITA, , ,	) or Full C	Organization Name	Date of Receipt									
	Mailing Address 815 NORTHERN SHORES POI			05 / D D / Y Y Y Y Y 2021									
	City GREENSBORO	State NC	Zip Code 27455-3459	Transaction ID : PR2575258461977           Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		384.60									
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) h Plan CEO	Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)			1153.80									
т	OTAL This Period (last page this line number on	ly)	•••••										

## Use separate schedule(s)

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12								
Any information copied from such Reports and or for commercial purposes, other than using t											
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle I <b>A.</b> REICHEL, RANDI, , ,	nitial) or Full C	organization Name	Date of Receipt								
Mailing Address 331 TUSCANY ROAD			05 / D D / Y Y Y Y 2021								
City BALTIMORE	State MD	Zip Code 21210-2934	Transaction ID : PR2575259961977           Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		192.30								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1057.65	P/R Deduction (\$96.15 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I BROOMFIELD, ROBERT, , ,	nitial) or Full C	organization Name	Date of Receipt								
Mailing Address 12501 WEST 156TH STREE			05 / D D / Y Y Y Y 2021								
City OVERLAND PARK	State KS	Zip Code 66221-2662	Transaction ID : PR2575260461977								
		00221-2002	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		92.30								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Plan CEO	Memo Item								
Receipt For:	Aggregate	Year-to-Date <b>V</b>									
Other (specify) ▼		507.65	P/R Deduction (\$46.15 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I ZARN, MARY, , ,	nitial) or Full C	organization Name	Date of Receipt								
Mailing Address 11192 BLUESTEM LANE			05 / D D / Y Y Y Y 2021								
City EDEN PRAIRIE	State MN	Zip Code 55347-4731	Transaction ID : PR2575269161977           Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		134.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) sion CEO	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 740.30	P/R Deduction (\$67.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			419.20								
TOTAL This Period (last page this line number	er only)										

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

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17			Use separate schedule(s)	(ch	eck only	/ on	e)							
11			for each category of the Detailed Summary Page		<b>4</b> 11a		11b	11c	12					
Ar	y information copied from such Reports and S	tatements ma	av not be sold or used by any	person	13 for the	purr	14 ose of s	15 soliciting	16 contribut	17 ions				
	for commercial purposes, other than using the													
	NAME OF COMMITTEE (In Full)													
/	UnitedHealth Group Incorporate	ed PAC (l	UnitedHealth Group P	PAC)										
/	Full Name of Individual (Last, First, Middle Init	ial) or Full C	Organization Name											
Α.	HAMBLIN, JILLIAN, , ,				Date of	Re	ceipt							
	Mailing Address 3103 BEACON GROVE ST				05 31 2021									
	City	State	Zip Code			acti		R25752	29036197	7				
	SPRING	ТХ	77389-4348		Amount	of	Each Re	ceipt th	is Period					
	FEC ID number of contributing	С							76.9	12				
	federal political committee.	U			<u> </u>	- 4	7	-95	10.	-				
	Name of Employer (for Individual)	Occ	upation (for Individual)		Me	emo	Item							
	United HealthCare Services Inc	VP	Capability											
	Receipt For: Primary General	Aggregate	Year-to-Date <b>V</b>				(0.0.0.)							
	Other (specify) V		423.06		P/R Dedu	uctic	on (\$38.4	6 BI-WE	ekly)					
D	Full Name of Individual (Last, First, Middle Init SAUER, BRIAN, , ,	ial) or Full C	Organization Name		Data of	Pa	opint							
<b>D</b> .	Mailing Address 28 HILLARY FARM LN				Date of	ne			YY	V				
	Maning Address 20 HILLART FARM LIN				05		31	/ т	2021	T				
	City	State	Zip Code		Trans	acti	on ID : P	R25752	29086197	7				
	SAINT PAUL	MN		Amount	of	Each Re	ceipt th	is Period						
	FEC ID number of contributing federal political committee.	С				, .		76.9	92					
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Gen Mgmt		Me	emo	Item							
	Receipt For:	Aggregate	Year-to-Date <b>V</b>											
	Primary     General       Other (specify) ▼		, 423.06		P/R Dedu	uctio	n (\$38.4	6 Bi-We	ekly)					
_	Full Name of Individual (Last, First, Middle Init MUELLER, STEVEN, , ,	ial) or Full C	Drganization Name		Date of	Re	ceint							
0.	Mailing Address 6895 LAKE HARRISON CIRC	IF			M M	110		/ Y	YY	Y				
					05	Ľ	31		2021					
	City CHANHASSEN	State MN	Zip Code 55317-4589						29456197	7				
			33317-4389		Amount	of	Each Re	ceipt th	is Period					
	FEC ID number of contributing federal political committee.	C			Ľ.	_	y		76.9	92				
	Name of Employer (for Individual) Optum Services, Inc													
	Receipt For:	Aggregate Year-to-Date V												
	Other (specify)		423.06	P/R Deduction (\$38.46 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			•					230.7	6				
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ITEMIZED RECEIPTS			Use separate schedule(s)	(check	(check only one)							
			for each category of the Detailed Summary Page	<b>X</b> 11		11b	11c	12	□ <b>-</b> -			
			y not be sold or used by any pe Idress of any political committee		he pu							
	/ITTEE (In Full)											
✓ UnitedHealt	h Group Incorporated	PAC (U	InitedHealth Group PA	NC)								
Full Name of Indi A. HEWITT, SCO	ividual (Last, First, Middle Initial	) or Full Or	ganization Name	Date	of B	eceint						
	1443 RAYMOND AVE			Date of Receipt								
City		State	Zip Code	05 31 2021 Transaction ID : PR2575296761977								
SAINT PAUL		MN	55108-1430					is Period				
FEC ID number of federal political co	0	С						162.2	20			
Name of Employe Optum Services, I	. ,		pation (for Individual) Itwk Prgms		Mem	o Item						
Receipt For:			Year-to-Date ▼	_								
Primary	General		850.73	P/R [	Deduct	ion (\$81. <sup>-</sup>	10 Bi-We	ekly)				
Other (spec	(iiy) <b>V</b>											
Full Name of Indi B. CUEVAS, BR	vidual (Last, First, Middle Initial	) or Full Or	ganization Name	Date	e of R	eceipt						
Mailing Address a	8 CLOISTER COURT				M 05	31	/ Y	y y 2021	Ŷ			
City		State	Zip Code					805661977	,			
		CA	92694-1556	Amo	ount of	Each R	eceipt th	is Period				
FEC ID number of federal political of	0	С		384.60								
Name of Employe United HealthCare			pation (for Individual) n CEO		Mem	o Item						
Receipt For:		Aggregate \	Year-to-Date ▼	1								
Other (spec	L General cify) ▼		, 2115.30	P/R D	educt	ion (\$192	.30 Bi-W	'eekly)				
Full Name of Indi C. HUNT, BRA	vidual (Last, First, Middle Initial	) or Full Or	ganization Name	Date	e of R	eceipt						
	6636 W SHORE DR				)5	/ D D 31	/ Y	2021	Y			
City		State	Zip Code	Tr	ansac	tion ID :	PR2575	31046197	7			
EDINA		MN	55435-1529	Amo	ount of	Each R	eceipt th	is Period				
FEC ID number of federal political co	0	С				y		384.6	i0			
Name of Employe		· · · ·	pation (for Individual) Segment CMO		Mem	o Item						
Receipt For:	General	Aggregate	Year-to-Date ▼	P/R Deduction (\$192.30 Bi-Weekly)								
Other (spec			2115.30			aon (\$192	2.30 BI-W	/еекіу)				
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### SCHEDULE A (FEC Form 3X) DEOFIDTO

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		Use separate schedule(s)	(check only one)										
		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         1 <sup>1</sup>										
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions										
NAME OF COMMITTEE (In Full)													
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle I PEEL, CHAD, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 7185 GUNFLINT TRAIL			05 31 / Y Y Y Y 05 31 2021										
City CHANHASSEN	State MN	Zip Code 55317-4743	Transaction ID : PR2575329861977 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		153.84										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) HIthcare Econ	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 846.12	P/R Deduction (\$76.92 Bi-Weekly)										
Full Name of Individual (Last, First, Middle I B. WHITE, WAYNE, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 8727 W BUCKHORN TRL			05 / Y Y Y Y Y 2021										
City PEORIA	State AZ	Zip Code 85383-4852	Transaction ID : PR2575342361977 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		384.60										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Cust Svs	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle I	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 2602 PENNINGTON PLACE			05 / 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0										
City VALPARAISO	State IN	Zip Code 46383-9163	Transaction ID : PR2575350961977           Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		78.00										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 429.00	P/R Deduction (\$39.00 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)			616.44										
TOTAL This Period (last page this line numbe	r only)												

## Use separate schedule(s)

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			Use separate schedule(s	/	(check only one)							
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a	11b	11c	12					
	y information copied from such Reports and Sta											
	for commercial purposes, other than using the n NAME OF COMMITTEE (In Full)	ame and a	address of any political com	millee lo	SOUCIL COL	IIIIDUIIOIIS	from suc	n commu	ee.			
$\rangle$	UnitedHealth Group Incorporated	I PAC (l	UnitedHealth Group	D PAC	)							
A.	Full Name of Individual (Last, First, Middle Initia GUSTIN, TODD, , ,	l) or Full O	Drganization Name		Date of	Receipt						
	Mailing Address 5717 AYRSHIRE BLVD				05 / Y Y Y Y 2021							
	City EDINA	State MN	Zip Code 55436-2059			action ID of Each I			7			
	FEC ID number of contributing federal political committee.	С						153.8	34			
	Name of Employer (for Individual) Optum360 Services Inc	cupation (for Individual) Gen Mgmt		Me	emo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 846.12	2	P/R Dedu	uction (\$76	6.92 Bi-Wo	eekly)				
в.	Full Name of Individual (Last, First, Middle Initia NIELSEN, MICHELE, , ,	l) or Full O	Drganization Name		Date of	Receipt						
	Mailing Address 6 AMHERST COURT	1			м м 05	/ D 31		y y 2021	Y			
	City NORTH BRUNSWICK	State NJ	Zip Code 08902-4559		action ID : of Each I			7				
	FEC ID number of contributing federal political committee.	С			76.92							
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Ntwk Contrctng		Me	emo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	6	P/R Dedu	uction (\$38	8.46 Bi-We	eekly)				
С.	Full Name of Individual (Last, First, Middle Initia COOK, JORDANA, , ,	l) or Full O	Organization Name		Date of	Receipt						
	Mailing Address 46 PALMETTO COVE COURT	1			M M 05	/ D 31		Y Y 2021	Y			
	City BLUFFTON	State SC	Zip Code 29910-9580			action ID of Each I			7			
	FEC ID number of contributing federal political committee.	С				. <u>,</u> .		230.7	76			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev		Me	emo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 807.66		P/R Deduction (\$115.38 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)			▶				461.5	52			
т	OTAL This Period (last page this line number on	ly)		▶								

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	-	Use separate schedule(s)	(chec	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page		<b>X</b> 11a 11b 11c 11										
Any information copied from such Reports a			erson for			se of s								
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	g the name and a	ddress of any political committee	e to solic	it cont	ribut	ions fro	om sucr	i committ	ee.					
UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group P/	AC)											
Full Name of Individual (Last, First, Middl CUNNINGHAM, BRIAN, , ,	e Initial) or Full C	rganization Name	Da	ate of	Rece	eipt								
Mailing Address 1711 ROLLING HILLS R	D			M M / D D / Y Y Y Y 05 31 2021										
City CHARLESTON	State WV	Zip Code 25314-2215						8 <b>7596197</b> is Period	7					
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 76.92											
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Proj Mgmt		Mei	mo li	tem								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R	Dedu	ction	(\$38.4	l6 Bi-We	ekly)						
Full Name of Individual (Last, First, Middl B. BRATTEBO, CRAIG, , ,	e Initial) or Full C	rganization Name	Da	ate of	Rece	eipt								
Mailing Address 10202 HARMONY CIRCL				05	/	D D 31	/ Y	y y 2021	Y					
City EDEN PRAIRIE	State MN	Zip Code 55347-5019						9726197	7					
FEC ID number of contributing federal political committee.	С	С				Amount of Each Receipt this Period								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) buty Gen Counsel		Mer	mo li	tem								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R	Deduc	ction	(\$192.	30 Bi-W	'eekly)						
Full Name of Individual (Last, First, Middl C. FELLER, WILLIAM, , ,	e Initial) or Full C	rganization Name	Da	ate of	Rece	eipt								
Mailing Address 3715 HUNTINGTON AVI	E			05	1	D D 31	/ Y	2021	Y					
City ST LOUIS PARK	State MN	Zip Code 55416-4917						<b>40036197</b> is Period	7					
FEC ID number of contributing federal political committee.	С				y		. y	76.9	92					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Fechnology		Me	mo l	tem								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 423.06	P/R	Dedu	ction	ı (\$38.4	l6 Bi-W€	ekly)						
SUBTOTAL of Receipts This Page (optional	l)				,		,	538.4	14					
TOTAL This Period (last page this line nun	ber only)				-		- 41-							

## Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>≭</b> 11a □ 11b □ 11c □ 12							
			13     14     15     16     17       erson for the purpose of soliciting contributions							
or for commercial purposes, other than using	the name and a	ddress of any political committee	e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle UNDERWOOD, JEFFREY, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 14625 SW SUNRISE LN			05 31 Y Y Y Y Y 05 31 2021							
City TIGARD	State OR	Zip Code 97224-1209	Transaction ID : PR2575403361977 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		153.84							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 846.12	P/R Deduction (\$76.92 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. ANDERSON, BRADLEY, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 4613 W 56TH ST	1		05 31 Y Y Y Y Y							
City EDINA	State MN	Zip Code 55424-1558	Transaction ID : PR2575405261977 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		76.92							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Strategy	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle VENKATESAN, CHANDRAMO			Date of Receipt							
Mailing Address 17698 62ND COURT NOR	1		05 / D D / Y Y Y Y 2021							
City MAPLE GROVE	State MN	Zip Code 55311-4619	Transaction ID : PR2575410161977 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		384.60							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Seg CIO	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			615.36							
TOTAL This Period (last page this line numb	er only)									

## Use separate schedule(s)

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17								
Any information copied from such Reports and or for commercial purposes, other than using t	Statements mathematic	I ay not be sold or used by any p address of any political committe	erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpora	ted PAC (	UnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle MILLER, ALLISON, , ,	Initial) or Full C	Organization Name	Date of Receipt								
Mailing Address 11671 45TH PLACE NE			05 / D / Y Y Y Y 05 31 2021								
City SAINT MICHAEL	State MN	Zip Code 55376-4536	Transaction ID : PR2575418161977 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		192.30								
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) IT	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1057.65	P/R Deduction (\$96.15 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. GOTHARD, CAROL, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 16492 BROOKLANE BOUL			05 31 / Y Y Y Y Y 05 31 2021								
City NORTHVILLE	State MI	Zip Code 48168-8417	Transaction ID : PR2575419161977 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.36								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Fin	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify) ▼		419.98	P/R Deduction (\$38.18 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. MCGAVICK, KEVIN, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 705 NOTTINGHAM COUR		1	05 / D D / Y Y Y Y Y 2021								
City CRANBERRY TOWNSHIP	State PA	Zip Code 16066-6527	Transaction ID : PR2575421961977 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.92								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Bus Dvlp	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional).			345.58								
TOTAL This Period (last page this line number	er only)										

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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(check only one)

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	EMIZED RECEIPIS			or each category of the Detailed Summary Page	×	11a 13		11	-	110	;	12 16	17				
	y information copied from such Reports and State for commercial purposes, other than using the na					or the		pos	se of s	solicit		contrib	utions				
$\left.\right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Uni	itedHealth Group PA	NC)												
Α.	Full Name of Individual (Last, First, Middle Initial) O'HARA, KARIN, , ,	or Full O	Drgai	nization Name	C	Date o	f Re	ecei	ipt								
	Mailing Address 1431 HENRY COURT				05 31 2021 Transaction ID : PR2575428761977												
	City CHANHASSEN	State MN		Zip Code 55317-2200													
				55517-2200	A	moun	t of	Ŀа	ich Re	eceip	this	s Perio	d				
	FEC ID number of contributing federal political committee.	C	_			_		-				192	.30				
	Name of Employer (for Individual) United HealthCare Services Inc		upat Acct	tion (for Individual)		М	emc	o Ite	em								
	Dessint Fam			ur-to-Date ▼	-												
	Primary General Other (specify) ▼	ggregate	160	1057.65	P/	R Ded	luctio	on	(\$96.1	5 Bi-	Wee	ekly)					
В.	Full Name of Individual (Last, First, Middle Initial) CASTILLO, EFREM, , ,	or Full O	Drgai	nization Name		Date o	f Re	ecei	ipt								
	Mailing Address 630 ELIZABETH ROAD					м м 05	/	Γ	31	/	Y	y y 2021	Y				
	City SAN ANTONIO	State TX		Zip Code 78209-6135				-			-	<b>413619</b> s Perio					
	FEC ID number of contributing federal political committee.	С				269.22											
	Name of Employer (for Individual) Optum Services, Inc		•	tion (for Individual) re Initiv		М	emc	o Ite	em								
	Receipt For:       A         Primary       General         Other (specify) ▼	ggregate	Yea	ar-to-Date ▼ 1480.71		R Ded	uctio	on (	(\$134.	.61 B	i-We	eekly)					
с.	Full Name of Individual (Last, First, Middle Initial) MURLEY, MARY, , ,	or Full O	Orgai	nization Name		Date o	f Re	ecei	ipt								
	Mailing Address 2775 COUNTRYSIDE DRIVE WE	ST				м м 05	/	Γ	D D 31	/	Y	y 2021	Y				
	City	State		Zip Code		Trans	sact	ion	n ID : F	PR25	754	436619	77				
	ORONO	MN		55356-9675	A	moun	t of	Ea	ich Re	eceipt	this	s Perio	b				
	FEC ID number of contributing federal political committee.	С				_		y		,		384	.60				
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) sk and Analytics		M	lemo	o Ite	em								
	Receipt For:     A       Primary     General       Other (specify)	ggregate	Yea	ar-to-Date ▼ 2115.30	P/	'R Dec	lucti	ion	(\$192	.30 E	i-We	eekly)					
s	UBTOTAL of Receipts This Page (optional)				. [							846	.12				
Т	OTAL This Period (last page this line number only	/)						-									

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

## Use separate schedule(s)

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17							
Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma	L ay not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle I SPILKER, TIMOTHY, , ,	nitial) or Full O	rganization Name	Date of Receipt							
Mailing Address 32 FITCH LANE			05 31 Y Y Y Y 2021							
City NEW CANAAN	State CT	Zip Code 06840-5051	Transaction ID : PR2575446361977 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CEO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I B. BOOKER, ROBERT, , ,	nitial) or Full O	rganization Name	Date of Receipt							
Mailing Address 16632 HANSON BLVD NW			05 / 0 0 / Y Y Y Y 05 / 31 / 2021							
City ANDOVER	State MN	Zip Code 55304-2089	Transaction ID : PR2575447261977							
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ef Info Security Officer	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1346.10	P/R Deduction (\$0.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I C. FLOCCO, LOUIS, , ,	nitial) or Full O	rganization Name	Date of Receipt							
Mailing Address 521 SAN BERNARDINO AV			05 / D D / Y Y Y Y 05 / 31 / 2021							
City NEWPORT BEACH	State CA	Zip Code 92663-4812	Transaction ID : PR2575448661977 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		200.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Jnderwriting	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1100.00	P/R Deduction (\$100.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			584.60							
TOTAL This Period (last page this line number	er only)									

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

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

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			Detailed Summary Page	×	11a 13		11b		11c 15	12	17				
or	y information copied from such Reports and State for commercial purposes, other than using the nar				or the		urpose of so		oliciting	contribu	tions				
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	UnitedHealth Group PA	C)											
Α.	Full Name of Individual (Last, First, Middle Initial) RUNICE, PAUL, , ,	or Full C	Drganization Name		Date of Receipt										
	Mailing Address 4622 BRUCE AVENUE			05 / D / Y Y Y Y 2021											
	City	State	Zip Code		Transaction ID : PR2575451561977										
	EDINA	MN	55424-1123	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С		369.00											
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Treasury		Me	emo	Iten	n							
	Pagaint For:		Year-to-Date ▼	-											
	Primary General Other (specify) ▼	ggrogato	2029.50	P/	R Ded	uctio	on (\$	184.	50 Bi-W	eekly)					
в.	Full Name of Individual (Last, First, Middle Initial) MCGLINCH, THOMAS, , ,	or Full C	Drganization Name		Date of	Re	ceipt	t							
	Mailing Address 910 MIDWEST TRAIL NORTH			1	м м 05	1		31	/ Y	y 2021	Y				
	City	State	Zip Code		Trans	acti	on II	D : P	R25754	5166197	7				
	LAKE ELMO	MN	55042-9658	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С			134.62										
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Treasury	Memo Item											
	Receipt For:       A         □       Primary       □         Other (specify)       ▼	ggregate	Year-to-Date ▼ , 1490.35	P/R Deduction (\$67.31 Bi-Weekly)											
с.	Full Name of Individual (Last, First, Middle Initial) MURPHY, ERIC, , ,	or Full C	Drganization Name		Date of	Re	ceipt	t							
	Mailing Address 3510 OCEAN DRIVE			1	<sup>M</sup> 05	/		<sup>р</sup> 31	/ Y	y y 2021	Y				
	5	State	Zip Code		Trans	acti	ion I	D : P	R25754	5376197	7				
	JACKSONVILLE BEACH	FL	32250-5969	A	mount	of	Each	n Ree	ceipt th	is Period					
	FEC ID number of contributing federal political committee.	С			_		9		y	384.	60				
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CEO		M	emo	lter	n							
	Receipt For:     A       Primary     General       Other (specify)	ggregate	Year-to-Date ▼ 2115.30	P/	'R Ded	uctio	on (\$	3192.3	30 Bi-W	/eekly)					
s	JBTOTAL of Receipts This Page (optional)							_		888.	22				
т	OTAL This Period (last page this line number only	·)		Ī			-		-						

## Use separate schedule(s)

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17								
Any information copied from such Reports and or for commercial purposes, other than using th			person for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ted PAC (l	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middle In GLATT, CHRISTOPHER, , ,	nitial) or Full O	rganization Name	Date of Receipt								
Mailing Address 631 GOODRICH AVE			05 / 0 0 / 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0								
City SAINT PAUL	State MN	Zip Code 55105-3522	Transaction ID : PR2575464961977 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		38.46								
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Dir /	upation (for Individual) Aviation Corp Pilots	Memo Item								
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.53	P/R Deduction (\$19.23 Bi-Weekly)								
Full Name of Individual (Last, First, Middle In B. SADUSKE, NANETTE, , ,	nitial) or Full O	rganization Name	Date of Receipt								
Mailing Address 4276 NICOLET DRIVE			05 / 0 / Y Y Y Y 2021								
City GREEN BAY	State WI	Zip Code 54311-9798	Transaction ID : PR2575470261977 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.92								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Compli	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle In C. DITTBERNER, LINDSAY, , ,	nitial) or Full O	rganization Name	Date of Receipt								
Mailing Address 962 WOODVIEW CIRCLE	1		05 / D D / Y Y Y Y 2021								
City CARVER	State MN	Zip Code 55315-4519	Transaction ID : PR2575496961977 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		153.84								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 846.12	P/R Deduction (\$76.92 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			269.22								
TOTAL This Period (last page this line numbe	r only)	······									

## Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)								
I LIVILLU KEGEIPIS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12								
			13     14     15     16     17       erson for the purpose of soliciting contributions       to solicit contributions from such committee.								
		uuress or any pointed contrintite									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle VESLEDAHL, MATTHEW, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 15598 MICHELE LANE			05 / D D / Y Y Y Y 05 31 2021								
City EDEN PRAIRIE	State MN	Zip Code 55346-2548	Transaction ID : PR2575499261977 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ? Ntwk	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle SUNDAL, DEBORAH, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 5109 WEST 66TH ST			05 / D D / Y Y Y Y 2021								
City EDINA	State MN	Zip Code 55439-1429	Transaction ID : PR2575502961977								
		00403-1423	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef of Staff	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify) ▼		2115.30	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle HOWELL, NICHOLAS, , ,		rganization Name	Date of Receipt								
Mailing Address 300 ORANGE GROVE A		7.01	05 31 2021								
City SOUTH PASADENA	State CA	Zip Code 91030-1616	Transaction ID : PR2575510061977           Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus Dev	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			1153.80								
TOTAL This Period (last page this line num	per only)										

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

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

FOR LINE NUMBER:

(check only one)

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				ategory of the summary Page	×	11a 13		11b 14		11c 15	12	17				
or	y information copied from such Reports and State for commercial purposes, other than using the nar				or the		oose	oliciting	contribu	tions						
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	JnitedHea	alth Group PA	NC)											
Α.	Full Name of Individual (Last, First, Middle Initial) MUNSON, RICHARD, , ,	or Full C	rganization N	ame	[	Date of Receipt										
	Mailing Address 4707 HAZELTINE LANE					05 / 05 / Y Y Y Y Y 05 2021										
	City	State	Zip Code			Transaction ID : PR2575512461977										
	EAGAN	MN	55123-	2172	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С			192.30											
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Ir Compli	ndividual)		Me	emo	Iten	n							
	Receipt For: A		Year-to-Date	▼												
	Primary General Other (specify) ▼	ggroguto		1057.65	P/	'R Ded	uctic	on (\$	96.1	5 Bi-We	ekly)					
	Full Name of Individual (Last, First, Middle Initial) KELLY, MARGARET, , ,	or Full C	rganization N	ame		Date of	Re	ceipt	:							
	Mailing Address 23420 COVELLO STREET					Date of Receipt										
	City	State	Zip Code	9	Transaction ID : PR2575518061977											
	WEST HILLS	CA	91304-	5333	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С						-	92.	30						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Ir VP SIs Acct M	,		Memo Item										
	Receipt For:       A         □       Primary       □       General         □       Other (specify)       ▼	ggregate	Year-to-Date	507.65		P/R Deduction (\$46.15 Bi-Weekly)										
	Full Name of Individual (Last, First, Middle Initial) KAPLAN, ERIC, , ,	or Full C	rganization N	ame		Date of	Re	ceipt	:							
	Mailing Address 193 PARTRIDGE LANDING					<sup>M</sup> 05	1		<sup>р</sup> 31	/ Y	2021	Y				
	5	State CT	Zip Code								2406197	7				
	GLASTONBURY		06033-2	2049	A	Amount	of	Each	n Re	ceipt th	s Period					
	FEC ID number of contributing federal political committee.	С						9		y	384.	60				
	Name of Employer (for Individual) Optum Services, Inc		upation (for Ir CInt Relation	,		M	emo	lten	n							
	Receipt For:     A       Primary     General       Other (specify)	ggregate	Year-to-Date	2115.30	P	/R Ded	uctio	on (\$	192.	30 Bi-W	'eekly)					
SI	JBTOTAL of Receipts This Page (optional)				.						669.	20				
т	OTAL This Period (last page this line number only	·)						-								

### SCHEDULE A (FEC Form 3X) DEOFIDTO

FOR LINE NUMBER:

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		Use separate schedule(s)	(check onl									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a	11b	11c	12	<b>_</b>					
Any information copied from such Reports and or for commercial purposes, other than using the												
NAME OF COMMITTEE (In Full)				Intributions		Commute						
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle I COHEN, SANFORD, , ,	nitial) or Full C	rganization Name	Date of Receipt									
Mailing Address 28 CRESCENT LANE			05 / D D / Y Y Y Y 2021									
City LEVITTOWN	State NY	Zip Code 11756-2506		Transaction ID : PR2575526161977 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С					384.6	iO					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) O, Clinical Policy	м	emo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Ded	luction (\$19	2.30 Bi-W	′eekly)						
Full Name of Individual (Last, First, Middle I HUNTER, ROBERT, , ,	nitial) or Full C	rganization Name	Date o	f Receipt								
Mailing Address 5420 COUNTRYSIDE ROAI			05 / 05 / Y Y Y Y 05 / 31 / 2021									
City EDINA	State MN	Zip Code 55436-2524		<b>action ID :</b> t of Each F			,					
FEC ID number of contributing federal political committee.	С			384.60								
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) Fin	м	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼		_								
Primary General Other (specify) ▼		2115.30	P/R Ded	uction (\$19	2.30 Bi-W	eekly)						
Full Name of Individual (Last, First, Middle I HERNANDEZ, MAYRENE, , ,	nitial) or Full C	rganization Name	Date o	f Receipt								
Mailing Address 850 SW 189TH AVENUE			<sup>M</sup> 05	31		2021						
City PEMBROKE PINES	State FL	Zip Code 33029-6047		saction ID : t of Each F			<u>r</u>					
FEC ID number of contributing federal political committee.	С			<b>9</b>	,	76.9	12					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ied Dir	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)					. ,	846.1	2					
TOTAL This Period (last page this line numbe	er only)											

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

## Use separate schedule(s)

FOR LINE NUMBER:

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			for each category of the Detailed Summary Page					] 11k   14	· –	11c 15	12 16	17				
or	y information copied from such Reports and Stater for commercial purposes, other than using the name							pose	e of s	oliciting	g contribu	tions				
$\left. \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (l	Jni	tedHealth Group PA	C)											
Α.	Full Name of Individual (Last, First, Middle Initial) HOLOVNIA, KRISTEN, , ,	or Full O	rgan	nization Name		Date of	Re	eceip	pt							
	Mailing Address 4610 LAKEVIEW DRIVE					05 / D D / Y Y Y Y 2021										
	5	State MN		Zip Code 55424-1518	Transaction ID : PR2575533061977											
				33424-1310	Amount of Each Receipt this Period 384.60											
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) ity Gen Counsel	1	Me	emo	b Ite	em							
	Receipt For:	ggregate	Yea	r-to-Date ▼ 2115.30	P/	R Ded	uctic	on (	\$192.	30 Bi-W	/eekly)					
B.	Full Name of Individual (Last, First, Middle Initial) HILL, JANE, , ,	or Full O	rgan	nization Name		Date of	Re	eceip	pt							
	Mailing Address 34301 299TH PLACE					05 / 0 0 / 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0										
	City	State MN		Zip Code 56431-5914				-			5 <b>3316197</b> iis Period					
	FEC ID number of contributing federal political committee.	C				_		-		-9-	76.	92				
	Name of Employer (for Individual) United HealthCare Services Inc		upat Com	tion (for Individual) npli	Memo Item											
	Receipt For:     Ag       Primary     General       Other (specify) ▼	ggregate	Yea	r-to-Date ▼ 423.06	P/	P/R Deduction (\$38.46 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initial) MULLANEY, SUSAN, , ,	or Full O	rgan	nization Name	Date of Receipt											
	Mailing Address 169 HUNNEWELL STREET					<sup>M</sup> 05	1	D	31	/ Y	y y 2021	Y				
	City	State MA		Zip Code 02494-1421							53516197 iis Period					
	FEC ID number of contributing federal political committee.	C				inoun	U	J			76.	_				
	Name of Employer (for Individual) United HealthCare Services Inc			ion (for Individual) Mgmt		Me	emo	o Ite	em							
	Receipt For:     Ag       Primary     General       Other (specify)	ggregate	Yea	r-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)											
s	UBTOTAL of Receipts This Page (optional)			••••••							538.	44				
Т	OTAL This Period (last page this line number only)	)			Ī			-		, ,						

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			Use separate schedule(s)	(che	ck only	nly one)							
116	MIZED RECEIPTS	for each category of the Detailed Summary Page			11a 12	$\square$	11b	11c	12	<b>1</b> 47			
	information copied from such Reports and Stat or commercial purposes, other than using the n												
	AME OF COMMITTEE (In Full)			•									
$\gamma$ t	JnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)									
	ull Name of Individual (Last, First, Middle Initial HAMLIN, THOMAS, , ,	) or Full Or	rganization Name		Date of Receipt								
Μ	lailing Address 2800 NEWMAN			05 31 2021									
	ity	State	Zip Code	Transaction ID : PR2575536261977									
-	IOUSTON	ТХ	77098-1408	A	mount	of	Each R	eceipt th	is Period				
	EC ID number of contributing ederal political committee.	С			_				76.	92			
0	ame of Employer (for Individual) ptum Services, Inc		ipation (for Individual) ehvrl Med Dir		Me	emo	Item						
R	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/	R Dedi	uctio	on (\$38.4	46 Bi-We	eekly)				
	ull Name of Individual (Last, First, Middle Initial SUN, TONY, , ,	) or Full Or	rganization Name	C	ate of	Re	ceipt						
_	lailing Address 8408 ENSLEY PLACE	1		05 / 31 / 2021 Transaction ID : PR2575540261977									
	ity EAWOOD	State KS	Zip Code 66206-1402										
F	EC ID number of contributing deral political committee.	C			iniouni	U			iis Period 76.	_			
	lame of Employer (for Individual) nited HealthCare Services Inc		upation (for Individual) Med Dir/CMO	Memo Item									
R	eceipt For: Primary General	Aggregate	Year-to-Date ▼				(****						
	Other (specify) V		423.06		R Dedu	JCTIC	on (\$38.4	46 Bi-We	екіу)				
	ull Name of Individual (Last, First, Middle Initial ROSENZWEIG, MARTIN, , ,	) or Full Or	rganization Name	C	ate of	Re	ceipt						
_	lailing Address 116 DAVID RD	1			<sup>M</sup> 05	/	31	/ Y	y y 2021	Y			
	ity BALA CYNWYD	State PA	Zip Code 19004-2315	A					54066197 iis Period				
	EC ID number of contributing ederal political committee.	С					y	, j	153.	_			
С	ame of Employer (for Individual) Optum Services, Inc		ipation (for Individual) rrl CMO		Me	emo	Item						
R	eceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 846.12	P/	R Ded	uctio	on (\$76.	92 Bi-W	eekly)				
SU	BTOTAL of Receipts This Page (optional)		•	[			,	. ,	307.	68			
то	TAL This Period (last page this line number on	ly)	<b>&gt;</b>					1.45					

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

## Use separate schedule(s)

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			for each category of the Detailed Summary Page	×	11a 13		11b 14		11c 15	12	17			
	y information copied from such Reports and State for commercial purposes, other than using the na				or the		oose (		oliciting	contribu	tions			
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	C)										
A.	Full Name of Individual (Last, First, Middle Initial) STEINBRECHER, HOLLY, , ,	) or Full O	rganization Name	D	ate of	Re	ceipt							
	Mailing Address 2101 LILAC LANE	04-44-	The Oaste											
	City FRISCO	State TX	Zip Code 75034-3652	Transaction ID : PR2575544561977 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С			mount	UI				384				
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		Me	emo	Item							
	Receipt For:       //         Primary       General         Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/I	R Dedu	uctic	on (\$1	92.:	30 Bi-W	/eekly)				
B.	Full Name of Individual (Last, First, Middle Initial) STUEVE, EDWARD, , ,	) or Full O	rganization Name		ate of	Re	ceipt							
	Mailing Address 16700 56TH PLACE N	1		05 / D D / Y Y Y Y Y 2021										
	City PLYMOUTH	State MN	Zip Code 55446-3011		Transaction ID : PR2575556261977 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		ļ	50									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		Memo Item									
	Receipt For:       //         Primary       General         Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	P/R Deduction (\$50.00 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initial) MILLER, MAXIMILLIAN, , ,	) or Full O	rganization Name	D	ate of	Re	ceipt							
	Mailing Address 6939 HARRIET AVENUE S	1			05 <sup>M</sup>	1	D 3	D 1	/ Y	ү ү 2021	Y			
	City RICHFIELD	State MN	Zip Code 55423-2344	_						5795619 is Perioc				
	FEC ID number of contributing federal political committee.	С			mount		J	ne	,		92			
	Name of Employer (for Individual) United HealthCare Services Inc	Occi Dir M	upation (for Individual) / A		Me	emo	Item							
	Receipt For:     //       Primary     General       Other (specify)	Aggregate	Year-to-Date ▼ 423.06	P/	R Dedi	uctio	on (\$3	38.4	6 Bi-We	eekly)				
s	UBTOTAL of Receipts This Page (optional)		<b>&gt;</b>				, .		ų	511.	52			
т	OTAL This Period (last page this line number onl	y)	····· •	ĺ			,		-					

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	-	Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12									
			13     14     15     16     1'       berson for the purpose of soliciting contributions       e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)	ig the name and a											
UnitedHealth Group Incorpo	orated PAC (l	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Mide WINSOR, ELIZABETH, , ,	lle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 57 WILDERS PASS			05 / D D / Y Y Y Y 2021									
City CANTON	State CT	Zip Code 06019-2259	Transaction ID : PR2575582861977           Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n CEO	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Midd HARRIS, EUGENE, , ,	lle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 2832 HARBORSIDE WA			05 / 31 / 2021									
City SOUTHPORT	State NC	Zip Code 28461-8373	Transaction ID : PR2575585461977 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		192.30									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Reg VP of Brkr SIs	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1057.65	P/R Deduction (\$96.15 Bi-Weekly)									
Full Name of Individual (Last, First, Mido C. MORABITO, RICHARD, , ,	lle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 335 TUCKER HILL ROA	1		05 / 05 / Y Y Y Y 2021									
City MIDDLEBURY	State CT	Zip Code 06762-2430	Transaction ID : PR2575586161977           Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		76.92									
Name of Employer (for Individual) Optum Services, Inc	Occi VP I	upation (for Individual) T	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)									
SUBTOTAL of Receipts This Page (option	al)		653.82									
TOTAL This Period (last page this line nur	mber only)											

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IТ			Use separate schedule(s)	(checl	check only one)							
11			for each category of the Detailed Summary Page				11b 14	11c 15	12	17		
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	L ay not be sold or used by any p ddress of any political committe	erson for	the p the p	ourp	ose of	soliciting	g contribu	tions		
$\overline{)}$	NAME OF COMMITTEE (In Full)											
$\rangle$	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group P	AC)								
Α.	Full Name of Individual (Last, First, Middle Initi FINCH, ANNE, , ,	al) or Full O	rganization Name	Da	Date of Receipt							
	Mailing Address 208 STATION CIR NO			N	05 / 0 / Y Y Y Y Y 05 / 31 / 2021							
	City HUDSON	State WI	Zip Code 54016-9555		Transaction ID : PR2575586661977 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С					,		76.			
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) sion CEO	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R	Dedu	ctio	on (\$38	.46 Bi-We	eekly)			
в.	Full Name of Individual (Last, First, Middle Initi SOLLER, BRIAN, , ,	al) or Full O	rganization Name	Date of Receipt								
	Mailing Address 1120 S 2ND STREET UNIT 614	0	7: 0-1-	IV	05 / D D / Y Y Y Y 05 / 31 / 2021							
	City MINNEAPOLIS	State MN	Zip Code 55415-1375						58676197 his Period			
	FEC ID number of contributing federal political committee.	С		iouni				384.	_			
	Name of Employer (for Individual) Optum Services, Inc	Occu Bus		Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R	Dedu	ctio	n (\$19:	2.30 Bi-W	/eekly)			
C.	Full Name of Individual (Last, First, Middle Initi GISCH, SHAWNA, , ,	al) or Full O	rganization Name	Da	te of	Red	ceipt					
	Mailing Address 320 PRESERVE COURT			_  L	05 <sup>™</sup>	/	D 31	J L	y y 2021			
	City CHANHASSEN	State MN	Zip Code 55317-8717				-		59216197 nis Period			
	FEC ID number of contributing federal political committee.	С			_		,	. ,	384.	60		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Unit CEO		Me	mo	ltem					
	Receipt For: Primary General Other (specify)	Aggregate	gregate Year-to-Date ▼ 2115.30				on (\$19	2.30 Bi-V	Veekly)			
	UBTOTAL of Receipts This Page (optional)				-		9 9	, , , , , , , , , , , , , , , , , , ,	846.	12		

## Use separate schedule(s)

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17			Use separate schedule(s)	(che	ck only	conly one)							
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12				
	y information copied from such Reports and Sta for commercial purposes, other than using the n										17 s		
$\overline{\langle}$	NAME OF COMMITTEE (In Full)			10 001									
$\rangle$	UnitedHealth Group Incorporated	I PAC (l	UnitedHealth Group PA	C)									
Α.	Full Name of Individual (Last, First, Middle Initia MILLER, MICHAEL, , ,	l) or Full O	Organization Name	Date of Receipt									
	Mailing Address 1 CANAL STREET 802			05 31 2021									
	City BOSTON	State MA	Zip Code 02114-2019	Transaction ID : PR2575595661977 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С					7			4.60			
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Business Development Exe		Me	emo	ltem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/	R Dedi	uctio	on (\$192	2.30 Bi-V	Veekly)				
в.	Full Name of Individual (Last, First, Middle Initia IVERSON, LISA, , ,	l) or Full O	Organization Name	Date of Receipt									
	Mailing Address 13341 CARRACH AVENUE			05 / 31 / 2021 Transaction ID : PR2575603261977									
	City ROSEMOUNT	State MN	Zip Code 55068-4774				-		6032619 nis Perio				
	FEC ID number of contributing federal political committee.	С		384.60									
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Strat Initiv										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/	R Dedu	uctic	on (\$192	2.30 Bi-V	/eekly)				
с.	Full Name of Individual (Last, First, Middle Initia GOODMAN, BENJAMIN, , ,	l) or Full O	Organization Name		Date of	Re	ceipt						
	Mailing Address 13828 EVERGREEN COURT				<sup>M</sup> 05	1	D D D 31	/ Y	2021	Y			
	City APPLE VALLEY	State MN	Zip Code 55124-9257	A					6038619 nis Perio				
	FEC ID number of contributing federal political committee.	С					7	.,	384	4.60			
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CFO		Me	emo	Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/	R Ded	uctio	on (\$192	2.30 Bi-V	Veekly)				
s	UBTOTAL of Receipts This Page (optional)		••••••	[			9	,	1153	3.80			
т	OTAL This Period (last page this line number on	ly)						- 41-					

### SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

## Use separate schedule(s)

FOR LINE NUMBER:

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177			Use separate schedule(s)	(ch	(check only one)								
116	EMIZED RECEIPTS		for each category of the Detailed Summary Page		<b>4</b> 11a		11b	11c	12				
	y information copied from such Reports and Sta for commercial purposes, other than using the n												
$\left\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	InitedHealth Group PA	.C)									
	Full Name of Individual (Last, First, Middle Initia COSTA, JOEL, , ,	l) or Full Or	rganization Name	Date of Receipt									
	Mailing Address 775 WESTCHESTER AVENUE				05 31 Y Y Y Y Y 2021								
	City SHAKOPEE	State MN	Zip Code 55379-4557	Transaction ID : PR2575605861977           Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			<u> </u>				230.	76			
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP F	ipation (for Individual) Fin		Me	emo	tem						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1269.18	F	P/R Dedu	uctio	on (\$115	5.38 Bi-W	/eekly)				
	Full Name of Individual (Last, First, Middle Initia WIGHT, MARIA, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt						
	Mailing Address 5 ROANOKE ROAD			05 / 31 / 2021 Transaction ID : PR2575606661977									
	City SUNFISH LAKE	State MN	Zip Code 55118-4706	-					50666197 iis Period				
	FEC ID number of contributing federal political committee.	С				U			76.	_			
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Gen Mgmt	_	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 423.06	F	P/R Dedu	uctio	on (\$38.	46 Bi-We	ekly)				
	Full Name of Individual (Last, First, Middle Initia KING, SARAH, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt						
	Mailing Address 23 GARDEN CITY ROAD				05 <sup>M</sup>	1	31		ү ү 2021				
	City DARIEN	State CT	Zip Code 06820-5343						61286197 iis Period				
	FEC ID number of contributing federal political committee.	С			<u> </u>		,	,	384.	60			
	Name of Employer (for Individual) Optum Services, Inc	Occu SVP	pation (for Individual) SIs		Me	emc	tem						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	F	P/R Ded	ucti	on (\$192	2.30 Bi-W	/eekly)				
SI	JBTOTAL of Receipts This Page (optional)		•				,	9	692.	28			
т	OTAL This Period (last page this line number on	ly)	••••••	-									

#### SCHEDULE A (FEC Form 3X) DEOFIDTO

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a		11b	11c	12	<u> </u>				
Any information copied from such Reports and or for commercial purposes, other than using t												
NAME OF COMMITTEE (In Full)		duress of any political committee				IOIII SUCI	r commu					
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle I WAULTERS, SCOTT, , ,	nitial) or Full C	rganization Name	Date	of Re	ceipt							
Mailing Address 4 HEMLOCK COURT			м 05									
City MANALAPAN	State NJ	Zip Code 07726-4254					<b>2216197</b> is Period	7				
FEC ID number of contributing federal political committee.	С					7	384.6	50				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		Nemo	tem							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle I THOMPSON, BRIAN, , ,	nitial) or Full C	rganization Name	Date	of Re	ceipt							
Mailing Address 17829 63RD AVE N			05 / 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y									
City MAPLE GROVE	State MN	Zip Code 55311-4650			-		34661977	7				
FEC ID number of contributing federal political committee.	С				Amount of Each Receipt this Period 384.60							
Name of Employer (for Individual) United HealthCare Services Inc					Item							
Receipt For:	Aggregate	Year-to-Date ▼	_	-								
Primary     General       Other (specify) ▼		2115.30	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle I WILSON, STEPHEN, , ,	nitial) or Full C	rganization Name	Date	of Re	ceipt							
Mailing Address 2420 DURHAM MANOR DF			05		D D D 31		2021					
City FRANKLIN	State TN	Zip Code 37064-5266					53616197 is Period	7				
FEC ID number of contributing federal political committee.	С			384.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Vemo	tem Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2112.00	P/R De	ducti	on (\$192	2.00 Bi-W	/eekly)					
SUBTOTAL of Receipts This Page (optional)					, .	,	1153.2	20				
TOTAL This Period (last page this line number	er only)											

### SCHEDULE A (FEC Form 3X) DEOFIDTO

## Use separate schedule(s)

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12							
			13     14     15     16     1       erson for the purpose of soliciting contributions							
or for commercial purposes, other than using t	the name and a	ddress of any political committee	e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle CLARK, TERRENCE, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 8 COOPER AVENUE			05 31 Y Y Y Y Y 05 31 2021							
City EDINA	State MN	Zip Code 55436-1315	Transaction ID : PR2575636961977           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef Marketing Officer	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle CABANILLAS, MARIA, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 2411 WORDSWORTH ST			05 31 Y Y Y Y 2021							
City HOUSTON	State TX	Zip Code 77030-1833	Transaction ID : PR2575637361977 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Plan CEO	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify) ▼		2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle DAVIS, BENTON, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 9825 NORTH 53RD PLACE		Zin Onde	05 / D D / Y Y Y Y 2021							
City PARADISE VALLEY	State AZ	Zip Code 85253-1634	Transaction ID : PR2575639261977           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		23.74							
Optum Services, Inc Bu		upation (for Individual) Unit CEO	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date  239.79	P/R Deduction (\$11.87 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			792.94							
TOTAL This Period (last page this line number	er only)									

## Use separate schedule(s)

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(check only one)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a ☐ 11b ☐ 11c ☐ 12							
	y information copied from such Reports and Stater										
	for commercial purposes, other than using the nar										
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I	PAC (L	InitedHealth Group PA	.C)							
A.	Full Name of Individual (Last, First, Middle Initial) HERMAN, CRAIG, , ,	or Full Or	ganization Name	Date of Receipt							
	Mailing Address 9609 WYOMING CIRCLE			05 / D / Y Y Y Y 2021							
		State	Zip Code	Transaction ID : PR2575650261977							
	BLOOMINGTON	MN	55438-1628	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		384.60							
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) dvisory Svc	Memo Item							
	Receipt For:	ggregate `	/ear-to-Date ▼	7							
	Primary General Other (specify) ▼		2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Initial) KANE, HEATHER, , ,	or Full Or	ganization Name	Date of Receipt							
	Mailing Address 7624 N MOUNTAIN VIEW PASS			M         M         /         D         D         /         Y							
		State	Zip Code								
	PARADISE VALLEY	AZ	85253-2844	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		384.60							
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Plan CEO	Memo Item							
	Receipt For:     Age       Primary     General       Other (specify) ▼	ggregate `	/ear-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Initial)	or Full Or	ganization Name	Date of Receipt							
	Mailing Address 8675 AZURE SKY DRIVE			05 / D / Y Y Y Y 05 31 2021							
	5	State	Zip Code	Transaction ID : PR2575669361977							
	LAS VEGAS	NV	89129-2227	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		78.00							
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) led Dir/CMO	Memo Item							
	Receipt For:     And the second	ggregate `	/ear-to-Date ▼ 429.00	P/R Deduction (\$39.00 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)		•	847.20							
т	OTAL This Period (last page this line number only)	)	•								

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X       11a       11b       11c       12         13       14       15       16       17
	ny information copied from such Reports and Sta for commercial purposes, other than using the r			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group P/	AC)
Α.	Full Name of Individual (Last, First, Middle Initia LEON, LINDA, , ,	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 19 ENSIGN LANE			05 31 2021
	City MASSAPEQUA	State NY	Zip Code 11758-7839	Transaction ID : PR2575671861977 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		384.60
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Reg VP of SIs	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)
В.	Full Name of Individual (Last, First, Middle Initia BOGATYRENKO, VICTORIA, , ,	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 98 FIVE MILE RIVER ROAD			05 31 2021
	City DARIEN	State CT	Zip Code 06820-6234	Transaction ID : PR2575675461977 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.18
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item
	Receipt For:	Aggregate	Year-to-Date ▼ 633.49	P/R Deduction (\$57.59 Bi-Weekly)
с.	Full Name of Individual (Last, First, Middle Initia MITCHELL, JILL, , ,	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 11499 ASHLEY COURT			05 / D D / Y Y Y Y Y 2021
	City INVER GROVE HEIGHTS	State MN	Zip Code 55077-5251	Transaction ID : PR2575678361977 Amount of Each Receipt this Period
United HealthCare Services Inc Ntw		С		76.92
			upation (for Individual) KRegn Pres	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)
	UBTOTAL of Receipts This Page (optional)			576.70
Г	<b>OTAL</b> This Period (last page this line number or	nly)	••••••	

## Use separate schedule(s)

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			Use separate schedule(s)	(check only one)									
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	▶ 11a   11b   11c   12									
	y information copied from such Reports and Sta												
or	for commercial purposes, other than using the n	ame and a	address of any political committee	to solicit contributions from such committee.									
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	UnitedHealth Group PA	C)									
A.	Full Name of Individual (Last, First, Middle Initia SIMONSON, KELLY, , ,	l) or Full O	Drganization Name	Date of Receipt									
	Mailing Address 10982 SANCTUARY COVE CO	URT		05 31 2021									
	City LAS VEGAS	State NV	Zip Code 89135-9126	Transaction ID : PR2575682361977 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		92.30									
	Name of Employer (for Individual) Health Plan of Nevada		cupation (for Individual) Gen Mgmt	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 507.65	P/R Deduction (\$46.15 Bi-Weekly)									
B.	Full Name of Individual (Last, First, Middle Initia STIDMAN, CHRISTOPHER, , ,	l) or Full O	Drganization Name	Date of Receipt									
	Mailing Address 6504 CHEROKEE TRAIL	1		05 31 2021									
	City EDINA	State MN	Zip Code 55439-1109	Transaction ID : PR2575683861977 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		384.60									
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) P Mktg	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initia OCHIPINTI, JOSEPH, , ,	l) or Full O	Drganization Name	Date of Receipt									
	Mailing Address 20 DEAN STREET			05 / D D / Y Y Y Y 05 / 31 2021									
	City ANNAPOLIS	State MD	Zip Code 21401-2716	Transaction ID : PR2575685761977 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		384.60									
United HealthCare Services Inc HI			upation (for Individual) Plan CEO	Memo Item									
		Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)		•	861.50									
т	OTAL This Period (last page this line number or	ıly)	•										

#### SCHEDULE A (FEC Form 3X) DEAEIDTA

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12							
Any information copied from such Reports and or for commercial purposes, other than using t										
NAME OF COMMITTEE (In Full)		adress of any political committee								
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle I BURCH, TIMOTHY, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 412 TALL TIMBERS ROAD			05 / D D / Y Y Y Y 2021							
City GLASTONBURY	State CT	Zip Code 06033-3389	Transaction ID : PR2575686461977           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		38.46							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) outy Gen Counsel Mgr	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.53	P/R Deduction (\$19.23 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I KALBACHER, JEAN, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 4952 EAST DARTMOUTH S			05 / D D / Y Y Y Y Y 2021							
City MESA	State AZ	Zip Code 85205-6458	Transaction ID : PR2575688361977 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		176.92							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify) ▼		973.06	P/R Deduction (\$88.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I FINE, BRETT, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 707 STONINGTON ROAD	State	Zin Code	05 31 2021							
City SILVER SPRING	MD	Zip Code 20902-1549	Transaction ID : PR2575692861977           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
United HealthCare Services Inc S		upation (for Individual) ? Corp Strat	Memo Item							
		Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			599.98							
TOTAL This Period (last page this line number	er only)									

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		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12									
Any information copied from such Reports and or for commercial purposes, other than using			13     14     15     16     1       erson for the purpose of soliciting contributions from such committee									
NAME OF COMMITTEE (In Full)		duress of any pointear commute										
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle PROKOCKI, ELIZABETH, , ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 10223 E NOLINA TRL			05 31 / Y Y Y Y 05 31 2021									
City SCOTTSDALE	State AZ	Zip Code 85262-5172	Transaction ID : PR2575705861977 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Gen Mgmt	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. THIERY, LINDA, , ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 999 LABEAUX AVE NE			05 31 / Y Y Y Y 05 31 2021									
	State MN	Zip Code	Transaction ID : PR2575707861977									
HANOVER	IVIIN	55341-9292	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C											
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) Fin	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middle WILSON, D ELLEN, , ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 400 STUART STREET	State	Zin Oode	05 / 05 / Y Y Y Y 05 / 31 / 2021									
City BOSTON	MA	Zip Code 02116-5011	Transaction ID : PR2575708861977 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 UnitedHIth Grp	Memo Item									
Receipt For:       Aggrega         Primary       General         Other (specify)		Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			846.12									
TOTAL This Period (last page this line numb	er only)											

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		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17									
			person for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle A. VOLLRATH, MICHELLE, , ,	e Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 7647 MARKER ROAD			05 31 2021									
City SAN DIEGO	State CA	Zip Code 92130-5616	Transaction ID : PR2575719861977 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		115.38									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) S Dir Client Mngt	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 634.59	P/R Deduction (\$57.69 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. CAIN, STEVE, , ,	e Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 4 COUNTRYSIDE CT			05 / D D / Y Y Y Y 2021									
City DANVILLE	State CA	Zip Code 94506-1126	Transaction ID : PR2575724361977									
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1269.18	P/R Deduction (\$115.38 Bi-Weekly)									
Full Name of Individual (Last, First, Middle C. MCKEE, PATRICK, , ,	e Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 6500 TRANQUIL RIVER	1		05 / D D / Y Y Y Y Y 2021									
City WAUSAU	State WI	Zip Code 54401-3302	Transaction ID : PR2575726761977           Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		38.46									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 211.53	P/R Deduction (\$19.23 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optiona	)		384.60									
TOTAL This Period (last page this line num	ber only)											

### SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

## Use separate schedule(s)

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         □							
			e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	prated PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Mide GROSKLAGS, JEFFREY, , ,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 3233 TIMBERWOLF CI	RCLE		05 31 2021							
City PRIOR LAKE	State MN	Zip Code 55372-3272	Transaction ID : PR2575735761977 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		192.30							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CFO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1057.65	P/R Deduction (\$96.15 Bi-Weekly)							
Full Name of Individual (Last, First, Mide B. KRAL, JESSICA, , ,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 4358 COOLIDGE AVE			05 / 0 0 / 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9							
City SAINT LOUIS PARK	State MN	Zip Code 55424-1020	Transaction ID : PR2575736161977							
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period							
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) IT	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1923.00	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Mide MURRAY, THOMAS, , ,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 10 CIRCLE WEST			M M / D D / Y Y Y Y Y 05 31 2021							
City EDINA	State MN	Zip Code 55436-1313	Transaction ID : PR2575736561977           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment COO	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (option	nal)		769.20							
TOTAL This Period (last page this line nu	mber only)									

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17						
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle I A. LEWIS, ELIZABETH, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 675 PLEASANT VIEW ROA			05 31 / Y Y Y Y 2021						
City CHANHASSEN	State MN	Zip Code 55317-9509	Transaction ID : PR2575737461977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Actuary	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I CESARETTI, GINA, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 5020 CIRCLE DOWN	1-	L	05 / D D / Y Y Y Y Y 2021						
City GOLDEN VALLEY	State MN	Zip Code 55416-1304	Transaction ID : PR2575739061977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Strategy	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I PORTZ, THOMAS, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 2119 SHERIDAN HILLS RE	State	Zip Code	05 31 2021						
WAYZATA	MN	55391-2327	Transaction ID : PR2575744561977           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		200.00						
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP I	upation (for Individual) Fin	Memo Item						
Receipt For:       Ag         Primary       General         Other (specify)       Image: Construction of the second		Year-to-Date ▼ 1100.00	P/R Deduction (\$100.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			661.52						
TOTAL This Period (last page this line numbe	er only)								

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

## Use separate schedule(s)

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(check only one)

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			for each category of the Detailed Summary Page	×	11a 13		11b	b	11c		2 6 [	17						
	y information copied from such Reports and Stat for commercial purposes, other than using the n				or the		pose		oliciting	g conti	ributio	ons						
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	C)														
Α.	Full Name of Individual (Last, First, Middle Initia PROBST, PETER, , ,	l) or Full O	rganization Name		Date of	Re	ceip	ot										
	Mailing Address 1927 SAUNDERS AVENUE	Address 1927 SAUNDERS AVENUE						05 / 05 / Y Y Y Y Y 05 / 31 / 2021										
	City SAINT PAUL	State MN	Zip Code 55116-2016		Transaction ID : PR2575744661977 Amount of Each Receipt this Period													
	FEC ID number of contributing federal political committee.	С			inount		1 1				00.00	)						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clin Affordability		Memo Item													
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00	P/R Deduction (\$100.00 Bi-Weekly)														
в.	Full Name of Individual (Last, First, Middle Initial PINERSKI, JENNIFER, , ,	l) or Full O	rganization Name		Date of	Re	ceip	ot										
	Mailing Address 7501 HART LN						05 / Y Y Y Y 2021											
	City AUSTIN	State TX	Zip Code 78731-2237		Transaction ID : PR2575752861977 Amount of Each Receipt this Period													
	FEC ID number of contributing federal political committee.	С			76.92													
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		Memo Item													
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/I	R Dedu	uctio	on (S	\$38.46	∂ Bi-W€	ekly)								
с.	Full Name of Individual (Last, First, Middle Initial LAMOINE, DAVID, , ,	l) or Full O		Date of	Re	ceip	ot											
	Mailing Address 11945 143RD STREET APT 71				<sup>M</sup> 05	/	L	31		y 202	1							
	City LARGO	State FL	Zip Code 33774-2953						R2575									
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt the						76.92	2						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) irector Data Analytics		Me	emo	lte	em										
	Receipt For: Primary General Other (specify)	Aggregate	P/	R Ded	uctio	on (	\$38.4	6 Bi-W	eekly)									
s	UBTOTAL of Receipts This Page (optional)						,		4	3	53.84							
т	OTAL This Period (last page this line number on	ly)					-		-		-							

## Use separate schedule(s)

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		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12									
Any information copied from such Reports and or for commercial purposes, other than using t			13     14     15     16     1       erson for the purpose of soliciting contributions       a to collicit contributions from such committee									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P/	AC)									
Full Name of Individual (Last, First, Middle <b>A.</b> FULTON, RYAN, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 805 LANEWOOD LANE NO	DRTH		05 31 2021									
City PLYMOUTH	State MN	Zip Code 55447-4347	Transaction ID : PR2575756961977 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clms	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle EKLO, BENJAMIN, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 3942 CAMPELLO CURVE			05 / D / Y Y Y Y 2021									
City CHASKA	State MN	Zip Code 55318-4639	Transaction ID : PR2575761861977 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	s l											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) s Segment CFO	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼	1									
Other (specify) ▼		2115.30	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle HOWARTH, CRAIG, , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 1820 NAPOLI DRIVE			05 / D D / Y Y Y Y 2021									
City APEX	State NC	Zip Code 27502-9659	Transaction ID : PR2575762461977           Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		76.92									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Software Engineering	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional).			846.12									
TOTAL This Period (last page this line number	er only)											

## Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	✗ 11a         11b         11c         12           13         14         15         16         17						
			person for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ated PAC (I	United Health Group P	4C)						
Full Name of Individual (Last, First, Middle CUNNINGHAM, MICHAEL, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 122 MAHOGANY WAY			M M / D D / Y Y Y Y Y 05 31 2021						
City UPPER GWYNEDD	State PA	Zip Code 19446-6084	Transaction ID : PR2575767861977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) O NA Acct	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. PAIK, JESSICA, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 18 BUTTONWOOD LANE			05 / 05 / Y Y Y Y						
City RUMSON	State NJ	Zip Code 07760-1010	Transaction ID : PR2575783161977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P CInt Mgmt Svc	Memo Item						
Receipt For: Primary General Other (specify) ▼	I	Year-to-Date ▼ , 2115.30	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. SUAREZ, MARIO, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 21294 SMOKEHOUSE CT			05 31 2021						
City ASHBURN	State VA	Zip Code 20147-5316	Transaction ID : PR2575787361977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			846.12						
TOTAL This Period (last page this line numb	er only)								

## Use separate schedule(s)

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         1						
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle BERGDOLL, JENNIFER, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 523 LOS DOLCES ST			05 / D D / Y Y Y Y 2021						
City LAS VEGAS	State NV	Zip Code 89138-4559	Transaction ID : PR2575793761977           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Human Capital Partner	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. WIX, LACOSTA, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 402 JULIA STREET APARTMENT 403	State	Zin Codo	05 / 05 / 2021						
City Sta NEW ORLEANS LA		Zip Code 70130-3699	Transaction ID : PR2575800061977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. GALIAN, SANDRA, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 120 SEQUAMS LANE WES		1	05 / D D / Y Y Y Y 2021						
City WEST ISLIP	State NY	Zip Code 11795-4549	Transaction ID : PR2575803261977           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			230.76						
TOTAL This Period (last page this line number	er only)								

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171			Use separate schedule(s)	(check only one)						
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	▲ 11a ↓ 11b ↓ 11c ↓ 12						
	y information copied from such Reports and Sta									
or	for commercial purposes, other than using the r NAME OF COMMITTEE (In Full)	lame and a	address of any political committee	to solicit contributions from such committee.						
$\rangle$	UnitedHealth Group Incorporated	I PAC (l	UnitedHealth Group PA	AC)						
A.	Full Name of Individual (Last, First, Middle Initia LEVINE, CAROL, , ,	l) or Full O	Drganization Name	Date of Receipt						
	Mailing Address 9100 LARKSPUR LANE			05 / Y Y Y Y 2021						
	City EDEN PRAIRIE	State MN	Zip Code 55347-2004	Transaction ID : PR2575803361977 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		384.60						
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) P Cust Strategy	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)						
в.	Full Name of Individual (Last, First, Middle Initia HJERPE, ADAM, , ,	l) or Full O	Drganization Name	Date of Receipt						
	Mailing Address 13932 UTAH AVE S			05 / <sup>y</sup> y y y y y 2021						
	City SAVAGE	State MN	Zip Code 55378-2159	Transaction ID : PR2575806261977           Amount of Each Receipt this Period           384.60						
	FEC ID number of contributing federal political committee.	С								
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) P Gen Mgmt	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 2115.30	P/R Deduction (\$192.30 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Initia RUSSELL, LAURIE, , ,	l) or Full O	Drganization Name	Date of Receipt						
	Mailing Address 3108 SONIA DRIVE	-		05 / 0 D / Y Y Y Y Y 05 31 2021						
	City LAS VEGAS	State NV	Zip Code 89107-3246	Transaction ID : PR2575812161977           Amount of Each Receipt this Period						
				78.00						
			cupation (for Individual) /t Affs Dir	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 429.00	P/R Deduction (\$39.00 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)			847.20						
т	OTAL This Period (last page this line number or	ıly)								

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17						
			erson for the purpose of soliciting contributions to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middl A. LATINO, DAYNA, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 126 RAINBOW TRAIL			05 / Y Y Y Y 2021						
City VERNON	State CT	Zip Code 06066-5950	Transaction ID : PR2575813261977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef of Staff	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middl B. SCHENEMAN, STEPHEN, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 428 8TH ST			05 / D D / Y Y Y Y Y 2021						
City HUNTINGTON BEACH	State CA	Zip Code 92648-4629	Transaction ID : PR2575813461977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clin Affordability	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middl C. SHAPIRO, DAVID, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 5215 MORGAN AVENUE			05 / D D / Y Y Y Y 2021						
City MINNEAPOLIS	State MN	Zip Code 55419-1026	Transaction ID : PR2575814261977           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Seg Chief Cnsmr Off	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optiona	l)		538.44						
TOTAL This Period (last page this line num	ber only)								

### SCHEDULE A (FEC Form 3X) - . . . . . . .

## Use separate schedule(s)

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17						
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle I A	nitial) or Full C	Organization Name	Date of Receipt						
Mailing Address 7512 NE 34TH UNIT 2C			05 31 / Y Y Y Y Y						
City VANCOUVER	State WA	Zip Code 98665-0709	Transaction ID : PR2575818161977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) k Regn Pres	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I NESTOR, MICHAEL, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 8 HUMBLE LANE			05 31 Y Y Y Y Y 2021						
City WESTON	State CT	Zip Code 06883-2509	Transaction ID : PR2575821761977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		77.00						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ng Dir Optuml Cons	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.50	P/R Deduction (\$38.50 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I MCNATT, RICHARD, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 1120 KENSINGTON COUR		Zin Code	05 / D D / Y Y Y Y Y 05 31 2021						
City ALPHARETTA	State GA	Zip Code 30022-6274	Transaction ID : PR2575824961977           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) SIs Ops & Reg Field SIs	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			538.52						
TOTAL This Period (last page this line numbe	r only)								

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		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17						
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)	/ -	,,							
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle I BRADLEY, JOEL, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 360 TWIN OAKS CT			05 31 Y Y Y Y Y						
City KINGSTON SPRINGS	State TN	Zip Code 37082-8906	Transaction ID : PR2575825861977           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		36.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) /led Dir	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 203.06	P/R Deduction (\$18.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I <b>B.</b> KAUFMAN, PHILIP, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1580 BOHNS POINT ROAD			05 / 05 / 2021						
City WAYZATA	State MN	Zip Code 55391-9309	Transaction ID : PR2575829861977           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) s Segment COO	Memo Item						
Receipt For: Primary General Other (specify) ▼	1	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I C. SCHMITT, MARIE, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 3045 25TH AVENUE			05 31 / Y Y Y Y						
City SAN FRANCISCO	State CA	Zip Code 94132-1541	Transaction ID : PR2575830061977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP CInt Relationship	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			498.44						
TOTAL This Period (last page this line number	er only)								

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		Use separate schedule(s) (		(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a		11b	11c	12	17			
Any information copied from such Reports and or for commercial purposes, other than using th											
NAME OF COMMITTEE (In Full)						5401					
UnitedHealth Group Incorporat	ted PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle In HELLER, ALYSIA, , ,	nitial) or Full C	rganization Name	Date	of Re	eceipt						
Mailing Address 22331 W 44TH TER			M 05		31	/ Y	y y 2021	Ŷ			
City SHAWNEE	State KS	Zip Code 66226-2511				PR25758 eceipt th	3 <b>3056197</b> is Period	7			
FEC ID number of contributing federal political committee.	С						76.9	2			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		Memo	o Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R De	educti	on (\$38.	46 Bi-We	ekly)				
Full Name of Individual (Last, First, Middle II HENRY, STEPHANIE, , ,	nitial) or Full C	rganization Name	Date	of Re	eceipt						
Mailing Address 8970 VINCENT CIRCLE			05		31	/ Y	y y 2021	Y			
City BLOOMINGTON	State MN	Zip Code 55431-1900					31061977	,			
		C			Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С				76.92						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Director Technology		Memo	o Item						
Receipt For:	Aggregate	Aggregate Year-to-Date V			7						
Other (specify) ▼		423.06	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle In JERDE, MARY, , ,	nitial) or Full C	rganization Name	Date	of Re	eceipt						
Mailing Address 9324 N AERIE CLIFF			05		31		2021				
City FOUNTAIN HILLS	State AZ	Zip Code 85268-6358				PR25758 eceipt th	33746197 is Period	7			
FEC ID number of contributing federal political committee.	С				y .	9	115.3	8			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops		Memo	o Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 634.59	P/R De	educti	ion (\$57.	.69 Bi-We	ekly)				
SUBTOTAL of Receipts This Page (optional)					,	,	269.2	2			
TOTAL This Period (last page this line number	r only)										

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		Use separate schedule(s)	(check only one)						
I EWILLED KEGEIP13		for each category of the Detailed Summary Page	★         11a         11b         11c         12           13         14         15         16         17						
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle <b>A.</b> BOROCH, BLAIR, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 800 BELFRY DRIVE			05 31 2021						
City BLUE BELL	State PA	Zip Code 19422-1210	Transaction ID : PR2575849961977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		80.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Health Plan Operations	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 440.00	P/R Deduction (\$40.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle GOLDEN, WILLIAM, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 106 SOUND COURT			M M / D D / Y Y Y Y 05 31 2021						
City NORTHPORT	State NY	Zip Code 11768-3527	Transaction ID : PR2575859361977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CEO	Memo Item						
Receipt For:	Aggregate	Year-to-Date V							
Other (specify)		2115.30	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle COTTINGTON, NYLE BRENT,		rganization Name	Date of Receipt						
Mailing Address 15050 47TH STREET NE			05 / D D / Y Y Y Y 2021						
City SAINT MICHAEL	State MN	Zip Code 55376-1613	Transaction ID : PR2575865361977           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Acctng	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			849.20						
TOTAL This Period (last page this line numb	er only)								

## Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12						
Any information copied from such Reports and									
or for commercial purposes, other than using th	le name and a								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle Ir A. ADAMO, BRENT, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 3109 E DESERT LN			05 31 2021						
City PHOENIX	State AZ	Zip Code 85042-7198	Transaction ID : PR2575867861977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Dir Software Engineering	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle Ir B. ROSS, CHRISTY, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 211 JIM CANNON RD			05 31 2021						
City VAN ALSTYNE	State TX	Zip Code 75495-2803	Transaction ID : PR2575873361977						
FEC ID number of contributing	_	75495-2605	Amount of Each Receipt this Period						
federal political committee.	С								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Ops	Memo Item						
Receipt For:	Aggregate	Year-to-Date <b>V</b>							
Primary General Other (specify) ▼		423.50	P/R Deduction (\$38.50 Bi-Weekly)						
Full Name of Individual (Last, First, Middle Ir C. PEZHMAN, PAYMAN, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 2825 MAPLEWOOD CIRCL	EE		05 / D D / Y Y Y Y 05 31 2021						
City WAYZATA	State MN	Zip Code 55391-2633	Transaction ID : PR2575883561977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment Gen Counsel	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			538.52						
TOTAL This Period (last page this line number	r only)								

## Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>≭</b> 11a 11b 11c 12						
			13     14     15     16     17       erson for the purpose of soliciting contributions       to collicit contributions						
NAME OF COMMITTEE (In Full)	ng the name and a	ddress of any political committee	e to solicit contributions from such committee.						
UnitedHealth Group Incorpo	prated PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Mid SCHMUKER, ERIN, , ,	dle Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 2575 TALL TIMBER CC	OURT SE		05 31 Y Y Y Y Y 2021						
City GRAND RAPIDS	State MI	Zip Code 49546-6787	Transaction ID : PR2575906661977           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		38.46						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.53	P/R Deduction (\$19.23 Bi-Weekly)						
Full Name of Individual (Last, First, Mid B. MARGHERIO, MICHAEL, , ,	dle Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 6412 JEFFERSON STR			Mom         /         D         D         /         Y						
City KANSAS CITY	State MO	Zip Code 64113-1542							
		04113-1342	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs Acct Mgt	Memo Item						
Receipt For:	Aggregate	Year-to-Date <b>V</b>							
Other (specify) ▼		423.06	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Mid C. CZAJKA, DAVID, , ,	dle Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 8590 BIG MANGROVE	DRIVE		05 / D D / Y Y Y Y 05 31 2021						
City FORT MYERS	State FL	Zip Code 33908-7694	Transaction ID : PR2575918661977           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		38.46						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) nan Capital Partner Mgr	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 211.53	P/R Deduction (\$19.23 Bi-Weekly)						
SUBTOTAL of Receipts This Page (option	nal)		153.84						
TOTAL This Period (last page this line nu	mber only)								

## Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12						
			13     14     15     16     17       erson for the purpose of soliciting contributions       to collicit contributions from such committee						
	the name and a	ddress of any political committe	e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle OLSON, TRUDY, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 7208 WOODDALE AVE S	OUTH		05 31 / Y Y Y Y Y 05 31 2021						
City EDINA	State MN	Zip Code 55435-4156	Transaction ID : PR2575918761977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Human Capital Svcs	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. MCGOLDRICK, CHRISTOPHER		rganization Name	Date of Receipt						
Mailing Address 48 MOUNTAIN TERRACE			M       M						
City	State CT	Zip Code							
WEST HARTFORD		06107-1533							
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP SIs & Bus Dev	Memo Item						
Receipt For:	Aggregate	Year-to-Date <b>V</b>							
Other (specify) ▼		2115.30	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle MATTERA, RICHARD, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 640 LOCUST HILLS DRIV			05 / D D / Y Y Y Y Y 05 31 2021						
City WAYZATA	State MN	Zip Code 55391-1973	Transaction ID : PR2575938461977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 6 Chief Dev Officer	P/R Deduction (\$192.30 Bi-Weekly)						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30							
SUBTOTAL of Receipts This Page (optional	)		846.12						
TOTAL This Period (last page this line numl	per only)								

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			Use separate schedule(s)		(check only one)							
			for each category of the Detailed Summary Page	<b>X</b> 11a		11b	11c	12	□ <sup> </sup>			
Any informati	on copied from such Reports and Stater prcial purposes, other than using the n	ements ma ame and ad	y not be sold or used by any pe ddress of any political committee	rson for th to solicit c	e purj contrib	14 pose of outions f	15 soliciting from such	contribut	17 ions ee.			
	COMMITTEE (In Full)											
> United	Health Group Incorporated	PAC (L	InitedHealth Group PA	C)								
	of Individual (Last, First, Middle Initia FELICITY, , ,	) or Full Or	rganization Name	Date	of Re	eceipt						
Mailing Ac	dress 3330 EDMUND BLVD			05		31	) / Y	2021	Y			
City		State	Zip Code	Trar	nsacti	ion ID :	PR25759	4336197	7			
MINNEAF	POLIS	MN	55406-2348	Amou	int of	Each R	Receipt th	is Period				
	umber of contributing litical committee.	С				-		192.3	30			
Name of Employer (for Individual) United HealthCare Services Inc			ipation (for Individual) Fax		Memo	tem						
Receipt Fo		Aggregate	P/R Deduction (\$96.15 Bi-Weekly)									
	of Individual (Last, First, Middle Initia IUE, JEANINE, , ,	) or Full Or	rganization Name	Date	of Re	eceipt						
	dress 164 MORNINGSIDE DRIVE					05 / D D / Y Y Y Y 2021						
	City MANDEVILLE	State     Zip Code       LA     70448-7571			Transaction ID : PR2575959261977							
					Amount of Each Receipt this Period							
	umber of contributing litical committee.				76.92							
	Employer (for Individual) althCare Services Inc	Occu VP 1	ישך	Memo	ltem							
Receipt Fo		Aggregate										
Prim Othe	ary General er (specify) ▼		423.06	P/R Deduction (\$38.46 Bi-Weekly)								
	of Individual (Last, First, Middle Initial WAYNE, , ,	) or Full Or	rganization Name	Date	of Re	eceipt						
Mailing Ac	dress 1158 DESERT ROCK DRIVE			M 05		31	) / Y	y y 2021	Y			
City REXBUR	G	State ID	Zip Code 83440-3697			-	PR25759 Receipt th	96186197 is Period	7			
	umber of contributing litical committee.	С			_	,	. ,	76.9	92			
			ipation (for Individual) Sales	Memo Item								
Receipt Fo		Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)								
SUBTOTAL	of Receipts This Page (optional)							346.1	4			
TOTAL This	Period (last page this line number on	ly)		Γ.		-						

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IT.	EMIZED RECEIPTS		Use separate schedule(s)	(cł	neck only	y or	ıe)						
11			for each category of the Detailed Summary Page		<b>×</b> 11a		11b	11c	12				
Ar	y information copied from such Reports and S	itatements ma	av not be sold or used by any p	erson	13 for the	puri	14 Dose of	15 soliciting	16 contribu	l 17 tions			
	for commercial purposes, other than using the												
$\setminus$	NAME OF COMMITTEE (In Full)												
	UnitedHealth Group Incorporate	ed PAC (l	United Health Group PA	(C)									
V	Full Name of Individual (Last, First, Middle Ini	tial) or Full O	rganization Name										
Α.	SALVO, GIANCARLO, , ,			Date of Receipt									
	Mailing Address 1027 SW 149 LANE				05 31 2021								
	City	State	Zip Code		Trans	acti		PR2575	96496197	7			
	SUNRISE	FL	33326-1957		Amount	of	Each F	Receipt th	is Period				
	FEC ID number of contributing	С							76.	92			
	federal political committee.	U			<u></u>	-	7		1 1 4				
	Name of Employer (for Individual)		upation (for Individual)		M	emc	Item						
	United HealthCare Services Inc	GP	Reg Sales Dir										
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	_   ,		ti		.46 Bi-We					
	Other (specify) ▼		423.06		F/R Deu	ucu	၁။ (၃၁၀	.40 DI-VV	eekiy)				
				<u> </u>									
R	Full Name of Individual (Last, First, Middle Ini LEMKE, HEATHER, , ,	tial) or Full O	rganization Name		Date of	Re	ceint						
υ.	Mailing Address 4135 TRILLIUM LANE EAST					/		) / Y	Y Y	Y			
					05		31		2021				
	City	State	Zip Code 55364-7730						96586197	7			
	MINNETRISTA	MN	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С											
	Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	Memo Item										
	Receipt For:	Aggregate	Year-to-Date ▼										
	Primary General		E 20 77	1   6	P/R Ded	uctio	on (\$48.	.07 Bi-We	ekly)				
	Other (specify) <b>v</b>		, 528.77										
C.	Full Name of Individual (Last, First, Middle Ini FRANK, DANIEL, , ,	tial) or Full O	rganization Name		Date of	Re	ceipt						
	Mailing Address 1373 PRAIRIE MEADOW RD				M M	/	D . [	) / Ү	Y Y	Y			
	<u></u>	Ctoto	Zin Codo		05		31		2021	_			
	City MINNETRISTA	State MN	Zip Code 55359-6701	$\vdash$					97046197 iis Period	/			
	FEC ID number of contributing						Luoni						
	federal political committee.	C					y	y	384.	50			
	Name of Employer (for Individual)	Occi	upation (for Individual)		M	emo	Item						
	Optum Services, Inc		f Clin Off										
	Receipt For:	Aggregate	Year-to-Date 🔻										
	Other (specify)		2115.30	11	P/R Ded	ucti	on (\$19	2.30 Bi-V	Veekly)				
					_	-							
s	UBTOTAL of Receipts This Page (optional)			•		-	9	J J	557.	56			
т	OTAL This Period (last page this line number	only)	<b>_</b>										

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

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

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			Detailed Summary Page	<b>X</b> 11a 11b 11c 12										
			Detailed Summary Page											
An or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any puddress of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.										
$\langle \rangle$	NAME OF COMMITTEE (In Full)													
$\geq$	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group PA	AC)										
۱.	Full Name of Individual (Last, First, Middle Initi SIEBERT, GREGORY, , ,	ial) or Full O	Organization Name	Date of Receipt										
	Mailing Address 46 VIA BELLEZA			05 31 2021										
	City	State	Zip Code	Transaction ID : PR2575979661977										
	SAN CLEMENTE	CA	92673-6910	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		200.00										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item										
	Receipt For:		Year-to-Date ▼											
	Primary General Other (specify) ▼	Aggregate	1100.00	P/R Deduction (\$100.00 Bi-Weekly)										
		L												
	Full Name of Individual (Last, First, Middle Initi RICHARDS, ALISON, , ,	ial) or Full O	organization Name	Date of Receipt										
	Mailing Address 257 WEST GRANTLEY			05 31 2021										
	City	State	Zip Code	Transaction ID : PR2575987961977										
	ELMHURST	IL	60126-2237	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		384.60										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 3 Unit COO	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)										
	Full Name of Individual (Last, First, Middle Initi SCHULTZ, STACY, , ,	ial) or Full O	Prganization Name	Date of Receipt										
	Mailing Address 4012 S XERXES AVENUE			05 31 2021										
	City	State	Zip Code	Transaction ID : PR2575990961977										
	MINNEAPOLIS	MN	55410-1146	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		76.92										
	Name of Employer (for Individual)	000	upation (for Individual)	Memo Item										
	United HealthCare Services Inc		Segment Gen Counsel	-										
	Receipt For:	1	Year-to-Date ▼											
	Primary General Other (specify)		423.06	P/R Deduction (\$38.46 Bi-Weekly)										
s	JBTOTAL of Receipts This Page (optional)													

### Use separate schedule(s)

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IТ			Use separate schedule(s)	(check only one)									
			for each category of the Detailed Summary Page		<b>X</b> 11a		11b	11c 15		12 16	17		
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	tements maname and a	ay not be sold or used by ar address of any political comm	ny perso nittee to	on for the	purpo	ose of s	soliciting	g cont	tributio	ons		
$\setminus$	NAME OF COMMITTEE (In Full)												
	UnitedHealth Group Incorporated			PAC	;)								
Α.	Full Name of Individual (Last, First, Middle Initia CHAMBUNDABONGSE, KUNJORN, , ,	l) or Full C	Drganization Name	Date of Receipt									
	Mailing Address 9730 46TH STREET				05 31 2021 Transaction ID : PR2576000261977								
	City WATERTOWN	State MN	Zip Code 55388-9333				PR2576						
	FEC ID number of contributing federal political committee.	С							3	384.60	)		
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) Technology		M	emo I	ltem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2115.30		P/R Ded	luctior	า (\$192	.30 Bi-V	Veekly	()			
В.	Full Name of Individual (Last, First, Middle Initia BRIGGS, MARC, , ,	l) or Full C	Drganization Name		Date of Receipt								
	Mailing Address 13534 TUSCALEE HILL CIR					05 / 31 / 2021 Transaction ID : PR2576001661977							
	City	State	Zip Code										
	DRAPER	UT	84020-5653		Amoun	t of E	ach Re	eceipt th	nis Pe	riod			
	FEC ID number of contributing federal political committee.	C			384.60								
	Name of Employer (for Individual) United HealthCare Services Inc	Occ Hith		Memo Item									
	Receipt For:	Aggregate	e Year-to-Date ▼										
	Primary General Other (specify) ▼		, 2115.30		P/R Deduction (\$192.30 Bi-Weekly)								
<u>с</u> .	Full Name of Individual (Last, First, Middle Initia SONERHOLM, KIMBERLY, , ,	ll) or Full C	Drganization Name		Date o	f Rece	eipt						
	Mailing Address 3380 SHELBORNE WOODS PA	ARKWAY			05 <sup>M</sup>	1	D D D 31	/ Y	y 202		ſ		
	City CARMEL	State IN	Zip Code					PR2576					
			46032-8101		Amoun	t of E	ach Re	eceipt th	nis Pe	riod			
	FEC ID number of contributing federal political committee.	С			<u> </u>	,		, <u>,</u>	Ş	384.60	)		
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) n Plan CEO		M	emo	ltem						
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)			►		. ,		,	11	153.80	)		
Т	OTAL This Period (last page this line number or	וy)		▶		-,							

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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			Detailed Summary Page	×	11a		11	1b 4	11c	12	17						
	y information copied from such Reports and Stater for commercial purposes, other than using the nar				for the		rpos	se of	soliciting	g contribu	tions						
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I	PAC (I	UnitedHealth Group P	AC)													
A.	Full Name of Individual (Last, First, Middle Initial) BYRNES, CHRISTOPHER, , ,	or Full C	Drganization Name		Date of Receipt												
	Mailing Address 3920 GLENWOOD STREET				05 31 / Y Y Y Y 05 31 2021												
	5	State MN	Zip Code 55804-1403		Transaction ID : PR2576042861977												
					Amount of Each Receipt this Period 384.60												
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) P Ops		N	/lemo	o It	em									
	Receipt For:     Age       Primary     General       Other (specify) ▼	ggregate	Year-to-Date ▼ 2115.30	] <sup>P</sup>	/R De	ducti	ion	(\$192	2.30 Bi-V	Veekly)							
в.	Full Name of Individual (Last, First, Middle Initial) KANDALAFT, KEVIN, , ,	or Full C	Drganization Name		Date d	of Re	ece	ipt									
	Mailing Address 4189 WINDSOR POINT PLACE				05 31 2021												
	City EL DORADO HILLS	State CA	Zip Code 95762-3797			04366197 his Perioc											
	FEC ID number of contributing federal political committee.	0			Memo Item						60						
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) h Plan CEO														
	Receipt For:     Age       Primary     General       Other (specify) ▼	ggregate	Year-to-Date ▼ 2115.30	<b>]</b> P.	P/R Deduction (\$192.30 Bi-Weekly)												
с.	Full Name of Individual (Last, First, Middle Initial) STONE, LAURA, , ,	or Full C	Drganization Name		Date of Receipt												
	Mailing Address 1485 COUNTY RD 286				<sup>™</sup> 05	И /	′	31	/ Y	2021	Y						
	City COLLINSVILLE	State TX	Zip Code 76233							0451619							
		C			Amour		r Ea		eceipt tr	nis Perioc 76	92						
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Ntwk Contrctng		N	/lemo	o It	em									
	Receipt For:     Age       Primary     General       Other (specify)	ggregate	Year-to-Date ▼ 423.06	-to-Date ▼ 423.06					P/R Deduction (\$38.46 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)									846.	12						
Т	OTAL This Period (last page this line number only	)					-										

# Use separate schedule(s)

FOR LINE NUMBER:

PAGE 113 OF

		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17								
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle NELSON, KRISTA, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 3320 SHAVERS LAKE RO	AD		05 31 Y Y Y Y Y								
City WAYZATA	State MN	Zip Code 55391-3341	Transaction ID : PR2576047961977 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		192.30								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef Growth & Exp Officer	Memo Item								
Receipt For: Primary General Other (specify) $ earrow$	Aggregate	Year-to-Date ▼ 1057.65	P/R Deduction (\$96.15 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. MONICAL, KENT, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 9795 E PIEDRA DRIVE			05 / D D / Y Y Y Y Y 2021								
City	State AZ	Zip Code	Transaction ID : PR2576051361977								
SCOTTSDALE	AZ	85255-9231	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P, Medicare STARS	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. HUANG, JAMES, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 6838 IDLEWOOD WAY			05 31 2021								
City EDEN PRAIRIE	State MN	Zip Code 55346-3519	Transaction ID : PR2576059961977           Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.92								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional).			653.82								
TOTAL This Period (last page this line number	er only)										

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		Use separate schedule(s)	(check only one)								
ILEWIZED KEGEIPIS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17								
Any information copied from such Rep or for commercial purposes, other that	oorts and Statements ma n using the name and a	ay not be sold or used by any p ddress of any political committe	person for the purpose of soliciting contributions be to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)	orporated PAC (l	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First A. REX, JOHN, , ,	, Middle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 503 HARRINGTO	N ROAD		05 31 2021								
City WAYZATA	State MN	Zip Code 55391-1512	Transaction ID : PR2576060061977           Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) G CFO	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First B. MCEWAN, JOSHUA, , ,	, Middle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 4916 ALDRICH A	1		05 / 05 / Y Y Y Y 05 2021								
City MINNEAPOLIS	State MN	Zip Code 55419-5353	Transaction ID : PR2576085761977 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Tax	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First GRANT, AMY, , ,	, Middle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 34 FAIRLAWN DR		Zin Oode	M M / D D / Y Y Y Y 05 / 31 / 2021								
City WALLINGFORD	State CT	Zip Code 06492-2588	Transaction ID : PR2576089061977 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		76.92								
Name of Employer (for Individual) United HealthCare Services Inc	Occu VP C	upation (for Individual) Dps	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)								
SUBTOTAL of Receipts This Page (	optional)		846.12								
TOTAL This Period (last page this lin	ne number only)										

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171			Use separate schedule(s)	(check	only	one)						
11			for each category of the Detailed Summary Page	<b>X</b> 1	1a 3	11b	11c		Г	17		
	y information copied from such Reports and Sta for commercial purposes, other than using the n			erson for	the p	urpose o	f soliciting	g contr	ributio	ns		
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	(C)								
A.	Full Name of Individual (Last, First, Middle Initia DUDA, MICHAEL, , ,	l) or Full Oi	rganization Name	Da	Date of Receipt							
	Mailing Address 5208 RICHWOOD DRIVE			M M / D D / Y Y Y Y 05 31 2021								
	City EDINA	State MN	Zip Code 55436-2322	Transaction ID : PR2576089961 Amount of Each Receipt this Period						-		
	FEC ID number of contributing federal political committee.	С			_		-	1	92.30			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Corp Dev		Mer	no Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1057.65	P/R	Dedu	ction (\$96	6.15 Bi-We	ekly)				
B.	Full Name of Individual (Last, First, Middle Initia FREIBERG, BRIAN, , ,	l) or Full Oi	rganization Name	Date of Receipt								
	Mailing Address 9605 LEXINGTON CT			05 / 31 / 2021 Transaction ID : PR2576093661977								
	City	State WI	Zip Code						-			
	WESTON		54476-6730	Am	iount (	of Each	Receipt th	is Per	iod	_		
	FEC ID number of contributing federal political committee.	С	Memo Item									
	Name of Employer (for Individual) United HealthCare Services Inc	Occi VP (										
	Receipt For:	Aggregate	Year-to-Date 🔻	-								
	Other (specify) ▼		846.12	P/R	Deduc	tion (\$76	6.92 Bi-We	ekly)				
с.	Full Name of Individual (Last, First, Middle Initia PALMER, BRYAN, , ,	l) or Full Oi	rganization Name	Da	te of I	Receipt						
	Mailing Address 346 COUNTRY CLUB DRIVE			M	05 <sup>™</sup>	/ D 31		202 <i>°</i>		1		
	City TEQUESTA	State FL	Zip Code 33469-1944				: PR2576 Receipt th		-	_		
	FEC ID number of contributing federal political committee.	С					, iocolpt u		84.60			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Growth Off		Mei	mo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R	Dedu	ction (\$1	92.30 Bi-V	Veekly	)			
s	UBTOTAL of Receipts This Page (optional)		••••••			, .	. ,	7.	30.74			
т	OTAL This Period (last page this line number or	ly)	••••••						-			

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a		11b	11c	12				
Any information copied from such Reports and s or for commercial purposes, other than using the											
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorporat	ed PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle In A. LESUEUR, REHN, , ,	itial) or Full C	rganization Name	Date	Date of Receipt							
Mailing Address 254 JASPERS CIR S			05 31 / Y Y Y Y 05 31 2021								
City CHASKA	State MN	Zip Code 55318-3210		9896197 is Period	7						
FEC ID number of contributing federal political committee.	C						76.9	92			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev		Mem	o Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R D	educt	ion (\$38.	.46 Bi-We	eekly)				
Full Name of Individual (Last, First, Middle In DIAMOND, TIFFANY, , ,	itial) or Full C	rganization Name	Date	of R	eceipt						
Mailing Address 1801 SPANISH TRAIL			05 / 31 / 2021 Transaction ID : PR2576105561977								
City DELRAY BEACH	State FL	Zip Code 33483-4958						7			
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 76.92 Memo Item								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle In C. MELNICK, BRADLEY, , ,	itial) or Full C	rganization Name	Date	of R	eceipt						
Mailing Address 5185 KELSEY TERRACE			0		31	) / Y	y 2021	Y			
City EDINA	State MN	Zip Code 55436-1174					<b>11196197</b> is Period	7			
FEC ID number of contributing federal political committee.	С				<b>y</b>	. ,	384.6	60			
Name of Employer (for Individual) Optum Services, Inc	Occ VP 0	upation (for Individual) Ops		Mem	o Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)					,	,	538.4	4			
TOTAL This Period (last page this line number	only)				-	40					

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PAGE 117 OF

		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17								
Any information copied from such Reports and s or for commercial purposes, other than using the			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorporat	ed PAC (l	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle In A. WEDIN, JEFF, , ,	itial) or Full O	rganization Name	Date of Receipt								
Mailing Address 115 EAGLE COVE			05 31 2021								
City	State	Zip Code	Transaction ID : PR2576122361977								
MADISON	MS	39110-6629	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		38.46								
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item								
United HealthCare Services Inc	Hlth	Plan CEO									
Receipt For:	Aggregate	Year-to-Date V									
Primary General		044.50	P/R Deduction (\$19.23 Bi-Weekly)								
Other (specify)		211.53									
Full Name of Individual (Last, First, Middle In B. ANASTASIO, LAURA, , ,	itial) or Full O	rganization Name	Date of Receipt								
Mailing Address 33 BRIARWOOD DR			M         M         /         D         D         /         Y								
City	State	Zip Code	Transaction ID : PR2576136961977								
NORTH BRANFORD	СТ	06471-1459	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		46.14								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General			P/R Deduction (\$23.07 Bi-Weekly)								
Other (specify)		253.77									
Full Name of Individual (Last, First, Middle In C. LIRETTE, KARL, , ,	itial) or Full O	rganization Name	Date of Receipt								
Mailing Address 9 WEST WOODLAWN DRIV	E										
<b>O</b> it.	04-1-	Zie Oada									
City DESTREHAN	State LA	Zip Code 70047-2535	Transaction ID : PR2576138961977								
			Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		76.92								
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item								
United HealthCare Services Inc	Hlth	Plan CEO									
Receipt For:	Aggregate	Year-to-Date <b>V</b>									
Other (specify)		423.06	P/R Deduction (\$38.46 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			161.52								
TOTAL This Period (last page this line number	only)										

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12							
			13     14     15     16     17       erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (I	JnitedHealth Group P	4C)							
Full Name of Individual (Last, First, Mide GROSSMAN, MICHAEL, , ,	lle Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 15725 56TH AVE N			05 31 / Y Y Y Y 05 31 2021							
City PLYMOUTH	State MN	Zip Code 55446-2984	Transaction ID : PR2576145861977 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) sion COO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Mide <b>B.</b> FRIDNER, JOHN, , ,	lle Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 782 PENFIELD DR			05 / D D / Y Y Y Y Y 2021							
CAPOL STREAM	State	Zip Code	Transaction ID : PR2576147561977							
	12	60188-4738	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		78.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) NA VP SIs/Gen	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 429.00	P/R Deduction (\$39.00 Bi-Weekly)							
Full Name of Individual (Last, First, Mido C. SCOTT, GARLAND, , ,	lle Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 8018 PERLETTE COUR	RT		05 / D D / Y Y Y Y 2021							
City KERNERSVILLE	State NC	Zip Code 27284-9957	Transaction ID : PR2576151061977 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		38.46							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 211.53	P/R Deduction (\$19.23 Bi-Weekly)							
SUBTOTAL of Receipts This Page (option	al)		501.06							
TOTAL This Period (last page this line nu	mber only)									

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		Use separate schedule(s)	(check	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11		11b	11c	12					
Any information copied from such Repor				the pu								
or for commercial purposes, other than to NAME OF COMMITTEE (In Full)	using the name and a	ddress of any political committee	e to solicit	contr	ibutions	from suc	n committ	ee.				
UnitedHealth Group Incor	porated PAC (l	JnitedHealth Group P/	AC)									
Full Name of Individual (Last, First, N LENTZ, MICHEL, , ,	1iddle Initial) or Full O	rganization Name	Date	Date of Receipt								
Mailing Address 4004 FOREST GLEN	I DRIVE		05 / D D / Y Y Y Y 05 31 2021									
City GREENSBURG	State PA	Zip Code 15601-9062	Transaction ID : PR2576153561977 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C			_	-9-		115.3	38				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir		Men	no Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 634.59	P/R I	Deduc	tion (\$5	7.69 Bi-W	eekly)					
Full Name of Individual (Last, First, M B. WARN, ROBERT, , ,	liddle Initial) or Full O	rganization Name	Date	e of F	Receipt							
Mailing Address 2079 AUSTRIAN PIN			05 / 31 / 2021 Transaction ID : PR2576157861977									
City MINNETONKA	State	Zip Code 55305-2429										
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period  38.46  Memo Item									
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) Fin										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.53	P/R Deduction (\$19.23 Bi-Weekly)									
Full Name of Individual (Last, First, M C. PAUNOVICH, VUKASIN, ,		rganization Name	Date	e of F	Receipt							
Mailing Address 1209 KEITH RD				05 <sup>™</sup>	/ D 3		2021	Y				
City WAKE FOREST	State NC	Zip Code 27587-7301					30676197					
FEC ID number of contributing federal political committee.	C			_	y 1	9	384.	30				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Seg CIO		Men	no Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (opt	ional)				5	. ,	538.4	44				
TOTAL This Period (last page this line	number only)				-							

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171			Use separate schedule(s)	(ch	eck only	/ or	ne)	L				
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page		<b>1</b> 1a		11b	11c	12			
	y information copied from such Reports and Sta for commercial purposes, other than using the n											
$\overline{\langle}$	NAME OF COMMITTEE (In Full)			10 00								
$\rangle$	UnitedHealth Group Incorporated	PAC (L	InitedHealth Group PA	C)								
Α.	Full Name of Individual (Last, First, Middle Initia BENSON, JEAN, , ,	l) or Full Or	ganization Name		Date of Receipt							
	Mailing Address 14951 HIGHLAND COURT NE	1		05 31 Y Y Y Y Y 05 05 31 2021								
	City PRIOR LAKE	State MN	Zip Code 55372-4109						31096197 is Period	7		
	FEC ID number of contributing federal political committee.	С			<u> </u>			y-	384.	60		
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) Group CFO		Me	emo	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	F	P/R Dedu	uctio	on (\$192	2.30 Bi-W	/eekly)			
в.	Full Name of Individual (Last, First, Middle Initia COMBS MORGAN, LAURIE, , ,	l) or Full Or	ganization Name		Date of	Re	eceipt					
	Mailing Address 513 RIVERVIEW DRIVE	1		05 / 05 / Y Y Y Y Y 2021								
	City FRANKLIN	State TN	Zip Code 37064-5512						<b>1986197</b>	7		
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period								
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Dir N	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.20	P/R Deduction (\$19.20 Bi-Weekly)								
C.	Full Name of Individual (Last, First, Middle Initia LONG, PAUL, , ,	l) or Full Or	ganization Name		Date of	Re	eceipt					
	Mailing Address 12352 PRINCETON AVE				05	1	31		2021			
	City EDEN PRAIRIE	State MN	Zip Code 55347-1936						73496197 is Period	7		
	FEC ID number of contributing federal political committee.	С			<u> </u>		, .	,	384.	60		
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) en Mgmt		Me	emo	tem					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)		•••••				, .	. ,	807.	60		
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### SCHEDULE A (FEC Form 3X) COLIDITO

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IT.	EMIZED RECEIPTS Use separate schedule(s for each category of the			check only	one)									
			for each category of the Detailed Summary Page		<b>X</b> 11a	11b	11c	12						
	y information copied from such Reports and Sta													
or	for commercial purposes, other than using the r	name and a	address of any political com	mittee to	solicit con	tributions fr	om such	n committe	90.					
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	UnitedHealth Group	o PAC	)									
A.	Full Name of Individual (Last, First, Middle Initia EGELAND, DANIEL, , ,	ll) or Full O	Drganization Name		Date of	Receipt								
	Mailing Address 2659 E LAKE OF THE ISLES P	KWY			05 31 2021									
	City MINNEAPOLIS	State MN	Zip Code 55408-1052			action ID : I of Each Re			7					
	FEC ID number of contributing federal political committee.	С				4	-	384.6	60					
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus Dev		Me	mo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	)	P/R Dedu	uction (\$192	30 Bi-W	/eekly)						
B.	Full Name of Individual (Last, First, Middle Initia ASNER, BARTLEY, , ,	l) or Full O	Drganization Name		Date of	Receipt								
	Mailing Address 25 OFFSHORE				05 / 31 / 2021 Transaction ID : PR2578819461977									
	City NEWPORT BEACH	State CA	Zip Code 92657-2162		of Each Re			/						
	FEC ID number of contributing federal political committee.	С						384.6	60					
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) Strategy		Me	mo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 2115.3(	0	P/R Dedu	iction (\$192	.30 Bi-W	/eekly)						
C.	Full Name of Individual (Last, First, Middle Initia DUFFEY, KRISTY, , ,	ll) or Full O	Drganization Name		Date of	Receipt								
	Mailing Address 42095 N 109TH PLACE				м м 05	/ D D D 31	/ Y	ү ү 2021	Y					
	City SCOTTSDALE	State AZ	Zip Code 85262-3293			of Each Re			7					
	FEC ID number of contributing federal political committee.	С				y	, <u>,</u>	384.6	60					
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) ef Clin Off		Me	emo Item								
	Receipt For: Primary General Other (specify)	Year-to-Date ▼ 2115.30		P/R Dedu	uction (\$192	2.30 Bi-W	/eekly)							
s	UBTOTAL of Receipts This Page (optional)			►		, .		1153.8	80					
т	OTAL This Period (last page this line number or	וy)		🕨										

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

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	y information copied from such Reports and Stater for commercial purposes, other than using the nan															
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (U	Jnit	edHealth Group PA	C)											
Α.	Full Name of Individual (Last, First, Middle Initial) CIAVOLA, LAURA, , ,	or Full Or	rgan	ization Name	[	Date of Receipt										
	Mailing Address 6958 DELOACH COURT				05 31 2021 Transaction ID : PR2578824361977											
	,	State TX		Zip Code 75034-7436							<b>R25788</b> eipt thi			_		
	FEC ID number of contributing federal political committee.	0						7			-	3	84.60	)		
	Name of Employer (for Individual) Optum Services, Inc	Occu SVP	•	on (for Individual) S		M	emo	o It	em							
	Receipt For:     Ag       Primary     General       Other (specify) ▼	ggregate \	Year	-to-Date ▼ 2115.30	P	/R Ded	uctio	on	(\$192	2.3	0 Bi-W	eekly)	I			
B.	Full Name of Individual (Last, First, Middle Initial) BUSBEE, NATHANAEL, , ,	or Full Or	rgan	ization Name		Date of	Re	ece	eipt							
	Mailing Address 611 ORPINGTON RD				05 / D D / Y Y Y Y Y 2021											
	City BALTIMORE	State MD		Zip Code 21229-2128							<b>25788</b> eipt thi					
	FEC ID number of contributing federal political committee.	0						-			7		76.92	2		
	Name of Employer (for Individual) United HealthCare Services Inc		•	on (for Individual) Process		M	emo	o It	em							
	Receipt For:       Ag         Primary       General         Other (specify) ▼	ggregate \	Year	-to-Date ▼ 423.06	P/	R Ded	uctio	on	(\$38.	46	Bi-We	ekly)				
с.	Full Name of Individual (Last, First, Middle Initial) MILLER, TRACI, , ,	or Full Or	rgan	ization Name	(	Date of	Re	ece	eipt							
	Mailing Address 729 PINE TRAIL					05 <sup>M</sup>	J.	l	D 31			2021		]		
	City ARNOLD	State MD		Zip Code 21012-1628							R25788 eipt thi					
	FEC ID number of contributing federal political committee.	0						9			9	1	15.38	;		
	Name of Employer (for Individual) Optum Services, Inc			on (for Individual) Clin Ops		М	emc	o li	tem							
	Receipt For:     Ag       Primary     General       Other (specify)	ggregate \	Year	-to-Date ▼ 634.59	P	/R Ded	ucti	ion	(\$57.	.69	) Bi-We	ekly)				
s	UBTOTAL of Receipts This Page (optional)			•••••				9		l	9	57	76.90			
Т	OTAL This Period (last page this line number only)	)						,		l	-		-			

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		Use separate schedule(s)	(check only one)							
I EIVIIZED KEGEIPIS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and S or for commercial purposes, other than using the			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	NC)							
Full Name of Individual (Last, First, Middle In A. FARMER, RACHEL, , ,	itial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1846 SOUTH COLUMBINE S	STREET		05 31 2021							
City BATON ROUGE	State LA	Zip Code 70808-5227	Transaction ID : PR2595208361977           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		115.38							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 634.59	P/R Deduction (\$57.69 Bi-Weekly)							
Full Name of Individual (Last, First, Middle In B. SNYDER, MARY, , ,	itial) or Full O	rganization Name	Date of Receipt							
Mailing Address 156 HIGH WINDS DRIVE			05 31 2021							
City YARMOUTH	State ME	Zip Code 04096-5958	Transaction ID : PR2595229361977 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle In C. HAREWOOD, JUNIOR, , ,	itial) or Full O	rganization Name	Date of Receipt							
Mailing Address 223 MOUNT VERNON COVE	=		05 / D D / Y Y Y Y Y 2021							
City SANDY SPRINGS	State GA	Zip Code 30328-4130	Transaction ID : PR2595231561977           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			884.58							
TOTAL This Period (last page this line number	only)									

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		Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17										
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions										
NAME OF COMMITTEE (In Full)													
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)										
Full Name of Individual (Last, First, Middle   SCOTT, WESTON, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 16333 VANCE JACKSON APT 1215			05 31 / Y Y Y Y 05 31 2021										
City	State	Zip Code	Transaction ID : PR2601125361977										
SAN ANTONIO	TX	78257-5090	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		61.54										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 1 Dir	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 338.47	P/R Deduction (\$30.77 Bi-Weekly)										
Full Name of Individual (Last, First, Middle I SHORT, MARIANNE, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 2215 SUMMIT AVENUE			05 31 / Y Y Y Y Y										
	State MN	Zip Code	Transaction ID : PR2601133561977										
SAINT PAUL	IVIIN	55105-1002	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		384.60										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Gen Counsel	Memo Item										
Receipt For:	Aggregate	Year-to-Date 🔻											
Other (specify) ▼		2115.30	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle I C. WILLIAMS, DAVID, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 10 SOUTHERN OAKS DRI	VE		05 31 Y Y Y Y Y 2021										
City CLINTON	State MS	Zip Code 39056-9772	Transaction ID : PR2601151161977           Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		76.92										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Dir/CMO	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)			523.06										
TOTAL This Period (last page this line number	er only)												

# Use separate schedule(s)

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		Use separate schedule(s)	(check only one)										
		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         1'										
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions										
NAME OF COMMITTEE (In Full)													
UnitedHealth Group Incorporat	ted PAC (I	JnitedHealth Group PA	NC)										
Full Name of Individual (Last, First, Middle Ir FRIAS, LORRAINE, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 855 ST CLAIR AVENUE #1			05 / D D / Y Y Y Y Y 2021										
City SAINT PAUL	State MN	Zip Code 55105-3283	Transaction ID : PR2601159061977 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		76.92										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Dir Tech Proj-Prgm Mgmt	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Middle Ir B. KIMES, CARRIE, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 1917 SW 27TH STREET	1		05 31 / Y Y Y Y 2021										
City TOPEKA	State KS	Zip Code 66611-1643	Transaction ID : PR2601162061977 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		38.46										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.53	P/R Deduction (\$19.23 Bi-Weekly)										
Full Name of Individual (Last, First, Middle Ir C. PERERA, SUSAN, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 1201 UNITY AVE N	1		05 / D / Y Y Y Y 2021										
City GOLDEN VALLEY	State MN	Zip Code 55422-4735	Transaction ID : PR2601168861977           Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		76.92										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) uty Gen Counsel	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)			192.30										
TOTAL This Period (last page this line number	r only)												

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	★         11a         11b         11c         12           13         14         15         16         17
or	y information copied from such Reports and State for commercial purposes, other than using the na			rson for the purpose of soliciting contributions
$\left. \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	JnitedHealth Group PA	C)
Α.	Full Name of Individual (Last, First, Middle Initial) RODRIGUEZ, ROGER, , ,	or Full C	rganization Name	Date of Receipt
	Mailing Address 4825 DAVIS ROAD	State	Zip Code	05 / 31 / 2021 Transaction ID : PR2601176861977
	МІАМІ	FL	33143-6141	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		384.60
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) I Plan CEO	Memo Item
	Receipt For:     A       Primary     General       Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)
B.	Full Name of Individual (Last, First, Middle Initial) MCBEATH, ROBERT, , ,	or Full C	organization Name	Date of Receipt
	Mailing Address 2537 RED ARROW DRIVE	1		05 / D D / Y Y Y Y 2021
	City LAS VEGAS	State NV	Zip Code 89135-1628	Transaction ID : PR2605708961977 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		384.60
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) O Med Grp Physn	Memo Item
	Receipt For:       µ         Primary       General         Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)
C.	Full Name of Individual (Last, First, Middle Initial) ANDERSON HUTCHINS, LEIGH, , ,		organization Name	Date of Receipt
	Mailing Address 16786 RAINY VALE AVE			05 / D D / Y Y Y Y Y 2021
	City RIVERSIDE	State CA	Zip Code 92503-6535	Transaction ID : PR2605717861977 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		76.92
	Name of Employer (for Individual) Primecare Medical Network, Inc		upation (for Individual) ) Med Grp Non Physn	Memo Item
	Receipt For:     Primary     General       Other (specify)	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)			846.12
т	OTAL This Period (last page this line number only	y)	▶	· · · · · · · · · · · ·

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		Use separate schedule(s)	(cheo	(check only one)									
			for each category of the Detailed Summary Page	×	11a 13		11b	11c 15	12	Г	17		
	y information copied from such Reports and Sta for commercial purposes, other than using the r				r the p	ourp	ose of s	soliciting	, contri	ibutio	ns		
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	NC)									
A.	Full Name of Individual (Last, First, Middle Initia DAVIS, KELLY, , ,	al) or Full O	rganization Name	D	Date of Receipt								
	Mailing Address 2285 N POWHATAN ST			05 31 2021									
	City ARLINGTON	State VA	Zip Code 22205-2113	Transaction ID : PR2605734261977 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С					,		19	92.30			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) t Affs Dir		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1057.65	P/F	R Dedu	ıctio	n (\$96.1	15 Bi-We	ekly)				
в.	Full Name of Individual (Last, First, Middle Initia LEIGH-PITSTICK, EMILY, , ,	al) or Full O	rganization Name	D	ate of	Rec	ceipt						
	Mailing Address 17307 97TH DR SE			05 / 31 / 2021 Transaction ID : PR2605735261977									
	City SNOHOMISH	State WA	Zip Code 98296-8168							-			
	FEC ID number of contributing federal political committee.	C			mount			eceipt th		76.92			
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Ntwk Contrctng	[	Me	mo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/F	R Dedu	ictio	n (\$38.4	6 Bi-We	ekly)				
c.	Full Name of Individual (Last, First, Middle Initia MALONE, TRACY, , ,	al) or Full O	rganization Name	D	ate of	Rec	ceipt						
	Mailing Address 900 S 22ND ST				<sup>M</sup> 05	/	D D D 31	/ Y	2021		1		
	City ARLINGTON	State VA	Zip Code 22202-2625				-	PR26057		-	_		
	FEC ID number of contributing federal political committee.	С					y		38	84.60			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) External Affs		Me	emo	Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/F	R Dedu	uctio	ın (\$192	.30 Bi-W	/eekly)	)			
s	UBTOTAL of Receipts This Page (optional)						9		65	53.82			
т	OTAL This Period (last page this line number or	חly)	••••••				,	- 41-		-			

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	Use separate schedule(s)	(cheo	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12					
Any information copied from such Reports a													
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	g the name and a	ddress of any political committee	e to soli	cit con	ITTID	utions t	rom suci	n commiti	ee.				
	rated PAC (I	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middl A. PETERSON, ERIC, , ,	e Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 1080 WILLIAMSBURG L	N		05 / 01 D / 01 P Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y										
City ZIONSVILLE	State IN	Zip Code 46077-1158						75046197 nis Period	7				
FEC ID number of contributing federal political committee.	С					,		76.	92				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Mktg		Me	emo	Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/f	≀ Dedu	uctic	on (\$38.	.46 Bi-We	eekly)					
Full Name of Individual (Last, First, Middl B. FICKER, MARK, , ,	e Initial) or Full C	rganization Name	D	ate of	Re	ceipt							
Mailing Address 945 MINERS RIDGE CO				<sup>M</sup> 05	/	D D D D 31	) / Y	ү ү 2021	Y				
City INCLINE VILLAGE	State NV	Zip Code 89451-8801						30676197	7				
FEC ID number of contributing federal political committee.	С			nount	OI		receipt in	nis Period 76.	92				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Ops	1	Me	emo	Item							
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 423.06	P/F	≀ Dedu	ıctio	ın (\$38.	46 Bi-We	eekly)					
Full Name of Individual (Last, First, Middl C. WELDON, BRIAN, , ,	e Initial) or Full C	rganization Name	D	ate of	Re	ceipt							
Mailing Address 1155 MOERS DRIVE				<sup>M</sup> 05	/	31	) / Y	y y 2021	Y				
City CHASKA	State MN	Zip Code 55318-4629						05556197 his Period	7				
FEC ID number of contributing federal political committee.	С		ļ			,	. ,	76.	92				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		Me	emo	ltem							
Receipt For: Primary General Other (specify)	Year-to-Date ▼ 423.06	P/I	२ Dedu	uctio	on (\$38	.46 Bi-We	eekly)						
SUBTOTAL of Receipts This Page (optiona	l)					,	. ,	230.	76				
TOTAL This Period (last page this line num	ber only)												

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	Use separate schedule(s)	(check o	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a		11b	11c	12						
Any information copied from such Reports and													
or for commercial purposes, other than using th	he name and a	ddress of any political committee	e to solicit c	ontric	outions t	rom sucr		ee.					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ted PAC (I	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle In LANDO, LISA, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 60 PINEAPPLE STREET APT 3J				05 31 Y Y Y Y Y 05 31 2021									
City BROOKLYN	State NY	Zip Code 11201-6839	Transaction ID : PR2608059561977 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С					-	76.9	92					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		Memo	o Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R De	educti	ion (\$38.	46 Bi-We	ekly)						
Full Name of Individual (Last, First, Middle In B. SAVOIE, DANA, , ,	nitial) or Full C	rganization Name	Date	of Re	eceipt								
Mailing Address 8756 STONEFIELD LN			05 / D D / Y Y Y Y 2021										
City CHANHASSEN	State MN	Zip Code 55317-4713					<b>0956197</b> is Period	7					
FEC ID number of contributing federal political committee.	С						153.8	34					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		Memo	o Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 846.12	P/R De	ducti	on (\$76.	92 Bi-We	ekly)						
Full Name of Individual (Last, First, Middle In C. BODELL, LESLIE, , ,	nitial) or Full C	rganization Name	Date	of Re	eceipt								
Mailing Address 18710 34TH AVENUE NOR			M 05	M /	31	JL	2021						
City PLYMOUTH	State MN	Zip Code 55447-1000			-		31136197 is Period	7					
FEC ID number of contributing federal political committee.	С				,	,	384.6	50					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Ops		Memo	o Item								
Receipt For: Primary General Other (specify)	Year-to-Date ▼ 2115.30	P/R De	educti	ion (\$19:	2.30 Bi-W	/eekly)							
SUBTOTAL of Receipts This Page (optional)					,	,	615.3	36					
TOTAL This Period (last page this line numbe	r only)					-							

### SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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			Use separate schedule(s)	(che	eck only	y or	ne)	L		-			
		for each category of the Detailed Summary Page	×	11a 13		11b	11c 15		2	17			
	information copied from such Reports and Sta r commercial purposes, other than using the r				or the		pose of	soliciting	, cont	ributio	ons		
	AME OF COMMITTEE (In Full) JnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	NC)									
	ull Name of Individual (Last, First, Middle Initia WRIGHT, NORMAN, , ,	ll) or Full O	rganization Name	[	Date of Receipt								
Μ	ailing Address 11347 E LA JUNTA ROAD				05 31 2021								
	ity SCOTTSDALE	State AZ	Zip Code 85255-5791					PR2609 eceipt th					
	EC ID number of contributing deral political committee.	С							3	384.60	0		
	ame of Employer (for Individual) ptum Services, Inc		upation (for Individual) of Customer Officer		Me	emo	ltem						
R	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P	/R Ded	uctio	on (\$192	2.30 Bi-W	/eekly	')			
в. <u>-</u>	ull Name of Individual (Last, First, Middle Initia PATEL, KETAN, , ,	l) or Full O	rganization Name		Date of	Re	ceipt						
_	Mailing Address 1811 PITCAIRN DRIVE		State Zin Code				31	/ Y	202	1	Y		
	ITY COSTA MESA	State CA	Zip Code 92626-4702					PR2612					
F	EC ID number of contributing deral political committee.	С			Amount	. 01		eceipt th	is re	76.92	2		
	ame of Employer (for Individual) ptum Services, Inc		upation (for Individual) Pharm Ops		Me	emo	tem						
R	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/	R Dedu	uctio	on (\$38.4	46 Bi-We	ekly)				
	ull Name of Individual (Last, First, Middle Initia STEVENS, J, , ,	l) or Full O	rganization Name	[	Date of	Re	ceipt						
_	ailing Address 93 CONSERVATION ROAD				<sup>M</sup> 05	/	D D D 31	JL	202				
	ity SUFFIELD	State CT	Zip Code 06078-2442					PR2612 eceipt th					
	EC ID number of contributing deral political committee.	С					y .	 J	_	76.92	2		
О	ame of Employer (for Individual) Iptum Services, Inc		upation (for Individual) ctor Technology		M	emc	tem						
Receipt For:       Aggregate         Primary       General         Other (specify)			Year-to-Date ▼ 423.06	P	/R Ded	ucti	on (\$38.4	46 Bi-We	eekly)				
SU	<b>3TOTAL</b> of Receipts This Page (optional)						,	. ,	Ę	538.44	4		
то	TAL This Period (last page this line number or	וy)								-			

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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T			Use separate schedule(s)	(ch	eck only	/ on	e)							
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		11a		11b	11c	12	, —	    - 1			
	ny information copied from such Reports and Sta for commercial purposes, other than using the r													
	NAME OF COMMITTEE (In Full)		duress of any pointed committee					oni Suci						
$\rangle$	UnitedHealth Group Incorporated	d PAC (L	JnitedHealth Group P	AC)										
Α.	Full Name of Individual (Last, First, Middle Initia BAKER, MICHAEL, , ,	al) or Full Oi	rganization Name		Date of Receipt									
	Mailing Address 2383 HIGHOVER TRAIL				05 31 2021									
	City CHANHASSEN	State MN	Zip Code 55317-4744		Transaction ID : PR2612530561977 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С					7	- 7	384	4.60				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment COO		Me	emo	ltem							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	] F	P/R Ded	uctic	on (\$192	2.30 Bi-W	/eekly)					
B.	Full Name of Individual (Last, First, Middle Initia SHILTS, MATTHEW, , ,	al) or Full Oi	rganization Name		Date of	Re	ceipt							
	Mailing Address 10 WOODLAND ROAD				05 / 31 / 2021 Transaction ID : PR2612533261977									
	City EDINA	State MN	Zip Code 55424-1631	-										
	FEC ID number of contributing federal political committee.	С						eceipt th		u 2.30				
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ef Tech Off		Me	emo	Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 507.65	] F	P/R Dedu	uctio	on (\$46. <sup>-</sup>	15 Bi-We	ekly)					
C.	Full Name of Individual (Last, First, Middle Initia HASSLINGER, CHRISTOPHER, ,		rganization Name		Date of	Re	ceipt							
	Mailing Address 23261 WOODLAND RIDGE DR		Zin Oode		05 <sup>M</sup>	′	31		2021					
	City LAKEVILLE	State MN	Zip Code 55044-7293					PR2613: eceipt th						
	FEC ID number of contributing federal political committee.	С					7	,		4.60				
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus Dev		M	emo	Item							
Receipt For:       Aggreg         Primary       General         Other (specify)			Year-to-Date ▼ 2115.30	]   『	P/R Ded	uctic	on (\$192	2.30 Bi-W	/eekly)					
s	UBTOTAL of Receipts This Page (optional)			•			7		86 <sup>-</sup>	1.50				
т	OTAL This Period (last page this line number or	nly)		<b>→</b>			,			-				

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ITEMIZED RECEIPTS Use separate schedule(s for each category of the				(check only one)								
			for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17								
An or	y information copied from such Reports and Sta for commercial purposes, other than using the r	tements mana and a	ay not be sold or used by any p ddress of any political committee	erson for the purpose of soliciting contributions								
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	AC)								
A.	Full Name of Individual (Last, First, Middle Initia KREJCI, ANDREW, , ,	ll) or Full O	rganization Name	Date of Receipt								
	Mailing Address 19880 LAKEVIEW AVENUE	-1		05 / D / Y Y Y Y 2021								
	City EXCELSIOR	State MN	Zip Code 55331-9352	Transaction ID : PR2614310761977           Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		56.16								
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Comm	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 308.88	P/R Deduction (\$28.08 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Initia BURKHOLDER, CHAD, , ,	l) or Full O	rganization Name	Date of Receipt								
	Mailing Address 2423 DUBONNET DRIVE											
	City MACUNGIE	State PA	Zip Code 18062-8857	Transaction ID : PR2615073461977 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		384.60								
	Name of Employer (for Individual) Optum Services, Inc	Occi VP	upation (for Individual) Ops	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initia RHODES, JOHN, , ,	l) or Full O	rganization Name	Date of Receipt								
	Mailing Address 12439 GLENLIVET LOWLAND			05 / D D / Y Y Y Y 2021								
	City LAS VEGAS	State NV	Zip Code 89138-6244	Transaction ID : PR2615075161977 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		38.46								
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Dir/CMO	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 211.53	P/R Deduction (\$19.23 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)			479.22								
т	OTAL This Period (last page this line number or	ıly)										

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	-	Use separate schedule(s)	(check	only c	one)			
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11		11b	11c	12	
Any information copied from such Reports and				he pu				
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and a	ddress of any political committee	e to solicit	contri	DUTIONS	from sucr	n committ	ee.
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group PA	AC)					
Full Name of Individual (Last, First, Middle BARELA, ERNEST, , ,	Initial) or Full O	rganization Name	Date	e of R	leceipt			
Mailing Address 12059 VIBRATO COURT				)5	/ 31	D / Y	y y 2021	Y
City LAS VEGAS	State NV	Zip Code 89138-4654					08086197 iis Period	7
FEC ID number of contributing federal political committee.	C				-gr. 1	1 41-	384.6	60
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		Merr	io Item			
Receipt For: Primary General Other (specify) ▼	Year-to-Date ▼ 2115.30	P/R [	Deduc	tion (\$19	2.30 Bi-W	/eekly)		
Full Name of Individual (Last, First, Middle B. SOLOMON, RANDALL, , ,	Initial) or Full O	rganization Name	Date	e of R	leceipt			
Mailing Address 760 HAIGHT STREET				)5	/ D 1		y y 2021	Y
City SAN FRANCISCO	State CA	Zip Code 94117-3317					67156197	7
FEC ID number of contributing federal political committee.	С	94117-3317		ount o	T Each F	Receipt th	iis Period 76.9	92
Name of Employer (for Individual)		upation (for Individual)	- 6	Mem	io Item	4	40	
Optum Services, Inc	Sr E	Behvrl Med Dir						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R [	Deduct	ion (\$38	.46 Bi-We	ekly)	
Full Name of Individual (Last, First, Middle C. BIRNBAUM, MICHAEL, , ,	Initial) or Full O	rganization Name	Date	e of R	eceipt			
Mailing Address 55 DEAN STREET				)5	/ 31		үүү 2021	Y
City BROOKLYN	State NY	Zip Code 11201-6245					67166197 iis Period	7
FEC ID number of contributing federal political committee.	С				y	.,	384.6	60
Name of Employer (for Individual) United HealthCare Services Inc	United HealthCare Services Inc VP HIthca				no Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R I	Deduc	tion (\$19	02.30 Bi-W	Veekly)	
SUBTOTAL of Receipts This Page (optional)					, .	. ,	846.1	2
TOTAL This Period (last page this line numb	er only)							

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

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

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	EWIZED RECEIPTS		Detailed Summary Page	×	11a		11b		11c	12		
					13		14		15	16	17	
	y information copied from such Reports and State for commercial purposes, other than using the na											
$\left. \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	(C)		_	_					
A.	Full Name of Individual (Last, First, Middle Initial) KNUTSON, DIANE, , ,	or Full O	rganization Name		Date of	Re	ceipt	t				
	Mailing Address 5321 EMPIRE LANE NORTH				м м 05	/		31	/ Y	2021	Y	
	City PLYMOUTH	State MN	Zip Code 55446-3723	A	Transaction ID : PR2615923961977           Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С					<b>T</b>		-	76.	92	
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Ntwk Pricing		Me	∍mo	lten	n				
_	Receipt For:     A       Primary     General       Other (specify) ▼	Year-to-Date ▼ 423.06	P/	ſR Dedu	uctic	on (\$	38.4	6 Bi-We	eekly)			
В.	Full Name of Individual (Last, First, Middle Initial) OSTRANDER, ROBERT, , ,	or Full O	rganization Name		Date of	Re	ceipt	t				
	Mailing Address 18 BARTON COURT		м м 05	/		31	/ Y	2021	Y			
	City PLEASANT HILL	State CA	Zip Code 94523-2029							96066197 nis Period	7	
	FEC ID number of contributing federal political committee.	С					7	_	-	76.	92	
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Comm		Me	əmo	) Iten	n				
_	Receipt For:     A       Primary     General       Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/	R Dedu	uctic	on (\$	38.4	6 Bi-We	eekly)		
с.	Full Name of Individual (Last, First, Middle Initial)	or Full O	rganization Name		Date of	Re	ceipt	t	_			
	Mailing Address 518 13TH ST	0+-+		][	05 -	/		31	/ Y	2021		
	City HUNTINGTON BEACH	State CA	Zip Code 92648-4038	A						36566197 nis Period	1	
	FEC ID number of contributing federal political committee.				_	, ten	_	9	76.	92		
	Name of Employer (for Individual) Optum Services, Inc	n Services, Inc VP Gen Mgmt										
	Receipt For:     A       Primary     General       Other (specify)	Aggregate	Year-to-Date ▼ 423.06	P/	/R Dedu	uctio	on (\$	38.4	6 Bi-We	eekly)		
s	UBTOTAL of Receipts This Page (optional)						,		y	230.	76	
Т	OTAL This Period (last page this line number only	y)	•				<b>,</b>		-			

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check o	nly o	ne)			
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Any information copied from such Reports and or for commercial purposes, other than using			erson for th		pose of			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)					
<ul> <li>Full Name of Individual (Last, First, Middle</li> <li>A. DOMB, JULIET, , ,</li> </ul>	Initial) or Full C	rganization Name	Date	of Re	eceipt			
Mailing Address 28 MARLBOROUGH ST APT 1			05		31	/ Y	y y 2021	Y
City BOSTON	State MA	Zip Code 02116-2133					98876197 is Period	7
FEC ID number of contributing federal political committee.	С						192.3	30
Name of Employer (for Individual) Optum Services, Inc					o Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1057.65	P/R De	educti	ion (\$96.	15 Bi-We	eekly)	
Full Name of Individual (Last, First, Middle B. BROWN, ROGER, , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt			
Mailing Address 512 EAST STATE AVE			M 05		31	/ Y	y y 2021	Y
City PHOENIX	State AZ	Zip Code 85020-4940					<b>5796197</b> is Period	7
FEC ID number of contributing federal political committee.	С						384.0	60
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev		Memo	o Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R De	educti	on (\$192	2.30 Bi-W	'eekly)	
Full Name of Individual (Last, First, Middle OLSON, MARK, , ,	Initial) or Full C	rganization Name	Date	of Re	eceipt			
Mailing Address 13454 E JEWELL AVE	State	Zin Code	05	5	31		2021	
City AURORA	CO	Zip Code 80012-5465					56166197 is Period	1
FEC ID number of contributing federal political committee.	С				<b>,</b>	9	76.9	92
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) /P SIs Acct Mgmt		Mem	o Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 423.06	P/R De	educt	ion (\$38.	.46 Bi-W€	eekly)	
SUBTOTAL of Receipts This Page (optional)					, .		653.8	32
TOTAL This Period (last page this line numb	er only)							

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

FOR LINE NUMBER:

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TIEWIZED RECEIPTS for each category of the Detailed Summary Page					×	11a 13		11b 14		11c 15	12	17	
	y information copied from such Reports and State for commercial purposes, other than using the na					or the		oose		oliciting	contribu	tions	
$\left. \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHe	alth Group PA	C)								
Α.	Full Name of Individual (Last, First, Middle Initial) MOURAS, DENNIS, , ,	or Full O	rganization N	lame	C	ate of	Re	ceipt					
	Mailing Address 6376 MARSH ROAD					<sup>M</sup> 05	/	D 3		/ Y	y y 2021	Y	
	City	State MI	Zip Cod								0296197	7	
	COTTRELLVILLE		48039	-1314	A	mount	of	Each	Re	ceipt th	is Period		
	FEC ID number of contributing federal political committee.	С						,		-7	384.	60	
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for I Plan CEO	ndividual)		Me	emo	Item					
	Receipt For:		Year-to-Date	•	_								
	Primary General Other (specify) ▼	2115.30	P/	R Dedi	uctio	on (\$1	92.:	30 Bi-W	/eekly)				
В.	Full Name of Individual (Last, First, Middle Initial)	or Full O	rganization N	lame		ate of	Re	ceipt					
	Mailing Address 1136 BATTERY AVENUE			м м 05	/	3	D 51	/ Y	y y 2021	Y			
	City	State	Zip Cod	е		Trans	acti	on ID	: P	R26244	4266197	7	
	BALTIMORE	MD	21230-	4112	A	mount	of	Each	Re	ceipt th	is Period		
	FEC ID number of contributing federal political committee.	С			384.60								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for I Govt Affs	ndividual)		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date	▼ 2115.30	   P/I	R Dedu	uctic	on (\$1	92.3	30 Bi-W	eekly)		
С.	Full Name of Individual (Last, First, Middle Initial) STALLWOOD, GREGG, , ,	or Full O	rganization N	lame		ate of	Re	ceipt					
	Mailing Address 4842 JUNIPER DR					<sup>M</sup> 05	/	D 3	D 81	/ Y	2021	Y	
	City	State	Zip Cod			Trans	acti	ion ID	) : P	R26254	19906197	7	
	PALM HARBOR	FL	34685-	2688	A	mount	of	Each	Re	ceipt th	is Period		
	FEC ID number of contributing federal political committee.	С						,		y	384.	60	
	Name of Employer (for Individual) United HealthCare Services Inc	ndividual)		Me	emo	Item							
	Receipt For:     //       Primary     General       Other (specify)	Aggregate	Year-to-Date	2115.30	P/	R Ded	uctio	on (\$1	192.	30 Bi-W	/eekly)		
s	UBTOTAL of Receipts This Page (optional)			••••••	[						1153.8	30	
т	OTAL This Period (last page this line number only	y)		·····	Ē					-			

#### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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			Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17										
	y information copied from such Reports and State for commercial purposes, other than using the na			erson for the purpose of soliciting contributions										
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (	UnitedHealth Group PA	.C)										
Α.	Full Name of Individual (Last, First, Middle Initial) COLLETTE, CHRISTOPHER, , ,	or Full C	Drganization Name	Date of Receipt										
	Mailing Address 4776 MANITOU ROAD			05 31 Y Y Y Y Y 05 31 2021										
	City	State	Zip Code	Transaction ID : PR2625499561977										
	EXCELSIOR	MN	55331-9400	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		384.60										
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) P UnitedHlth Grp	Memo Item										
	Receipt For:	Aggregate	Year-to-Date V	_										
	Primary General Other (specify) ▼	<u></u>	2115.30	P/R Deduction (\$192.30 Bi-Weekly)										
в.	Full Name of Individual (Last, First, Middle Initial) RELLER, TAMI, , ,	or Full C	Drganization Name	Date of Receipt										
	Mailing Address 5120 MIRROR LAKES DRIVE	05 / D / Y Y Y Y 2021												
	City	State	Zip Code	Transaction ID : PR2625501961977										
	EDINA	MN	55436-1342	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		384.60										
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) t Grp Chief Mktg Off	Memo Item										
	Receipt For:     A       Primary     General       Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initial) SMITH, LISA, , ,	or Full C	Drganization Name	Date of Receipt										
	Mailing Address 5040 INTERLACHEN BLUFF			05 31 / Y Y Y Y 05 31 2021										
	City	State	Zip Code	Transaction ID : PR2625503761977										
	EDINA	MN	55436-1360	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		384.60										
	Name of Employer (for Individual) Optum Services, Inc	cupation (for Individual) Segment CMO	Memo Item											
	Receipt For:     //       Primary     General       Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			1153.80										
т	OTAL This Period (last page this line number only	y)												

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

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				or each category of the Detailed Summary Page	×	11a 13		-	11b 14		11c	12	17
	y information copied from such Reports and Stater for commercial purposes, other than using the name					or the		rpo	ose		oliciting	g contrib	utions
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (l	Jni	tedHealth Group PA	C)								
Α.	Full Name of Individual (Last, First, Middle Initial) LAWTON, MICHAEL, , ,	or Full O	)rgar	nization Name		Date o	of Re	ec	eipt				
	Mailing Address 2232 AUTUMN COVE CIRCLE					<sup>M</sup> 05	И /	/		<sup>р</sup> 31	/ Y	ү ү 2021	Ŷ
	5	State FL		Zip Code		Tran	sact	tio	on IE	) : P	R2625	5054619	77
	FLEMING ISLAND	ΓL.		32003-3230	A	mour	nt of	Ε	Each	Re	ceipt th	nis Perio	d
	FEC ID number of contributing federal political committee.	0						-			-	384	4.60
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) n CEO		N	/lemo	0	Item	ı			
	Receipt For:			r-to-Date ▼	_								
	Primary General Other (specify) ▼	ggregate	100	2115.30	P/	R De	ducti	ior	n (\$′	192.	30 Bi-V	Veekly)	
В.	Full Name of Individual (Last, First, Middle Initial) CARIGAN, BARBARA, , ,	or Full O	rgar	nization Name		Date o	of Re	ec	eipt				
	Mailing Address 5589 W TECO AVENUE			05 31 2021									
	City	State		Zip Code		Tran	sact	tio	n IC	) : P	R2625	5346619	77
	LAS VEGAS	NV		89118-2805	A	mour	nt of	E	Each	Re	ceipt th	nis Perio	d
	FEC ID number of contributing federal political committee.							-,			-	153	3.84
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) Capital Partner Mgr		N	/lemo	0	Item	ı			
	Receipt For:     Age       Primary     General       Other (specify) ▼	ggregate	Yea	r-to-Date ▼ 846.12	P/I	R Dec	ducti	ior	า (\$7	76.9	2 Bi-We	eekly)	
С.	Full Name of Individual (Last, First, Middle Initial)	or Full O	rgar	nization Name		Date o	of Re	ec	eipt				
	Mailing Address 3710 P STREET					<sup>M</sup> 05	И /	/		<sup>р</sup> 31	/ Y	y y 2021	Y
	5	State	_	Zip Code		Tran	sact	tio	on IE	) : F	PR2626	8865619	77
	SACRAMENTO	CA		95816-6733	A	mour	nt of	Ē	Each	Re	ceipt th	nis Perio	d
	FEC ID number of contributing federal political committee.	C				_		,			,	384	4.60
	Name of Employer (for Individual) United HealthCare Services Inc	ion (for Individual) Affs		N	/lemo	0	Item	ו					
	Receipt For:     Age       Primary     General       Other (specify)	ggregate	Yea	r-to-Date ▼ 2115.30	P/	′R De	ducti	tior	n (\$	192.	.30 Bi-V	Veekly)	
s	UBTOTAL of Receipts This Page (optional)											923	3.04
т	OTAL This Period (last page this line number only)	)		·····	Ī								

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		Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using t			
NAME OF COMMITTEE (In Full)	ne name anu a		to some contributions from such confinitiee.
UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group P/	AC)
Full Name of Individual (Last, First, Middle I GRABSKI, BENJAMIN, , ,	nitial) or Full O	rganization Name	Date of Receipt
Mailing Address 17772 63RD AVENUE NOR			05 / Y Y Y Y 05 31 2021
City MAPLE GROVE	State MN	Zip Code 55311-4649	Transaction ID : PR2627731661977 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		76.92
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item
Receipt For: Primary General Other (specify) ▼	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)	
Full Name of Individual (Last, First, Middle I DUKART, JENNIFER, , ,	nitial) or Full O	rganization Name	Date of Receipt
Mailing Address 2541 DRESDEN LANE	05 / D D / Y Y Y Y Y 2021		
City GOLDEN VALLEY	State MN	Zip Code 55422-3617	Transaction ID : PR2627749161977 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		384.60
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment Gen Counsel	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify) ▼		2115.30	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle I PARIS, KATHERINE, , ,	nitial) or Full O	rganization Name	Date of Receipt
Mailing Address 17365 62ND AVE N	01-1	Zin Onde	05 / Y Y Y Y 2021
City MAPLE GROVE	State MN	Zip Code 55311-6405	Transaction ID : PR2628320661977           Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		76.92
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)			538.44
TOTAL This Period (last page this line number	er only)		

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

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

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				for each category of the Detailed Summary Page	×	(	11a 13		] 1′   14	1b 4		11c 15	12		17
	y information copied from such Reports and State for commercial purposes, other than using the nar						or the		po	se of		oliciting	contrit		
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I	PAC (I	Un	itedHealth Group P	PAC)										
Α.	Full Name of Individual (Last, First, Middle Initial) MANNING, KIM, , ,	or Full C	Orga	nization Name		D	ate of	Re	ece	eipt					
	Mailing Address 12703 DEER CREEK DRIVE												y y 2021		
	5	State NE		Zip Code 68142-1762	_							R26283			
		0					moun	C OT	Ea	ach F	100	ceipt thi		8.00	
	Name of Employer (for Individual) United HealthCare Services Inc		cupa Mkt	tion (for Individual) g		l	M	emo	o It	em					
	Receipt For:     A       Primary     General       Other (specify) ▼	ggregate	e Yea	ar-to-Date ▼ 334.20	] F	⊃/F	R Ded	uctio	on	(\$44	.00	) Bi-We	ekly)		
в.	Full Name of Individual (Last, First, Middle Initial) VAN DER WALDE, LAMBERT, , ,	or Full C	Orga	nization Name		D	ate of	Re	ece	eipt					
	Mailing Address 45 AUDUBON CAUSEWAY					ľ	<sup>M</sup> 05	1	l	D 1		/ Y	y y 2021	Y	
	City LANTANA	State FL		Zip Code 33462-4756								R26283 ceipt thi			
	FEC ID number of contributing federal political committee.	0							-			-ge	38	4.60	
	Name of Employer (for Individual) United HealthCare Services Inc		•	ation (for Individual) HG Research-Corp Affairs		l	M	emo	o It	em					
	Receipt For:     A       Primary     General       Other (specify) ▼	ggregate	e Yea	ar-to-Date ▼ 2115.30		7/F	R Ded	uctio	on	(\$19	2.3	30 Bi-W	eekly)		
с.	Full Name of Individual (Last, First, Middle Initial) PIAZZA, ELIZABETH, , ,	or Full C	Orga	nization Name		D	ate of	Re	ece	eipt					
	Mailing Address 117 HILLSIDE LN					L	05 <sup>M</sup>	1	l	D 31			2021		
	City POTTSTOWN	State PA		Zip Code 19465-8583								R26283			
		0					mourn		1		het	,		6.92	
	Name of Employer (for Individual) Optum Services, Inc		•	tion (for Individual) d Clin Ops		l	М	emc	o It	tem					
	Receipt For:     A       Primary     General       Other (specify)	ggregate	e Yea	ar-to-Date ▼ 423.06	ן ר	⊃/F	R Ded	ucti	on	(\$38	3.46	6 Bi-We	ekly)		
s	UBTOTAL of Receipts This Page (optional)				•	Γ						4	54	9.52	
Т	OTAL This Period (last page this line number only	)			•	ĺ			T			-9-		40.0	

### Use separate schedule(s)

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IT.			Use separate schedule(s)	(C	heck onl	y or	ne)				
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		<b>X</b> 11a		11b	11c		2 6 [	17
	y information copied from such Reports and Sta for commercial purposes, other than using the				for the		pose of	soliciting	g conti	ributio	ons
	NAME OF COMMITTEE (In Full)										
	UnitedHealth Group Incorporate	d PAC (l	UnitedHealth Group P	AC)							
Α.	Full Name of Individual (Last, First, Middle Initi KORNHAUSER, MICHAEL, , ,	al) or Full O	Organization Name		Date of	f Re	eceipt				
	Mailing Address 180 SUMMIT LANE				м м 05	1	D D 31	/ Y	ү 202	ү ү 21	
	City BALA CYNWYD	State PA	Zip Code 19004-2931					PR2628			
	FEC ID number of contributing federal political committee.	С					-		1	15.92	2
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Dir		М	emo	ltem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 637.56		P/R Ded	lucti	on (\$57.	96 Bi-We	eekly)		
B.	Full Name of Individual (Last, First, Middle Initi ERICKSON, ALYSSA, , ,	al) or Full O	Organization Name		Date of	f Re	eceipt				
	Mailing Address 6430 POLARIS LANE N	State	Zin Codo		M M 05	/	31	/ Y	202 <sup>-</sup>		
	City MAPLE GROVE	State MN	Zip Code 55311-4320	-				PR26287		-	
	FEC ID number of contributing federal political committee.	C	33311-4320		Amoun	t of		eceipt th		92.30	)
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Found/Social Resp		M	emc	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1057.65	]	P/R Ded	uctio	on (\$96.	15 Bi-We	eekly)		
С.	Full Name of Individual (Last, First, Middle Initi THOMPSON, BRUCE, , ,	al) or Full O	Organization Name		Date of	f Re	eceipt				
	Mailing Address 2826 HEDGEROW DRIVE				<sup>M</sup> 05		31		ү 202	1	
	City DALLAS	State TX	Zip Code 75235-7590					PR2628			
	FEC ID number of contributing federal political committee.	С			<u> </u>		,	,	3	84.60	)
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30		P/R Ded	lucti	on (\$19:	2.30 Bi-V	Veekly	')	
$\vdash$	UBTOTAL of Receipts This Page (optional)			▶ ▶			9 	, j	6	92.82	

# Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>×</b> 11a 11b 11c 12
			13     14     15     16     17       erson for the purpose of soliciting contributions       e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	, the hame and a		
UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group PA	AC)
Full Name of Individual (Last, First, Middle A. RILEY, LORI, , ,	e Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 5636 JAMES AVENUE S	OUTH		M M / D D / Y Y Y Y 05 31 2021
City MINNEAPOLIS	State MN	Zip Code 55419-1611	Transaction ID : PR2628834061977 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		384.60
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Human Capital	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle B. SAYEED, OMER, , ,	e Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 2239 HOLLISTON AVE	05 / Y Y Y Y 05 31 2021		
City ALTADENA	State CA	Zip Code 91001-3213	Transaction ID : PR2632078261977
FEC ID number of contributing		91001-3213	Amount of Each Receipt this Period
federal political committee.	C		76.92
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify) ▼		423.06	P/R Deduction (\$38.46 Bi-Weekly)
Full Name of Individual (Last, First, Middle DREFAHL, JASON, , ,	e Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 6104 FOX MEADOW LN			05 / D D / Y Y Y Y 2021
City EDINA	State MN	Zip Code 55436-1217	Transaction ID : PR2632078961977 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		384.60
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) sion COO	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)
SUBTOTAL of Receipts This Page (optiona	l)		846.12
TOTAL This Period (last page this line num	ber only)		

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17								
Any information copied from such Reports and or for commercial purposes, other than using the			person for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporation	ted PAC (l	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middle I	nitial) or Full O	rganization Name	Date of Receipt								
Mailing Address 4545 OXFORD AVE			05 31 2021								
City EDINA	State MN	Zip Code 55436-1405	Transaction ID : PR2632082561977           Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		192.30								
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Dep	upation (for Individual) uty Gen Counsel	Memo Item								
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1923.00	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I 3. GORSUCH, KIRSTEN, , ,	nitial) or Full O	rganization Name	Date of Receipt								
	lailing Address 2780 COUNTRYSIDE DRIVE WEST										
City ORONO	State MN	Zip Code 55356-9676	Transaction ID : PR2632087861977 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Comm	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I C	nitial) or Full O	rganization Name	Date of Receipt								
Mailing Address 5904 ASHBY MANOR PLAC			05 / 31 / 2021								
City ALEXANDRIA	State VA	Zip Code 22310-2267	Transaction ID : PR2632087961977 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 Govt Affs	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1538.40	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			961.50								
TOTAL This Period (last page this line numbe	r only)										

# Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         1
			person for the purpose of soliciting contributions are to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Inc	orporated PAC (l	JnitedHealth Group P	AC)
Full Name of Individual (Last, Firs MEENTS, BENJAMIN, , ,	t, Middle Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 24995 GLEN RO	٨D		05 31 2021
City EXCELSIOR	State MN	Zip Code 55331-8549	Transaction ID : PR2632088161977           Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		76.92
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Mktg	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)
Full Name of Individual (Last, Firs WALTHOUR, JOHN, , ,		rganization Name	Date of Receipt
Mailing Address 5049 COLFAX A	/E S	Zip Code	05 / D D / Y Y Y Y 2021
MINNEAPOLIS	MN	55419-1145	Transaction ID : PR2632877061977 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		384.60
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, Firs . RADEL, TRAVIS, , ,	t, Middle Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 1890 SANDBAR	CIRCLE	Zin Oode	M M / D D / Y Y Y Y 05 / 31 / 2021
City WACONIA	MN	Zip Code 55387-1072	Transaction ID : PR2632878861977           Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		38.46
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item
Receipt For:     Age       Primary     General       Other (specify)		Year-to-Date ▼ 211.53	P/R Deduction (\$19.23 Bi-Weekly)
SUBTOTAL of Receipts This Page	optional)		499.98
TOTAL This Period (last page this I	ne number only)		•

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		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17					
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, Middle HAPGOOD, WADE, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 330 NW 82ND			05 31 Y Y Y Y Y 05 31 2021					
City TOPEKA	State KS	Zip Code 66617-2223	Transaction ID : PR2634167061977 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		115.38					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 634.59	P/R Deduction (\$57.69 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. ROALDI, MICHAEL, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 670 TOURNAMENT DRIVE			05 / 0 / Y Y Y Y Y 2021					
City AVON LAKE	State OH	Zip Code 44012-2285	Transaction ID : PR2634169561977					
FEC ID number of contributing		44012-2200	Amount of Each Receipt this Period					
federal political committee.	C		77.00					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Plan CEO	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼	1					
Other (specify) ▼		423.50	P/R Deduction (\$38.50 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. HACKNEY, JOHN, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 425 N 15TH ST			05 31 2021					
City NASHVILLE	State TN	Zip Code 37206-2774	Transaction ID : PR2634170361977           Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		76.92					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item					
Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       423.06			P/R Deduction (\$38.46 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			269.30					
TOTAL This Period (last page this line numb	er only)							

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		Use separate schedule(s)	(check only one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17				
Any information copied from such Reports and or for commercial purposes, other than using	d Statements mather name and a	I ay not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)				
Full Name of Individual (Last, First, Middle <b>A.</b> PRIBLE, JOHN, , ,	Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 1923 SHIVER DR			05 31 Y Y Y Y Y 2021				
City ALEXANDRIA	State VA	Zip Code 22307-1629	Transaction ID : PR2634656661977 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		384.60				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)				
Full Name of Individual (Last, First, Middle B. PESCATELLO, SARA, , ,	Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 1311 HAMLIN STREET NE			05 31 / Y Y Y Y Y				
City WASHINGTON	State DC	Zip Code 20017-2451	Transaction ID : PR2634888561977 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		384.60				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)				
Full Name of Individual (Last, First, Middle POWER, ROBERT, , ,	Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 20 SMITH LANE	Ototo	Zin Oode	05 / D D / Y Y Y Y 05 / 31 2021				
City SAINT JAMES	State NY	Zip Code 11780-3810	Transaction ID : PR2634892861977           Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.			76.92				
Name of Employer (for Individual) Optum360 Services Inc		upation (for Individual) Gen Mgmt	Memo Item				
Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       423.06			P/R Deduction (\$38.46 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional).			846.12				
TOTAL This Period (last page this line numb	er only)						

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

## Use separate schedule(s)

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				for each category of the Detailed Summary Page	×	11	la 3		] 11 ] 14	1b 4		11c 15	12	17
An or	y information copied from such Reports and Staten for commercial purposes, other than using the nam	nents ma ne and a	ay r addr	not be sold or used by any pe ess of any political committee	erson f to so	for	the	purp ntrib	pos	se of	i so fro	oliciting	contribu	utions
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (l	Un	itedHealth Group PA	C)									
۹.	Full Name of Individual (Last, First, Middle Initial) of PAYET, KEITH, , ,	or Full O	Drga	nization Name	[	Dat	e of	Re	ece	eipt				
	Mailing Address 9608 STONEBLUFF DRIVE						05 <sup>™</sup>	/	[	D 31	D	/ Y	y y 2021	Y
	5	State		Zip Code		Tr	ans	acti	ior	n ID :	Ρ	R26354	400619	77
	BRENTWOOD	TN		37027-1468	_ /	Am	ount	of	Ea	ach F	Rec	ceipt thi	s Period	ł
	FEC ID number of contributing federal political committee.								,			-y-	384	.60
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) an CEO			Me	emo	b lt	tem				
	Receipt For:     Aggregate Year-to-Date ▼       Primary     General       Other (specify) ▼     2115.30						Dedu	uctio	on	(\$19	2.3	30 Bi-W	eekly)	
в.	Full Name of Individual (Last, First, Middle Initial) o MANN, MELISSA, , ,	or Full O	Drga	nization Name		Dat	e of	Re	ece	eipt				
	Mailing Address 15526 ELM RD						05	/	ſ	D I 31	- 1	/ Y	2021	Y
	5	State MN		Zip Code 55311-3941									<b>421619</b> s Period	
	FEC ID number of contributing federal political committee.	С							-			-y=-	38	.46
	Name of Employer (for Individual) Optum Services, Inc		•	tion (for Individual) nan Capital Partner			Me	emo	b lt	tem				
	Receipt For:     Ag       Primary     General       Other (specify) ▼	gregate	Yea	ar-to-Date ▼ 211.53	P/	/R [	Dedu	uctic	on	(\$19	.23	3 Bi-We	ekly)	
с.	Full Name of Individual (Last, First, Middle Initial) of MIRAU, ANTHONY, , ,	or Full O	Drga	nization Name		Dat	e of	Re	ece	eipt				
	Mailing Address 770 HAWKCREST CIR						05 <sup>M</sup>	1	[	D 31		/ Y	2021	Ŷ
	City S CHANHASSEN	State MN		Zip Code 55317-4860									442619 s Period	
	FEC ID number of contributing federal political committee.						_		9			y	192	.30
	Name of Employer (for Individual) Optum Services, Inc	Occi VP,			Me	emo	o It	tem						
	Receipt For:     Ag       Primary     General       Other (specify)	ggregate	Yea	ar-to-Date ▼ 1057.65	P	/R	Ded	uctio	on	(\$96	5.1	5 Bi-We	ekly)	
s	JBTOTAL of Receipts This Page (optional)			••••••					,			,	615	.36
т	OTAL This Period (last page this line number only)			••••••					-					

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		Use separate schedule(s)		(check only one)						
	MIZED RECEIPTS		for each category of the Detailed Summary Page		<b>K</b> 11a		11b	11c	12	
	information copied from such Reports and Stat									
· · · · ·	or commercial purposes, other than using the n	ame and ad	ddress of any political committee	to s	olicit con	ntrib	utions f	rom such	n committ	ee.
	IAME OF COMMITTEE (In Full) JnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)						
	ull Name of Individual (Last, First, Middle Initial EICHENLAUB, MANDIE, , ,	) or Full Or	rganization Name		Date of	Re	ceipt			
N	lailing Address 6607 CINDY LANE				<sup>M</sup> 05	/	D 31	) / Y	y y 2021	Y
	bity HOUSTON	State TX	Zip Code 77008-5110						4856197 is Period	7
	EC ID number of contributing ederal political committee.	С					7		76.9	92
L	lame of Employer (for Individual) Inited HealthCare Services Inc		upation (for Individual) Ntwk Contrctng		Me	emo	Item			
Receipt For:       Aggrega         Primary       General         Other (specify) ▼			Year-to-Date ▼ 423.06		P/R Dedu	uctio	on (\$38.	.46 Bi-We	eekly)	
	ull Name of Individual (Last, First, Middle Initial ROOS, THOMAS, , ,	) or Full Or	rganization Name		Date of	Re	ceipt			
_	Aailing Address 3199 KAGEN AVE NE				05	/	D D D 31		2021	Y
	ity SAINT MICHAEL	State MN	Zip Code 55376-3416	-	Transaction ID : PR2635451261977           Amount of Each Receipt this Period					
F	EC ID number of contributing ederal political committee.	C	384.60							
	lame of Employer (for Individual) nited HealthCare Services Inc	Occu SVP	_	Me	emo	Item				
Bossist For:			Year-to-Date ▼ 2115.30	F	P/R Dedu	uctic	on (\$192	2.30 Bi-W	′eekly)	
	ull Name of Individual (Last, First, Middle Initial MADONDO, JOHN, , ,	) or Full Or	rganization Name		Date of	Re	ceipt			
N	failing Address 147 BLUEBELL WAY				05 <sup>M</sup>	/	D 31	) / Y	2021	Y
	ity FRANKLIN	State TN	Zip Code 37064-6784						72616197 is Period	7
FEC ID number of contributing federal political committee.       C         Name of Employer (for Individual)       Occupation (for Exec Dir         United HealthCare Services Inc       Exec Dir         Receipt For:       Aggregate Year-to-Da         Primary       General         Other (specify)       Other (specify)					<u> </u>		y	. ,	76.9	92
			Occupation (for Individual) Exec Dir				Item			
			Year-to-Date ▼ 423.06		P/R Dedu	uctio	on (\$38.	.46 Bi-We	eekly)	
SU	BTOTAL of Receipts This Page (optional)		•••••				,	,	538.4	14
то	TAL This Period (last page this line number on	ly)	····· •	-				- 41-		

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		Use separate schedule(s)	(check only one)					
		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17					
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorpora	ated PAC (I	UnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, Middle DEMPSEY, MICHAEL, , ,	Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 6614 PARKWOOD LANE			05 31 Y Y Y Y Y 2021					
City EDINA	State MN	Zip Code 55436-1734	Transaction ID : PR2636726361977           Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		76.92					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Corp Dev	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. HILL, DAVID, , ,	Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 1800 RIDGE AVENUE UNI		1	05 / D D / Y Y Y Y Y 2021					
	State	Zip Code	Transaction ID : PR2636726561977					
EVANSTON		60201-5980	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		76.92					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) puty Gen Counsel Mgr	Memo Item					
Receipt For:	Aggregate	Year-to-Date <b>V</b>	P/R Deduction (\$38.46 Bi-Weekly)					
Other (specify)		423.06						
Full Name of Individual (Last, First, Middle C. LUSIC, TANYA, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 20840 SAWMILL ROAD			05 / D D / Y Y Y Y Y 05 31 2021					
City JORDAN	State MN	Zip Code 55352-9633	Transaction ID : PR2636727561977 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		192.30					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item					
Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       1057.65			P/R Deduction (\$96.15 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			346.14					
TOTAL This Period (last page this line numb	er only)							

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			Use separate schedule(s)	(check only one)					
116			for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12					
	/ information copied from such Reports and Sta for commercial purposes, other than using the r								
<u> </u>	NAME OF COMMITTEE (In Full)								
$\rangle$	UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	AC)					
Α.	Full Name of Individual (Last, First, Middle Initia SIVLEY III, HARRY, , ,	al) or Full O	rganization Name	Date of Receipt					
	Mailing Address 7218 AVALON BLVD			05 31 2021					
	City ALPHARETTA	State GA	Zip Code 30009-2500	Transaction ID : PR2638106661977           Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		38.46					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Gen Counsel	Memo Item					
Papaint For:			Year-to-Date ▼ 211.53	P/R Deduction (\$19.23 Bi-Weekly)					
	Full Name of Individual (Last, First, Middle Initia ZEGLINSKI, MICHAEL, , ,	al) or Full O	rganization Name	Date of Receipt					
	Mailing Address 1155 N GULFSTREAM AVENU #406			05 / D D / Y Y Y Y 2021					
	City SARASOTA	State FL	Zip Code 34236-5558	Transaction ID : PR2639701861977					
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 384.60					
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Gen Mgmt	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)					
	Full Name of Individual (Last, First, Middle Initia CALABRESE, DAVID, , ,	al) or Full O	rganization Name	Date of Receipt					
	Mailing Address 85 LITTLE POND RD			05 / D / Y Y Y Y 2021					
	City NORTHBOROUGH	State MA	Zip Code 01532-1686	Transaction ID : PR2639708361977 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.       C         Name of Employer (for Individual) Optum Services, Inc       Occupation (for Individual) SVP Clnt Relationship         Receipt For:       Aggregate Year-to-Date ▼         Primary       General Other (specify)				384.60					
				Memo Item					
			2115.30	P/R Deduction (\$192.30 Bi-Weekly)					
s	JBTOTAL of Receipts This Page (optional)			807.66					
т	OTAL This Period (last page this line number or	nly)							

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12				
Any information copied from such Reports and or for commercial purposes, other than using			13     14     15     16     17       erson for the purpose of soliciting contributions       to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)							
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)				
Full Name of Individual (Last, First, Middle <b>SMITH, ANTHONY</b> , , ,	Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 1 ROCKAWAY AVE			05 31 Y Y Y Y Y 2021				
City MARBLEHEAD	State MA	Zip Code 01945-1726	Transaction ID : PR2639746261977 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		76.92				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) CInt Svc Acct Mgt	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)				
Full Name of Individual (Last, First, Middle B. WIGGIN, MATTHEW, , ,	Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 6 MIDDLEBROOK RD							
City WEST HARTFORD	State CT	Zip Code 06119-1014	Transaction ID : PR2639759361977 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		115.38				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 634.59	P/R Deduction (\$57.69 Bi-Weekly)				
Full Name of Individual (Last, First, Middle C. ZUCCO, BETHANY, , ,	Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 5212 JAMES AVE S			05 / D D / Y Y Y Y Y 2021				
City MINNEAPOLIS	State MN	Zip Code 55419-1137	Transaction ID : PR2639760061977           Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		384.60				
Name of Employer (for Individual) United HealthCare Services Inc	Occi VP I	upation (for Individual) Mktg	Memo Item				
Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       2115.30			P/R Deduction (\$192.30 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional).			576.90				
TOTAL This Period (last page this line number	er only)						

## Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

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	EMIZED RECEIPTS	le Je	<b>X</b> 11a 11b 11c 12 13 14 15 16 17		
	y information copied from such Reports and State for commercial purposes, other than using the na		n for the purpose of soliciting contributions		
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	UnitedHealth Grou	ıp PAC)	
Α.	Full Name of Individual (Last, First, Middle Initial) JENSEN MOORE, KIMBERLY, , ,	or Full C	Organization Name		Date of Receipt
	Mailing Address 230 ROSE AVENUE				05 / 05 / Y Y Y Y 2021
	City	State CA	Zip Code	_	Transaction ID : PR2639770361977
	MILL VALLEY		94941-1728		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			49.52
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		Memo Item
	Receipt For:		Year-to-Date ▼		
	Primary General Other (specify) ▼	.99.094.0	272.3	86	P/R Deduction (\$24.76 Bi-Weekly)
в.	Full Name of Individual (Last, First, Middle Initial) FLEMING, SUSAN, , ,	or Full C	Organization Name		Date of Receipt
	Mailing Address 2016 N HOWE ST UNIT 1S				M M / D D / Y Y Y Y 05 31 2021
	City	State	Zip Code		Transaction ID : PR2639773761977
	CHICAGO	IL	60614-4414		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			384.60
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Mktg		Memo Item
	Receipt For:     A       Primary     General       Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.:	30	P/R Deduction (\$192.30 Bi-Weekly)
с.	Full Name of Individual (Last, First, Middle Initial) DUTTA, SUMIT, , ,	or Full C	Organization Name		Date of Receipt
	Mailing Address 1112 W WRIGHTWOOD AVE				M M / D D / Y Y Y Y 05 31 2021
	City	State	Zip Code		Transaction ID : PR2639773861977
	CHICAGO	IL	60614-1315		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			384.60
	Name of Employer (for Individual)		upation (for Individual)		Memo Item
	Optum Services, Inc	Bus	Seg Chief Med Off		
		Aggregate	Year-to-Date 🔻		
	Primary General Other (specify)		2115.3		P/R Deduction (\$192.30 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)			►	818.72
т	OTAL This Period (last page this line number only	/)		····· ►	

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	-	Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★         11a         11b         11c         12           13         14         15         16         17					
			erson for the purpose of soliciting contributions to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group PA	AC)					
Full Name of Individual (Last, First, Middle A. NELSON, ELLEN, , ,	e Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 11831 RENE LA COSTE	PLACE		05 31 2021					
City WELLINGTON	State FL	Zip Code 33414-6059	Transaction ID : PR2639795361977 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Clnt Svc Acct Mgmt	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. SMITH, DELYLE, , ,	e Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address PO BOX 447			05 / D D / Y Y Y Y Y 2021					
City	State	Zip Code	Transaction ID : PR2639801561977					
MT PROSPECT	IL	60056-0447	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		76.92					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Director Technology	Memo Item					
Receipt For:	Aggregate	Year-to-Date <b>V</b>	-					
Other (specify) ▼		423.06	P/R Deduction (\$38.46 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. WEBER, ALISSA, , ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 10633 NW 74TH PLACE			05 / 05 / Y Y Y Y 05 / 31 / 2021					
City JOHNSTON	State IA	Zip Code 50131-2342	Transaction ID : PR2640461061977 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		115.38					
Name of Employer (for Individual) United HealthCare Services Inc	Occi VP F	upation (for Individual) Fin	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 634.59	P/R Deduction (\$57.69 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional	)		576.90					
TOTAL This Period (last page this line num	ber only)							

#### SCHEDULE A (FEC Form 3X) DEAEIDTA

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12					
Any information copied from such Reports and or for commercial purposes, other than using t			13     14     15     16     17       erson for the purpose of soliciting contributions       e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)								
> UnitedHealth Group Incorpora	ted PAC (	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Middle A. STOW, CHRISTINA, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 4709 ALTON PL NW			05 31 2021					
City WASHINGTON	State DC	Zip Code 20016-2041	Transaction ID : PR2640466461977 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Public Affairs	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. SHARKEY, S PAUL, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 8607 ELLISTON DRIVE	1-		05 / D D / Y Y Y Y 2021					
City WYNDMOOR	State PA	Zip Code 19038-7957	Transaction ID : PR2640845461977 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		57.70					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼	_					
Primary General Other (specify) ▼		317.35	P/R Deduction (\$28.85 Bi-Weekly)					
Full Name of Individual (Last, First, Middle ESTESS, SHARON, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 128 ASHBROOKE TRAIL			05 / D D / Y Y Y Y 2021					
City MADISON	State MS	Zip Code 39110-6855	Transaction ID : PR2640876561977           Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.			76.92					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item					
Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       423.0			P/R Deduction (\$38.46 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional).			519.22					
TOTAL This Period (last page this line number	er only)							

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

## Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

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ITEMIZED RECEIPTS	▲ 11a ↓ 11b ↓ 11c ↓ 12		
	13     14     15     16     17       erson for the purpose of soliciting contributions to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorp			
Full Name of Individual (Last, First, Mi A. METKO, SARA, , ,	ddle Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 23665 HIGHVIEW LAI	NE		05 31 / Y Y Y Y 2021
City	State MN	Zip Code	Transaction ID : PR2640877361977
LAKEVILLE		55044-6025	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		76.92
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Tax	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		423.06	P/R Deduction (\$38.46 Bi-Weekly)
Full Name of Individual (Last, First, Mi B. ADVANI, PROTIMA, , ,	ddle Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 7618 BRITTANY PAR	ССТ		M M / D D / Y Y Y Y 05 31 2021
City FALLS CHURCH	State VA	Zip Code 22043-2907	Transaction ID : PR2642024161977 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		384.60
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Rsch	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Mi C. STRAND, UTE, , ,	ddle Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 2323 SPRINGDALE D			05 / D D / Y Y Y Y 05 31 2021
City NASHVILLE	State TN	Zip Code 37215-1134	Transaction ID : PR2642025561977 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		38.46
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 211.53	P/R Deduction (\$19.23 Bi-Weekly)
SUBTOTAL of Receipts This Page (optic	onal)		499.98
TOTAL This Period (last page this line n	umber only)	······	

## Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17				
			person for the purpose of soliciting contributions see to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group P	AC)				
Full Name of Individual (Last, First, Middl A. BRUECKMAN, BRIAN, , ,	e Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 261 BLACK NUGGET LN	1		05 31 Y Y Y Y 2021				
City CLE ELUM	State WA	Zip Code 98922-3246	Transaction ID : PR2642029461977           Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		384.60				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 UHC Operations	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)				
Full Name of Individual (Last, First, Middl B. JENSEN, GINA, , ,	e Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 13325 58TH AVENUE N UNIT B			05 / <sup>1</sup> 2021				
City PLYMOUTH	State MN	Zip Code 55442-1677	Transaction ID : PR2642031461977 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		38.46				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Assc Gen Counsel	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.53	P/R Deduction (\$19.23 Bi-Weekly)				
Full Name of Individual (Last, First, Middl C. MARTIN, STEPHANIE, , ,	e Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 7002 N VIA DE MANANA			05 / D D / Y Y Y Y 2021				
City SCOTTSDALE	State AZ	Zip Code 85258-3951	Transaction ID : PR2642818061977 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		153.84				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Market VP SIs AM	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 846.12	P/R Deduction (\$76.92 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optiona	l)		576.90				
TOTAL This Period (last page this line num	ber only)						

## Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	★         11a         11b         11c         12           13         14         15         16         17						
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middl A. LONG, RICHARD, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 4825 PENN AVE S			05 / Y Y Y Y 2021						
City MINNEAPOLIS	State MN	Zip Code 55419-5258	Transaction ID : PR2642831261977           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) of of Staff	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middl B. FOX, ELIZABETH, , ,									
#308	Mailing Address 1021 NORTH GARFIELD STREET #308 City State Zip Code								
ARLINGTON	VA	22201-2559	Transaction ID : PR2642832061977           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		430.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1651.90	P/R Deduction (\$215.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middl C. CRESTA, BRIAN, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 5 OGDEN LANE			05 / 05 / 2021						
City MIDDLETON	State MA	Zip Code 01949-1669	Transaction ID : PR2642837561977           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) /ktg Bus Dev	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optiona	۲ ۱)		583.84						
TOTAL This Period (last page this line nun	nber only)								

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

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

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			Detailed Summary Page	×	11a		]11b		11c	12				
					13		14		15	16	17			
	y information copied from such Reports and Stat for commercial purposes, other than using the na													
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	NC)										
A.	Full Name of Individual (Last, First, Middle Initial KUSSIE, TIMOTHY, , ,	) or Full O	rganization Name	Date of Receipt										
	Mailing Address 8445 NE NEW BROOKLYN ROA	AD			05 31 2021									
	City BAINBRIDGE ISLAND	State WA	Zip Code 98110-3611	A	Transaction ID : PR2642838861977           Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		38.46										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP SIs Acct Mgmt		Me	emo	lter	m						
	Receipt For: Primary General Other (specify) ▼	Year-to-Date ▼ 211.53	P/	/R Dedi	uctio	on (\$	\$19.23	3 Bi-We	eekly)					
B.	Full Name of Individual (Last, First, Middle Initial RUDOLPH, CLAYTON, , ,		Date of Receipt											
	Mailing Address 4937 RUSSELL AVENUE SOUT		Zip Code		05 / 05 / Y Y Y Y 2021									
	City MINNEAPOLIS	State MN							1 <b>9936197</b> his Period	7				
	FEC ID number of contributing federal political committee.	C				192.30								
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) M A VP					Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$96.15 Bi-Weekly)											
C.	Full Name of Individual (Last, First, Middle Initial CRAGLE, STEVE, , ,	) or Full O	rganization Name		Date of	Re	eceip	ot						
	Mailing Address 6604 MOHAWK TRAIL				<sup>M</sup> 05	/		31 <sup>D</sup>	/ Y	y y 2021				
	City EDINA	State MN	Zip Code 55439-1030	A						20066197 nis Period	7			
	FEC ID number of contributing federal political committee.	С			_		y			384.	60			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CMO	Memo Item										
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P	/R Ded	uctio	on (\$	\$192.:	30 Bi-V	Veekly)				
S	UBTOTAL of Receipts This Page (optional)						y		y	615.3	36			
т	OTAL This Period (last page this line number on	y)	•						-					

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(che	(check only one)											
EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12	/						
Any information copied from such Reports ar or for commercial purposes, other than using															
NAME OF COMMITTEE (In Full)			e 10 501				IOIII SUC								
UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group P/	AC)												
Full Name of Individual (Last, First, Middle A. NEELY, MARC, , ,	e Initial) or Full C	rganization Name	C	Date of	Re	ceipt									
Mailing Address 1159 BUFFALO RIDGE R	D			05 31 2021											
City CASTLE PINES	State CO	Zip Code 80108-8190	Transaction ID : PR2643203161977 Amount of Each Receipt this Period												
FEC ID number of contributing federal political committee.	C					-		384.	60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Me	emo	Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)												
Full Name of Individual (Last, First, Middle B. MCKOY, PHILIP, , ,	e Initial) or Full C	rganization Name	C	Date of	Re	ceipt									
Mailing Address 927 LINCOLN AVE								05 / 31 / 2021 Transaction ID : PR2644651661977							
City SAINT PAUL	State MN	Zip Code 55105-3149				-			7						
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period 384.60													
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Grp CIO		Me	emo	Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)												
Full Name of Individual (Last, First, Middle C. JEZARIAN, WENDY, , ,	Initial) or Full C	rganization Name		Date of	Re	ceipt									
Mailing Address 5251 HUMBOLDT AVE S				<sup>M</sup> 05	1	31	) / Y	ү ү 2021	Y						
City MINNEAPOLIS	State MN	Zip Code 55419-1121	A					65966197 his Period	7						
FEC ID number of contributing federal political committee.	С					y .	7	38.	46						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Iktg Rsch Cnslt	Memo Item												
Receipt For: Primary General Other (specify)	Aggregate	P/R Deduction (\$19.23 Bi-Weekly)													
SUBTOTAL of Receipts This Page (optional	)					,	. ,	807.	66						
TOTAL This Period (last page this line num	per only)						1.46								

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		Use separate schedule(s)	(check or	(check only one)									
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a		11b	11c	12					
	y information copied from such Reports and Sta for commercial purposes, other than using the r												
$\overline{)}$	NAME OF COMMITTEE (In Full)												
$\rangle$	UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	C)									
Α.	Full Name of Individual (Last, First, Middle Initia ZIRKELBACH, ANGELA, , ,	al) or Full O	rganization Name	Date	of Re	ceipt							
	Mailing Address 916 G STREET NW			05									
	APT #301	State	Zip Code	-	Isacti	31 on ID : F	PR26446	2021 6 <b>6026197</b>	7				
	WASHINGTON	DC	20001-4573	Amou	nt of	Each Re	ceipt th	is Period					
	FEC ID number of contributing federal political committee.	С					-90-	115.3	38				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		∕lemo	Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 634.59	P/R Deduction (\$57.69 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name CHAPMAN, GREGORY, , ,					ceipt							
	Mailing Address 1724 SECOND STREET	05		D D D 31	/ Y	2021	Y						
	City NEW ORLEANS	State LA	Zip Code 70113-1632					0306197	ــــــــــــــــــــــــــــــــــــــ				
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP SIs Acct Mgmt		∕lemo	Item							
	Receipt For:	Aggregate	Year-to-Date ▼	1									
	Other (specify) ▼		550.00	P/R Deduction (\$50.00 Bi-Weekly)									
С.	Full Name of Individual (Last, First, Middle Initia LIGHT-MCGROARY, KELLYANN,		rganization Name	Date	of Re	ceipt							
	Mailing Address 3782 COTTAGE RESERVE RE			05		D D D 31	I L	2021					
	City SOLON	State IA	Zip Code 52333-9225			-		16516197 is Period	7				
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period					92				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ied Dir		Vemo	tem							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 346.14	P/R De	ductio	on (\$38.4	l6 Bi-We	eekly)					
s	UBTOTAL of Receipts This Page (optional)		•••••			,	,	292.3	30				
т	OTAL This Period (last page this line number or	nly)	••••••				- 45-						

## Use separate schedule(s)

FOR LINE NUMBER:

PAGE 161 OF

		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12						
			13     14     15     16     17       erson for the purpose of soliciting contributions       to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full									
> UnitedHealth Group Ir	corporated PAC (l	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, Fi A. MAHRT, JONATHAN, , ,	rst, Middle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2785 DIVISION	STREET		05 31 2021						
City SAINT PAUL	State MN	Zip Code 55109-1676	Transaction ID : PR2645176961977						
		55109-1676	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		384.60						
Name of Employer (for Individua Optum Services, Inc	,	upation (for Individual) Segment COO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, Fi B. PRICE, CASSANDRA, ,		rganization Name	Date of Receipt						
Mailing Address 7903 S 193 AVE			05 / D D / Y Y Y Y Y 2021						
City GRETNA	State	Zip Code 68028-5017	Transaction ID : PR2646263661977						
		00020-3017	Amount of Each Receipt this Period						
federal political committee.	FEC ID number of contributing federal political committee.								
Name of Employer (for Individua United HealthCare Services Inc	,	upation (for Individual) Health Plan Operations	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		423.06	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, Fi C. HOFFMAN, SHERRI, ,		rganization Name	Date of Receipt						
Mailing Address 3409 DEEP WI	LOW AVENUE		05 / D D / Y Y Y Y 05 31 2021						
City PIKESVILLE	State MD	Zip Code 21208-3116	Transaction ID : PR2646294661977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individua Optum Services, Inc		upation (for Individual) Cint Svc Acct Mgt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page	e (optional)		538.44						
TOTAL This Period (last page this	line number only)								

## Use separate schedule(s)

FOR LINE NUMBER:

PAGE 162 OF

		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17							
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorporat	ed PAC (l	JnitedHealth Group PA	ιC)							
Full Name of Individual (Last, First, Middle Ir STANKIEWICZ, DENNIS, , ,	nitial) or Full O	rganization Name	Date of Receipt							
Mailing Address 17761 WEAVER LAKE DRIV	/E		05 31 Y Y Y Y Y 05 31 2021							
City MAPLE GROVE	State MN	Zip Code 55311-1328	Transaction ID : PR2646304061977           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Auditor	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle Ir B. WELSH, MARY, , ,	nitial) or Full O	rganization Name	Date of Receipt							
Mailing Address 140 BROWN ROAD SOUTH			05 / 31 / Y Y Y Y 05 / 31							
City ORONO	State MN	Zip Code 55356-9134	Transaction ID : PR2646306961977 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		38.46							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Corporate Security	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.53	P/R Deduction (\$19.23 Bi-Weekly)							
Full Name of Individual (Last, First, Middle Ir c. SWENSSON, CHARLES, , ,	hitial) or Full O	rganization Name	Date of Receipt							
Mailing Address 18153 66TH PLACE N			05 / D D / Y Y Y Y Y 2021							
City MAPLE GROVE	State MN	Zip Code 55311-4590	Transaction ID : PR2698403961977           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CMO	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			807.66							
TOTAL This Period (last page this line number	r only)									

## Use separate schedule(s)

FOR LINE NUMBER:

PAGE 163 OF

		Use separate schedule(s)	(check only one)						
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>×</b> 11a 11b 11c 12						
			13     14     15     16     17       erson for the purpose of soliciting contributions       a to collicit contributions from such committee						
or for commercial purposes, other than using t	ne name and a	duress of any political committee	e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle I A	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 724 FARRAGUT STREET			05 / D D / Y Y Y Y 05 31 2021						
City WASHINGTON	State DC	Zip Code 20011-4012	Transaction ID : PR2698409861977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		115.38						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) rt Affs Dir	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 634.59	P/R Deduction (\$57.69 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I ZENICK, GEOFFREY, , ,									
Mailing Address 7714 TWISTED OAKS CIRC			05 / D D / Y Y Y Y 2021						
City DALLAS	State TX	Zip Code 75231-4711	Transaction ID : PR2698410861977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Sales	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) ▼		423.06	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I TAYLOR, JOSHUA, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 37 PINE RIDGE RD	04-1-	Zin Ood-							
City WOODBRIDGE	State CT	Zip Code 06525	Transaction ID : PR2698416761977 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		38.46						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 211.53	P/R Deduction (\$19.23 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			230.76						
TOTAL This Period (last page this line number	er only)								

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17							
			person for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incol	porated PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, M GROSSMAN, BEVERLY, , ,	<i>l</i> iddle Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 5 BROOKSIDE AVE			05 31 2021							
City MENANDS	State NY	Zip Code 12204-2301	Transaction ID : PR2699179861977 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		192.30							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1057.65	P/R Deduction (\$96.15 Bi-Weekly)							
Full Name of Individual (Last, First, N B. DOWLING, MELODY, , ,	/liddle Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 14205 INDEPENDER	05 / 0 0 / 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0									
City BASEHOR	State KS	Zip Code 66007-5203	Transaction ID : PR2699182561977 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	FEC ID number of contributing									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, M C. SELIG, JOHN, , ,	Aiddle Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 6406 WESTMINSTE			05 / 05 / Y Y Y Y 2021							
City BENTON	State AR	Zip Code 72019-6682	Transaction ID : PR2699184661977 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		61.52							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Business Development Exe	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 338.36	P/R Deduction (\$30.76 Bi-Weekly)							
SUBTOTAL of Receipts This Page (op	tional)		330.74							
TOTAL This Period (last page this line	number only)									

### SCHEDULE A (FEC Form 3X) DEAEIDTA

## Use separate schedule(s)

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			Use separate schedule(s)	(cheo	(check only one)								
11	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b	11c		12 16	17		
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	L ay not be sold or used by any po ddress of any political committee	erson fo to soli	r the	pur ntrib	pose of	soliciting	g cont	tributio	ons		
	NAME OF COMMITTEE (In Full)												
	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	C)									
Α.	Full Name of Individual (Last, First, Middle Init AHLSTROM, ALEXIS, , ,	tial) or Full O	rganization Name	Date of Receipt									
	Mailing Address 3421 OAKWOOD TERRACE		Zip Code		05 / D D / Y Y Y Y 2021								
	City WASHINGTON	State DC		Transaction ID : PR2699187161977           Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С	384.60										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs		М	emo	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name ZHOU, JINGXIN, , ,					f Re	eceipt						
	Mailing Address 12011 FAIRVIEW CT						05 / D / Y Y Y Y 2021						
	City	State	Zip Code					PR2699					
	MINNETONKA	MN	55343-4516	A	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		76.92						2			
	Name of Employer (for Individual) Optum Services, Inc	Occ Dir	upation (for Individual) Fin	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Init GALIMI, GAVIN, , ,	tial) or Full O	rganization Name	D	ate of	f Re	eceipt						
	Mailing Address 410 S JUANITA AVENUE				05	/	D D 31	/ Y	202		Ŷ		
	City REDONDO BEACH	State CA	Zip Code 90277-3824				-	PR2700					
	FEC ID number of contributing federal political committee.	С		ļ			, .	, ,		123.0	6		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		М	emo	o Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 676.83	P/R Deduction (\$61.53 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)		•				,	. ,	Ę	584.58	3		
Т	OTAL This Period (last page this line number	only)						1.45		- 40			

## Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)							
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12							
			13     14     15     16     17       erson for the purpose of soliciting contributions       to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)	g the name and a									
UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middl WAYLAND, CHARLES, , ,	e Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 7615 SWEETBRIAR RD			M M / D D / Y Y Y Y Y 05 31 2021							
City RICHMOND	State VA	Zip Code 23229-6619	Transaction ID : PR2700924661977           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middl B. MCSWEENEY, ERIN, , ,	e Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 1128 EDINGTON PLACE			05 31 YYYYY 2021							
City MARCO ISLAND	State FL	Zip Code 34145-2006	Transaction ID : PR2701818061977 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	s a la l									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef of Staff - UHG CEO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middl C. BERMAN, ABRAHAM, , ,	e Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 177 MAECK FARM ROA			05 / D D / Y Y Y Y 2021							
City SHELBURNE	State VT	Zip Code 05482-7900	Transaction ID : PR2701818561977 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		38.46							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) < Regn Pres	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 211.53	P/R Deduction (\$19.23 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optiona	l)		807.66							
TOTAL This Period (last page this line num	ber only)									

#### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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FOR LINE NUMBER:

(check only one)

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	EMIZED RECEIPIS		for each category of the Detailed Summary Page	×	11a 13		11b		11c 15	12	17			
	y information copied from such Reports and State for commercial purposes, other than using the na				or the		pose		oliciting	contribu	tions			
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	UnitedHealth Group F	PAC)										
A.	Full Name of Individual (Last, First, Middle Initial) O'CONNELL, DANIEL, , ,	or Full O	Drganization Name		Date of Receipt									
	Mailing Address 3325 W 18TH AVENUE	0		_ [	05 / 0 0 / 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0									
	City DENVER	State CO	Zip Code 80204-1681		Transaction ID : PR2701819661977									
			00204 1001	A	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			230.76									
	Name of Employer (for Individual)		cupation (for Individual) Govt Affs		Me	emo	lten	n						
	United HealthCare Services Inc Receipt For:													
	Primary General Other (specify) ▼	vggregate	Year-to-Date ▼ 1269.18	P/	P/R Deduction (\$115.38 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initial) BRUCE, JAMIE, , ,	or Full O	Drganization Name		Date of Receipt									
	Mailing Address 1433 POWDER DRIVE				05 31 2021									
	City O FALLON	State MO							<b>2306197</b> is Period	7				
	FEC ID number of contributing federal political committee.	C					384.60							
	Name of Employer (for Individual) United HealthCare Services Inc	Occ Hith		Memo Item										
	Receipt For:       A         Primary       General         Other (specify) ▼	ggregate	Year-to-Date ▼ 2115.30	P/	P/R Deduction (\$192.30 Bi-Weekly)									
	Full Name of Individual (Last, First, Middle Initial) SPARKS, KEVIN, , ,	or Full O	Drganization Name		Date of	Re	ceipt	t						
	Mailing Address 10681 S CEDAR NILES BLVD				05 31 2021									
	City	State KS	Zip Code							82556197	7			
	OLATHE	no	66061-7415	A	Mount	of	Each	n Red	ceipt th	is Period				
	FEC ID number of contributing federal political committee.	С					y		y	192.	30			
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) n Plan CEO		Me	emo	) Iten	n						
	Receipt For:     A       Primary     General       Other (specify)	aggregate	P/	P/R Deduction (\$96.15 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)									807.	66			
Т	OTAL This Period (last page this line number only	/)		<b>▶</b>			- -							

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12							
			13     14     15     16     17       person for the purpose of soliciting contributions       be to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)	5	····· · · · · · · · · · · · · · · · ·								
UnitedHealth Group Incorpo	orated PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Midd <b>A.</b> KRAMER, NANCY, , ,	lle Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 4672 BITTERN LANE			05 31 Y Y Y Y 2021							
City LEBANON	State OH	Zip Code 45036-7562	Transaction ID : PR2702501461977           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		76.92							
Name of Employer (for Individual) Optum Services, Inc	Occ	upation (for Individual) RN	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Midd B. MERZLICKER, CAREY, , ,	le Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 950 BENTLEY PARK CI			05 / D D / Y Y Y Y 2021							
City	State MO	Zip Code	Transaction ID : PR2703246961977							
O FALLON	MO	63368-8022	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		76.92							
Name of Employer (for Individual) United HealthCare Services Inc	Occ Dir	upation (for Individual) Fin	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Midd C. YOUNG, DAVID, , ,	le Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 654 CHISWELL CT			05 / D D / Y Y Y Y 2021							
City BRENTWOOD	State TN	Zip Code 37027-3109	Transaction ID : PR2703655461977							
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Gen Mgmt	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional	al)		538.44							
TOTAL This Period (last page this line nur	nber only)									

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			Use separate schedule(s)		(check only one)					
	IEMIZED RECEIPTS		for each category of the Detailed Summary Page	×	-		11b	11c	12	<u> </u>
	y information copied from such Reports and S									
or	for commercial purposes, other than using the	name and a	ddress of any political committe	e to so	licit cor	ntrib	outions 1	from such	n committ	ee.
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group P/	AC)						
Α.	Full Name of Individual (Last, First, Middle Init HOROHO, PATRICIA, , ,	tial) or Full O	rganization Name		Date of	Re	eceipt			
	Mailing Address 335 MUIRFIELD LOOP			05	1	31	) / Y	ү 2021	Y	
	City REUNION	State FL	Zip Code 34747-6409						<b>19466197</b> is Period	7
	FEC ID number of contributing federal political committee.	С							384.	60
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CEO		M	emc	tem			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	<b>]</b> P.	/R Ded	ucti	on (\$19	2.30 Bi-W	/eekly)	
в.	Full Name of Individual (Last, First, Middle Inite DELANY, ANDREW, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt			
	Mailing Address 209 GARLAND AVENUE				05 / D / Y Y Y 2021					Y
	City DECATUR	State GA	Zip Code 30030-4940						19636197 is Period	7
	FEC ID number of contributing federal political committee.	С							384.	60
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Cust Svs		M	emo	tem			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/	/R Ded	uctio	on (\$192	2.30 Bi-W	/eekly)	
С.	Full Name of Individual (Last, First, Middle Ini HAYEK, ANDREW, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt			
	Mailing Address 500 ADAMS AVENUE				05 / 1 / Y Y Y Y 05 / 31 / 2021					
	City GLENCOE	State IL	Zip Code 60022-1865						06346197 is Period	7
	FEC ID number of contributing federal political committee.	С					, .	. <u>,</u>	384.	60
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CEO		M	emo	tem			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	<b>P</b>	/R Ded	ucti	on (\$19	2.30 Bi-V	/eekly)	
⊢	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number						5		1153.	30

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)			
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a         11b         11c         12           13         14         15         16         17			
			13     14     15     16     17       erson for the purpose of soliciting contributions       e to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorp	orated PAC (I	JnitedHealth Group P/	λC)			
Full Name of Individual (Last, First, Mid ROBERTS, CORY, , ,	dle Initial) or Full C	rganization Name	Date of Receipt			
Mailing Address 3300 RILMAN RD			05 / Y Y Y Y 05 31 2021			
City ATLANTA	State GA	Zip Code 30327-1508	Transaction ID : PR2705063561977 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		384.60			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Ops	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)			
Full Name of Individual (Last, First, Mid B. BUNTEN, BRIAN, , ,	dle Initial) or Full C	rganization Name	Date of Receipt			
Mailing Address 401 TATLOW DR	05 / D D / Y Y Y Y Y 2021					
City COLUMBIA	State MO	Zip Code 65203-6130	Transaction ID : PR2705070561977 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С					
Name of Employer (for Individual) United HealthCare Services Inc						
Receipt For: Primary General Other (specify) ▼	Receipt For: Aggregate Year-to-Date ▼ Primary General					
Full Name of Individual (Last, First, Mid C. SPADE, NATHAN, , ,	dle Initial) or Full C	rganization Name	Date of Receipt			
	Mailing Address 1060 ELLIOTT LANE					
City YORK	State PA	Zip Code 17403-3421	Transaction ID : PR2705987061977           Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	ů l					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 846.12	P/R Deduction (\$76.92 Bi-Weekly)			
SUBTOTAL of Receipts This Page (option	' nal)		653.82			
TOTAL This Period (last page this line nu	umber only)					

## Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12 13 14 15 16 11					
			13     14     15     16     1       erson for the purpose of soliciting contributions       to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group PA	AC)					
Full Name of Individual (Last, First, Middle BARBARO, PHILIP, , ,	e Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 670 ARBUTUS STREET			05 31 2021					
City MIDDLETOWN	State CT	Zip Code 06457-7106	Transaction ID : PR2705988261977 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		426.00					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) National Sales	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1798.68	P/R Deduction (\$213.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. KMIEC, ADAM, , ,	e Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 4736 PRAIRIE DUNES W			05 / D / Y Y Y Y 05 31 2021					
City EAGAN	State MN	Zip Code	Transaction ID : PR2705989261977					
		55123-2352	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm	Memo Item					
Receipt For:	Aggregate	Year-to-Date 🔻	7					
Other (specify) ▼		2115.30	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. PETRONE, DAMIAN, , ,	e Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 703 DEAN CT			05 / D D / Y Y Y Y 05 31 2021					
City WEST CHESTER	State PA	Zip Code 19382-2100	Transaction ID : PR2706418961977					
		19362-2100	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		38.46					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) : Mgt Cons CInt Svc	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 211.53	P/R Deduction (\$19.23 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional	)		849.06					
TOTAL This Period (last page this line num	ber only)							

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

## Use separate schedule(s)

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(check only one)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12 13 14 15 16 17					
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions					
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	d PAC (I	JnitedHealth Group PA	NC)					
Α.	Full Name of Individual (Last, First, Middle Init BARTHOLET, DANIEL, , ,	ial) or Full C	organization Name	Date of Receipt					
	Mailing Address 5918 VALEWOOD DRIVE	Ototo	Zin Onda						
	City MINNETONKA	State MN	Zip Code 55345-6545	Transaction ID : PR2706451161977					
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 384.60					
	Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) Tax	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)					
в.	Full Name of Individual (Last, First, Middle Init CHEN, HONG, , ,	ial) or Full C	organization Name	Date of Receipt					
	Mailing Address 8 LOCKE LANE	05 31 2021							
	City LEXINGTON	State MA	Zip Code 02420-2707	Transaction ID : PR2706452261977 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		Memo Item					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.53	P/R Deduction (\$19.23 Bi-Weekly)					
с.	Full Name of Individual (Last, First, Middle Init MULDOON, ALLISON, , ,	ial) or Full C	organization Name	Date of Receipt					
	Mailing Address 2500 CLARENDON BLVD APT 129			05 / D / Y Y Y Y 2021					
	City ARLINGTON	State VA	Zip Code 22201-3835	Transaction ID : PR2706452761977           Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1057.65	P/R Deduction (\$96.15 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)		••••••	615.36					
Т	OTAL This Period (last page this line number of	only)	••••••						

#### SCHEDULE A (FEC Form 3X) DEAEIDTA

## Use separate schedule(s)

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		Use separate schedule(s)	(check only one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a         11b         11c         12           13         14         15         16         17				
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full)							
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)				
Full Name of Individual (Last, First, Middle MOORE, KEVIN, , ,	Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 9405 EAGLE NEST LANE			05 31 / Y Y Y Y Y 05 31 2021				
City MIDDLETON	State WI	Zip Code 53562-5647	Transaction ID : PR2706453561977 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		458.00				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1556.27	P/R Deduction (\$229.00 Bi-Weekly)				
Full Name of Individual (Last, First, Middle B. HUNT, TIMOTHY, , ,	Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 5594 MARSHALL HOUSE			05 / D D / Y Y Y Y Y 2021				
City BURKE	State VA	Zip Code 22015-2141	Transaction ID : PR2740514061977				
	VA	22013-2141	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		76.92				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item				
Receipt For:	Aggregate	Year-to-Date ▼					
Other (specify) ▼		423.06	P/R Deduction (\$38.46 Bi-Weekly)				
Full Name of Individual (Last, First, Middle WEINBERG, EDWARD, , ,	Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 8625 APPLETON COURT			05 / D D / Y Y Y Y 2021				
City ANNANDALE	State VA	Zip Code 22003-3806	Transaction ID : PR2740514861977           Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		76.92				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) sion CEO	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional)			611.84				
TOTAL This Period (last page this line numb	er only)						

### SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

## Use separate schedule(s)

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		Use separate schedule(s)	(check only one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12 13 14 15 16 17				
			13     14     15     16     17       erson for the purpose of soliciting contributions       e to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group PA	AC)				
Full Name of Individual (Last, First, Middl ERICKSON, ELIZABETH, , ,	e Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 5301 CLINTON AVENUE			05 31 2021				
City MINNEAPOLIS	State MN	Zip Code 55419-1427	Transaction ID : PR2740516161977 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.			384.60				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9, Industry & Ntwk Rel	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)				
Full Name of Individual (Last, First, Middl DELANEY, KEVIN, , ,	e Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 2876 GENEVA ST	05 / D / Y Y Y Y 2021						
City DENVER	State CO	Zip Code 80238-3035	Transaction ID : PR2740759261977 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C						
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) Fin	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)				
Full Name of Individual (Last, First, Middl PONS, NATALIE, , ,	e Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 3209 GALLERIA UNIT 803 City	State	Zip Code	05 31 2021 Transaction ID : PR2740761961977				
EDINA	MN	55435-2547	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		384.60				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment Gen Counsel	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optiona	l)		846.12				
TOTAL This Period (last page this line num	ber only)						

## Use separate schedule(s)

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		Use separate schedule(s)	(check only one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12				
			13     14     15     16     17       erson for the purpose of soliciting contributions       e to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)		·····					
UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P/	λC)				
Full Name of Individual (Last, First, Middle <b>FEHR</b> , <b>STEPHANIE</b> , , ,	e Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 6601 BLACKFOOT PASS			05 / D D / Y Y Y Y Y 05 31 2021				
City EDINA	State MN	Zip Code 55439-1103	Transaction ID : PR2748020561977 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		384.60				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P, Mkt Grp CHRO	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)				
Full Name of Individual (Last, First, Middle B. PROCHNO, MICHAEL, , ,	e Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 4640 ST JAMES GATE			05 / D D / Y Y Y Y 2021				
City EXCELSIOR	State MN	Zip Code 55331-9397	Transaction ID : PR2748021961977 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		76.92				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs Acct Mgt	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)				
Full Name of Individual (Last, First, Middle C. SEVERANCE, DAVID, , ,	e Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 2160 N MARION ST			05 / Y Y Y Y 05 31 2021				
City DENVER	State CO	Zip Code 80205-5245	Transaction ID : PR2750288161977 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		76.92				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 1ed Dir	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional	)		538.44				
TOTAL This Period (last page this line num	ber only)						

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TEMIZED RECEIPTS			(check only one)				
		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17				
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full)							
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P	AC)				
Full Name of Individual (Last, First, Middle <b>A.</b> ORIE, TIMOTHY, , ,	Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 23 BISHOP LANE			05 31 2021				
City	State	Zip Code	Transaction ID : PR2754244161977				
SUDBURY	MA	01776-1701	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		384.60				
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item				
United HealthCare Services Inc	VP	Human Capital					
Receipt For:	Aggregate	Year-to-Date <b>V</b>					
Primary General		2115.30	P/R Deduction (\$192.30 Bi-Weekly)				
Other (specify) <b>v</b>		2115.30	1				
Full Name of Individual (Last, First, Middle B. PAGET, JAMIE, , ,	Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 15268 LOUISIANA AVE			05 31 2021				
City	State	Zip Code	Transaction ID : PR2754246061977				
SAVAGE	MN	55378-5654	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		80.00				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Software Engineering	Memo Item				
Receipt For:	Aggregate	Year-to-Date ▼	-				
Primary General Other (specify) ▼		, 400.00	P/R Deduction (\$40.00 Bi-Weekly)				
Full Name of Individual (Last, First, Middle C. MUSSLEWHITE, ROBERT, , ,	Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 3033 UNIVERSITY TERRA	CE NW		05 31 2021				
City	State	Zip Code	Transaction ID : PR2754659961977				
WASHINGTON	DC	20016-3462	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		384.60				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CEO	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional).			849.20				
TOTAL This Period (last page this line number	er only)						

## Use separate schedule(s)

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		Use separate schedule(s)	(check only one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a         11b         11c         12           13         14         15         16         1				
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full)							
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)				
Full Name of Individual (Last, First, Middle I A. SIMON, JOHN, , ,	nitial) or Full C	rganization Name	Date of Receipt				
Mailing Address 1388 DIAMOND COURT			05 31 2021				
City PITTSBURGH	State PA	Zip Code 15241-1220	Transaction ID : PR2754663261977 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		384.60				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Advisory Svc	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)				
Full Name of Individual (Last, First, Middle I B. KONTOR, JOHN, , ,	nitial) or Full C	rganization Name	Date of Receipt				
Mailing Address 123A SPA VIEW AVE			05 31 2021				
City ANNAPOLIS	State MD	Zip Code 21401-3542	Transaction ID : PR2754673661977				
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Advisory Svc	Memo Item				
Receipt For:	I	Year-to-Date ▼	-				
Primary     General       Other (specify) ▼		1057.65	P/R Deduction (\$96.15 Bi-Weekly)				
Full Name of Individual (Last, First, Middle I C. MAACK, JONATHAN, , ,	nitial) or Full C	rganization Name	Date of Receipt				
Mailing Address 4480 DEXTER ST NW			05 / D D / Y Y Y Y 05 31 2021				
City WASHINGTON	State DC	Zip Code 20007-1113	Transaction ID : PR2754707461977 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		384.60				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional)			961.50				
TOTAL This Period (last page this line number	er only)						

## Use separate schedule(s)

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		Use separate schedule(s)	(check only one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12				
			13     14     15     16     17       berson for the purpose of soliciting contributions       e to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)							
UnitedHealth Group Incorp	orated PAC (l	JnitedHealth Group P/	AC)				
Full Name of Individual (Last, First, Mic BOTHRA, SIDDHARTH, , ,	Idle Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 17200 SE 45TH STRE	ET		05 31 2021				
City BELLEVUE	State WA	Zip Code 98006-6510	Transaction ID : PR2754720761977 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		384.60				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 Ops	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)				
Full Name of Individual (Last, First, Mic B. CHRISTY, MICHAEL, , ,	Idle Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 3024 FOUNTAIN WAY			05 / <sup>1</sup> 2021				
City SHAKOPEE	State MN	Zip Code 55379-5424	Transaction ID : PR2755315261977 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		192.30				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Bus Dev Mktg	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1057.65	P/R Deduction (\$96.15 Bi-Weekly)				
Full Name of Individual (Last, First, Mic C. SEVILLE, KATHERINE, , ,	Idle Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 333 ADAMS ST			05 / D D / Y Y Y Y 05 31 2021				
City DECATUR	State GA	Zip Code 30030-5205	Transaction ID : PR2755317261977 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		38.46				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Capability Manager	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 211.53	P/R Deduction (\$19.23 Bi-Weekly)				
SUBTOTAL of Receipts This Page (option	nal)		615.36				
TOTAL This Period (last page this line nu	umber only)						

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

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		Use separate schedule(s)	(che	(check only one)						
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a	11b	11c	12		
	y information copied from such Reports and Sta for commercial purposes, other than using the r									
$\overline{\ }$	NAME OF COMMITTEE (In Full)	//								
/	UnitedHealth Group Incorporated	a PAC (l	UnitedHealth Group F	PAC)						
A.	Full Name of Individual (Last, First, Middle Initia MAYER, SHANNON, , ,	ll) or Full O	Drganization Name	[	Date of	Receipt				
	Mailing Address 13159 DANUBE LANE				05	/ D 31	D / Y	y y 2021	Y	
	City ROSEMOUNT	State MN	Zip Code 55068-4378			<b>ction ID</b> : of Each F		343961973 his Period	7	
						-	-	76.9	92	
			cupation (for Individual) Gen Mgmt		Me	mo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P	/R Dedu	ction (\$38	8.46 Bi-We	eekly)		
B.	Full Name of Individual (Last, First, Middle Initia WEILER, KATHY, , ,	ll) or Full O	Drganization Name	[	Date of	Receipt				
	Mailing Address 1250 CANTON AVENUE					05 / D D / Y Y Y Y 2021				
	City MILTON	State MA	Zip Code 02186-2414			<b>ction ID :</b> of Each F		347661977 nis Period	7	
	FEC ID number of contributing federal political committee.	C			384.60					
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) s Segment CMO		Me	mo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/	/R Dedu	ction (\$19	2.30 Bi-W	/eekly)		
C.	Full Name of Individual (Last, First, Middle Initia WILSON, DANIEL, , ,	ll) or Full O	Drganization Name		Date of	Receipt				
	Mailing Address 15619 SWANSCOMBE LOOP				05 / D D / Y Y Y Y Y 2021					
	City UPPER MARLBORO	State MD	Zip Code 20774-8412			of Each F		34786197 nis Period	/	
	FEC ID number of contributing federal political committee.	С				y 1		38.4	10	
Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) Govt Affs Dir			Me	mo Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 211.20	P	/R Dedu	ction (\$19	9.20 Bi-We	eekly)		
s	UBTOTAL of Receipts This Page (optional)			►		9		499.9	2	
Т	OTAL This Period (last page this line number or	וy)		•		7				

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17			
or for commercial purposes, other than using			erson for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	NC)					
Full Name of Individual (Last, First, Middle CRAIG, RYAN, , ,	Initial) or Full O	rganization Name	Date of Receipt			
Mailing Address 696 WOODLAND HILL CC			05 / D D / Y Y Y Y 2021			
City MEDINA	State MN	Zip Code 55340-2300	Transaction ID : PR2755534161977			
FEC ID number of contributing	C	55340-2300	Amount of Each Receipt this Period 76.92			
federal political committee.		upation (for Individual)	Memo Item			
United HealthCare Services Inc		ef Talent Officer				
Receipt For:		Year-to-Date ▼	-			
Primary     General       Other (specify) ▼		423.06	P/R Deduction (\$38.46 Bi-Weekly)			
Full Name of Individual (Last, First, Middle ABRAHAM, SANTIAGO, , ,	Initial) or Full O	rganization Name	Date of Receipt			
Mailing Address 2637 ARCOLA LANE						
City	State	Zip Code	Transaction ID : PR2755652161977			
WAYZATA	MN	55391-9703	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		384.60			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Seg CIO	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)			
Full Name of Individual (Last, First, Middle C. CHA, STEPHEN, , ,	Initial) or Full O	rganization Name	Date of Receipt			
Mailing Address 1740 POTOMAC AVENUE	E SOUTHEAST		05 / D D / Y Y Y Y 05 31 2021			
City	State	Zip Code	Transaction ID : PR2755767361977			
WASHINGTON	DC	20003-3135	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		192.30			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Dir/CMO	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1923.00	P/R Deduction (\$192.30 Bi-Weekly)			
SUBTOTAL of Receipts This Page (optional)		· ·				

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12						
Any information copied from such Reports and or for commercial purposes, other than using					ourpo									
NAME OF COMMITTEE (In Full)														
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)											
Full Name of Individual (Last, First, Middle           DUPLECHIEN, RITCHIE, , ,	Initial) or Full C	rganization Name	Date of Receipt											
Mailing Address 617 CHASE TREE ST				05 / D D / Y Y Y Y 2021										
City LAS VEGAS	State NV	Zip Code 89144-4502	A	Transaction ID : PR2755929861977 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		76.92											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg		Me	mo	Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/	R Dedu	uctior	n (\$38.4	46 Bi-We	ekly)						
Full Name of Individual (Last, First, Middle B. KRAUTKRAMER, MITCHELL, , ,	Initial) or Full C	rganization Name	0	Date of	Rec	eipt								
Mailing Address 8729 COTTONWOOD LAN	IE		05 / 0 0 / 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0											
City EDEN PRAIRIE	State MN	Zip Code 55347-2216						9576197 is Period	7					
FEC ID number of contributing federal political committee.	С	Occupation (for Individual) Dir M A			76.92									
Name of Employer (for Individual) United HealthCare Services Inc					Memo Item									
Receipt For:	Aggregate	Year-to-Date <b>V</b>				(\$2.2	40 D' 144							
Other (specify) ▼		423.06	P/	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Middle C. ASHENHURST, KARLA, , ,	Initial) or Full C	rganization Name	C	Date of	Rec	eipt								
Mailing Address 295 N ELM GROVE ROAD	State	Zip Code		M M 05	/	31		2021 1 <b>7366197</b>						
BROOKFIELD	WI	53005-6212	A					is Period	1					
FEC ID number of contributing federal political committee.	С			_	,	, .	, ,	115.:	38					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) t Affs Dir		Me	emo	ltem								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date V 634.59	P/R Deduction (\$57.69 Bi-Weekly)											
SUBTOTAL of Receipts This Page (optional)								269.2	22					
TOTAL This Period (last page this line numb	er only)													

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12								
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any p ddress of any political committee	13     14     15     16     17       erson for the purpose of soliciting contributions       e to solicit contributions from such committee.								
$\setminus$	NAME OF COMMITTEE (In Full)											
	UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	AC)								
A.	Full Name of Individual (Last, First, Middle Initia MASONER, AUDREY, , ,	al) or Full O	rganization Name	Date of Receipt								
	Mailing Address 15400 MAPLE STREET			05 31 2021								
	City OVERLAND PARK	State KS	Zip Code 66223-3262	Transaction ID : PR2756359861977           Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		76.92								
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Dir F	upation (for Individual) Fin	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Initia HERMELING III, THEODORE, , ,	al) or Full O	rganization Name	Date of Receipt								
	Mailing Address 117 5TH STREET			05 31 Y Y Y Y Y 05 31 2021								
	City WILMETTE	State	Zip Code 60091-3405	Transaction ID : PR2756521661977 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		384.60								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)								
C.	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name	Date of Receipt								
	Mailing Address 2209 PARIS AVENUE N	04-4-	The Oct	05 / D D / Y Y Y Y 2021								
	City WEST LAKELAND	State MN	Zip Code 55082-1357	Transaction ID : PR2757435761977 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		76.92								
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)			538.44								
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			for each category of the Detailed Summary Page		<b>X</b> 11a		11b	11c	12							
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or	for commercial purposes, other than using the	e name and a	ddress of any political committee	e to s	olicit co	ntrib	outions f	from such	n committ	ee.						
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)												
Α.	Full Name of Individual (Last, First, Middle In MALLEY, KENNETH, , ,		) or Full Organization Name				Date of Receipt									
	Mailing Address 764 WEST SADDLE RIVER F				05 / D D / Y Y Y Y 2021											
	City HO HO KUS	State NJ	Zip Code 07423-1645	_					<b>13666197</b> is Period	7						
	FEC ID number of contributing federal political committee.	С	С				Amount of Each Receipt this Period 384.60									
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Gen Mgmt	M	emo	tem										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	]	P/R Ded	lucti	on (\$19	2.30 Bi-W	/eekly)							
в.	Full Name of Individual (Last, First, Middle In AZAM, MISHAEL, , ,	itial) or Full O	rganization Name	Date of Receipt												
	Mailing Address 629 JEFFERSON AVENUE			м м 05	/	31	) / Y	2021	Y							
	City CHERRY HILL	State NJ	Zip Code 08002-3704					PR27593 Receipt th	4386197	7						
	FEC ID number of contributing federal political committee.	С	77.00													
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ernal Affs Dir		Memo Item											
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$38.50 Bi-Weekly)													
с.	Full Name of Individual (Last, First, Middle In BROWN, KAROOM, , ,	itial) or Full O	rganization Name		Date of	f Re	eceipt									
	Mailing Address 11711 SAVONA WAY	State	Zip Code		05 		31		2021							
	City ORLANDO	FL	32827-7267						42236197 is Period	/						
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .	, ,	384.6	60						
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus Dev		M	emo	o Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	]	P/R Ded	lucti	on (\$19	2.30 Bi-W	/eekly)							
s	UBTOTAL of Receipts This Page (optional)			•			, .	. ,	846.2	20						
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	OF COMMITTEE (In Full) edHealth Group Incorporated	PAC (l	Jni	tedHealth Group PA	C)													
	ame of Individual (Last, First, Middle Initial T, BRITTNEY, , ,	) or Full O	rgar	nization Name	Date of Receipt													
Mailing	Address 3360 MICANOPY TRAIL	1			05 / D D / Y Y Y Y Y 2021													
City		State FL		Zip Code							97564619							
	AHASSEE			32312-3670	_ /	Amour	t of	Ea	ich Re	eceipt t	his Period	k						
	D number of contributing political committee.	С			76.92													
	of Employer (for Individual) HealthCare Services Inc		•	ion (for Individual) Affs Dir	Memo Item													
Receip	t For:	Anareaate	Yea	r-to-Date ▼	-													
	Primary General Dther (specify) ▼		104	423.06	P	/R Dec	ducti	on	(\$38.4	16 Bi-W	/eekly)							
	ame of Individual (Last, First, Middle Initial LAIFER, MARISSA, , ,	nization Name	Date of Receipt															
Mailing	Address 1050 N STUART ST #400				05 / D D / Y Y Y Y Y 2021													
City		State		Zip Code		Trans	sacti	ion	ID : F	PR2759	75686197	77						
ARLIN	GTON	VA	VA 22201-5727						Amount of Each Receipt this Period									
	D number of contributing political committee.	С			384.60													
	of Employer (for Individual) Services, Inc		Occupation (for Individual) VP Regl Affs						Memo Item									
	t For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly) Date of Receipt													
	ame of Individual (Last, First, Middle Initial RONZO, CHRISTINE, , ,	) or Full O	rgar	nization Name														
Mailing	Address 6 CRAIG LN					<sup>M</sup> 05	/	Γ	D D 31	/	2021	Y						
City		State		Zip Code		Tran	sact	tion	1D : I	PR275	99781619	77						
HING	НАМ	MA		02043-3411	_ /	Amour	t of	Ea	ich Re	eceipt t	his Period	k						
	D number of contributing political committee.	С						y		,	76	.92						
	of Employer (for Individual) Services, Inc	Occu VP N	•	ion (for Individual)		N	lemo	o Ite	em									
	t For: Primary General Dther (specify)	Aggregate	Yea	r-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)													
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111			for each category of the Detailed Summary Page		<b>X</b> 11a 13	$\vdash$	11b	11c	12	17			
	y information copied from such Reports and Sta for commercial purposes, other than using the r				for the	purp	ose of	soliciting	contribu	tions			
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	InitedHealth Group PA	AC)									
A.	Full Name of Individual (Last, First, Middle Initia KELLOGG, PETER, , ,	al) or Full Or	ganization Name		Date of	Rec	ceipt						
	Mailing Address 1515 JEFFERSON AVENUE				05 31 / Y Y Y Y Y								
	City NEW ORLEANS	State LA	Zip Code 70115-4120						8416197 is Period	7			
	FEC ID number of contributing federal political committee.	С					,		76.	92			
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) ssc Gen Counsel		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	]	P/R Dedu	uctio	n (\$38.4	46 Bi-We	ekly)				
в.	Full Name of Individual (Last, First, Middle Initia ROBERT, MICHAEL, , ,	al) or Full Or	ganization Name		Date of	Red	ceipt						
	Mailing Address 79373 FITZGERALD CHURCH ROAD City	State	Zip Code	05 / 31 / 2021 Transaction ID : PR2759986061977									
	COVINGTON	LA	70435-7809	$\vdash$					8606197 is Period	7			
	FEC ID number of contributing federal political committee.	С		76.92									
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP (	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initia DECKER, WYATT, , ,	al) or Full Or	ganization Name		Date of	Rec	ceipt						
	Mailing Address 1482 HUNTER DRIVE	1.0			05	/	D D D 31	L	2021				
	City WAYZATA	State MN	Zip Code 55391-9658				-		<b>3406197</b> is Period	7			
	FEC ID number of contributing federal political committee.	С				_	y	, ,	384.	60			
	Name of Employer (for Individual) Optum Services, Inc Receipt For:		pation (for Individual) Segment CEO		Me	emo	Item						
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	]	P/R Dedi	uctio	on (\$192	2.30 Bi-W	/eekly)				
s	UBTOTAL of Receipts This Page (optional)			•			,		538.4	44			
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		for each category of the Detailed Summary Page	<b>X</b> 11a	11b	11c	12	□ <sup> </sup>					
Any information copied from such Reports and												
or for commercial purposes, other than using th	ie name and a	ddress of any political committee	e to solicit co	ntribution	s from suc	n committe	e.					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ted PAC (I	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle In GRUHN, GINA, , ,	nitial) or Full C	rganization Name	Date of Receipt									
Mailing Address 13 WEATHER VANE DRIVE			M M 05	05 31 Y Y Y Y Y								
City MORRISTOWN	State NJ	Zip Code 07960-4758			D: PR2760 Receipt th		7					
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 384.60									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) CInt Svc Acct Mgmt	M	emo Item	1							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Ded	luction (\$ <sup>4</sup>	192.30 Bi-V	Veekly)						
Full Name of Individual (Last, First, Middle In B. MASTEN, DALE, , ,	nitial) or Full C	rganization Name	Date o	f Receipt								
Mailing Address 9845 BENNINGTON DRIVE	1		M M 05		D / Y	y y 2021	Y					
City SHARONVILLE	State OH	Zip Code 45241-3619			: PR2760 Receipt th		7					
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) Optum Services, Inc		Occupation (for Individual) Dir Regl Affs			Memo Item							
Receipt For:	Aggregate	Year-to-Date <b>V</b>										
Primary General Other (specify) ▼		2115.30	P/R Ded	uction (\$1	192.30 Bi-W	/eekly)						
Full Name of Individual (Last, First, Middle II DELMONICO, SUSAN, , ,	nitial) or Full C	rganization Name	Date o	f Receipt								
Mailing Address 12 MULBERRY CIRCLE			M 05		31	2021						
City JOHNSTON	State RI	Zip Code 02919-2519			D:PR2760 Receipt th		7					
FEC ID number of contributing federal political committee.	C			,		230.7	6					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) c Gen Counsel		emo Item	1							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1269.18	P/R Dec	luction (\$	115.38 Bi-V	Veekly)						
SUBTOTAL of Receipts This Page (optional)		•••••		,	,	999.9	6					
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		for each category of the Detailed Summary Page	<b>X</b> 11		11b	11c	12	47					
Any information copied from such Reports and or for commercial purposes, other than using th				he pu									
NAME OF COMMITTEE (In Full)		and be any pointour committee		551111	201010								
UnitedHealth Group Incorporat	ted PAC (I	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle In GALLE, JOHN, , ,	nitial) or Full C	rganization Name	Date	e of R	eceipt								
Mailing Address 5314 VALLARTA DRIVE				05 / D / Y Y Y Y 2021									
City SAINT LOUIS	State MO	Zip Code 63128-3516				PR27607 Receipt th	79886197 is Period	7					
FEC ID number of contributing federal political committee.	С						76.9	92					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Pharm Ops		Mem	o Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 423.06	P/R [	Deduct	tion (\$38	.46 Bi-We	ekly)						
Full Name of Individual (Last, First, Middle II BARR, CHRISTY M, , ,	nitial) or Full C	rganization Name	Date	e of R	eceipt								
Mailing Address 6348 CARRIAGE OAK WAY			05 / 31 / 2021 Transaction ID : PR2760819661977										
	State OH	Zip Code						7					
LIBERTY TWP		45011-2763	Amo	ount o	f Each F	Receipt th	is Period						
FEC ID number of contributing federal political committee.	С	C Occupation (for Individual) VP Pharm Ops			76.92								
Name of Employer (for Individual) Optum Services, Inc					Memo Item								
Receipt For:	Aggregate	Year-to-Date 🔻											
Primary General Other (specify) ▼		423.06	P/R D	educt	ion (\$38.	.46 Bi-We	ekly)						
Full Name of Individual (Last, First, Middle II CRAWFORD, KEVIN, , ,	nitial) or Full C	rganization Name	Date	e of R	eceipt								
Mailing Address 127 CHUZZLEWIT DOWN			C	о 5	31		2021						
City BRENTWOOD	State TN	Zip Code 37027-7627				Receipt th	32516197 is Period	7					
FEC ID number of contributing federal political committee.	С				y	,	230.7	76					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) rnal Affs Dir		Mem	io Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1269.18	P/R [	Deduc	tion (\$11	5.38 Bi-W	/eekly)						
SUBTOTAL of Receipts This Page (optional)					,	.,	384.6	60					
TOTAL This Period (last page this line number	r only)												

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12										
Any information copied from such Reports or for commercial purposes, other than us	and Statements main and a	A not be sold or used by any p ddress of any political committe	13     14     15     16     17       berson for the purpose of soliciting contributions       e to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full)													
UnitedHealth Group Incorp	orated PAC (I	JnitedHealth Group P	4C)										
Full Name of Individual (Last, First, Mid A. VELASCO, JOEL, , ,	ddle Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 6352 31 PLACE NW S	Т		05 / D D / Y Y Y Y 05 31 2021										
City WASHINGTON	State DC	Zip Code 20015-2358	Transaction ID : PR2760938561977 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		384.60										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Intl Relations	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Mid B. WINN, JOSEPH, , ,	ddle Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 4401 GREGG ROAD													
City BROOKEVILLE	State MD	Zip Code 20833-1033	Transaction ID : PR2760940261977										
		20633-1033	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		269.22										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ernal Affs Dir	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1480.71	P/R Deduction (\$134.61 Bi-Weekly)										
Full Name of Individual (Last, First, Mic C. MILLER, CORINNA, , ,	ddle Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 6083 OLD BRICKSTO			05 / D D / Y Y Y Y 2021										
City GREENSBORO	State NC	Zip Code 27455-8335	Transaction ID : PR2761090061977 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		38.46										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Gen Mgmt	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 211.53	P/R Deduction (\$19.23 Bi-Weekly)										
SUBTOTAL of Receipts This Page (option	nal)		692.28										
TOTAL This Period (last page this line n	umber only)												

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★         11a         11b         11c         12           13         14         15         16         17								
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle I O'BRIEN, MICHAEL, , ,	nitial) or Full C	organization Name	Date of Receipt								
Mailing Address 11017 CAVELL CIR			05 31 Y Y Y Y 05 31 2021								
City BLOOMINGTON	State MN	Zip Code 55438-2284	Transaction ID : PR2761138261977           Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		96.14								
Name of Employer (for Individual) United HealthCare Services Inc	Occ Dir	upation (for Individual) Tax	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 528.77	P/R Deduction (\$48.07 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I B. ARYA, RAJIV, , ,	nitial) or Full C	Organization Name	Date of Receipt								
Mailing Address 4 GALWAY ROAD			05 / D D / Y Y Y Y Y 2021								
City SKILLMAN	State NJ	Zip Code 08558-1731	Transaction ID : PR2762648761977								
		00000-1701	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		76.92								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Director, Advisory Svcs	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify) ▼		423.06	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I SONNIER, SUSAN, , ,	nitial) or Full C	organization Name	Date of Receipt								
Mailing Address 301 DEMONBREUN ST UN			05 / D D / Y Y Y Y Y 2021								
City NASHVILLE	State TN	Zip Code 37201-2248	Transaction ID : PR2762649961977           Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		230.76								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1269.18	P/R Deduction (\$115.38 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			403.82								
TOTAL This Period (last page this line numbe	er only)										

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17								
Any information copied from such Reports and or for commercial purposes, other than using t	Statements make he name and a	I ay not be sold or used by any p uddress of any political committe	erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)		, p									
UnitedHealth Group Incorpora	ted PAC (	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle I CLAYTON, JUSTIN, , ,	nitial) or Full C	organization Name	Date of Receipt								
Mailing Address 163 BRIER RIDGE DRIVE			05 31 Y Y Y Y Y 2021								
City DURHAM	State NC	Zip Code 27703-0339	Transaction ID : PR2762749961977 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		153.84								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ernal Affs Dir	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 846.12	P/R Deduction (\$76.92 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I <b>B.</b> TARVESTAD, KATHERINE, , ,	nitial) or Full C	rganization Name	Date of Receipt								
Mailing Address 5095 KELSEY TERR			05 31 2021								
City EDINA	State MN	Zip Code 55436-2717	Transaction ID : PR2762955961977 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Compli	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General Other (specify) ▼		2115.30	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle I BIDINGER, DANIEL, , ,	nitial) or Full C	organization Name	Date of Receipt								
Mailing Address 3757 INDEPENDENCE RD	State	Zip Code	05 31 2021								
	MN	55359-9759	Transaction ID : PR2762957561977           Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		40.00								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Strategy	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 220.00	P/R Deduction (\$20.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			578.44								
TOTAL This Period (last page this line numbe	er only)										

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		Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12										
Any information copied from such Reports and or for commercial purposes, other than using t			13     14     15     16       berson for the purpose of soliciting contributions       e to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full)													
UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P	AC)										
Full Name of Individual (Last, First, Middle GUNDBERG, CORY, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 6609 DOVRE DR			05 / D D / Y Y Y Y 05 31 2021										
City EDINA	State MN	Zip Code 55436-1711	Transaction ID : PR2763080561977 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		384.60										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Innovation	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle B. SIMMONS, CHRISTOPHER, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 18505 6TH AVENUE N			05 / 31 / 2021										
City PLYMOUTH	State MN	Zip Code 55447-3318	Transaction ID : PR2763179961977 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		384.60 Memo Item										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) M A											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle DAVIS, JENNIFER, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 3347 RIVER LANDINGS BI			05 / D D / Y Y Y Y 2021										
City HILLIARD	State OH	Zip Code 43026-7800	Transaction ID : PR2763180361977 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		96.00										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ernal Affs Dir	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 508.92	P/R Deduction (\$48.00 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional).			865.20										
TOTAL This Period (last page this line number	er only)												

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

## Use separate schedule(s)

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(check only one)

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			for each category of the Detailed Summary Page	×	11a 13		] 11   14		11c 15			17		
	y information copied from such Reports and State for commercial purposes, other than using the na				or the		pos	se of s	soliciting	g contr	ributio	ons		
$\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	UnitedHealth Group PA	C)										
Α.	Full Name of Individual (Last, First, Middle Initial) LEFF, ERIN, , ,		Organization Name	Date of Receipt										
	Mailing Address 2633 WEST VIEWMONT WAY W	EST State	Zip Code	05 / 31 / 2021 Transaction ID : PR2767366861977										
	SEATTLE	WA	98199-3018				-				-			
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period  384.60  Memo Item										
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Clin Ops											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/I	R Dedi	uctio	on	(\$192	.30 Bi-V	Veekly)	)			
B.	Full Name of Individual (Last, First, Middle Initial) FOLEY, BARBARA, , ,	or Full C	Organization Name		ate of	Re	ecei	ipt						
	Mailing Address 6260 BLACK FOX WAY				<sup>M</sup> 05	1	Ľ	D D 31	/ Y	y 2021				
	City TALLAHASSEE	State FL	Zip Code 32312-4504	Transaction ID : PR2769239261977           Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		92.30										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev		Me	emo	o Ite	em						
	Receipt For:     A       Primary     General       Other (specify) ▼	Aggregate	Year-to-Date ▼ 507.65	P/R Deduction (\$46.15 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initial) RICHARDSON, GENEVRA, , ,	or Full C	Organization Name		ate of	Re	ecei	ipt						
	Mailing Address 3618 N 51ST PLACE	_			<sup>M</sup> 05	/	L	D D D		2021	1			
	City PHOENIX	State AZ	Zip Code 85018-6158				-		PR2778 eceipt th		-			
	FEC ID number of contributing	С					_a				84.60	)		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs		Me	emo	o Ite	em						
	Receipt For:     A       Primary     General       Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/	R Ded	uctio	on	(\$192	.30 Bi-V	Veekly	)			
s	UBTOTAL of Receipts This Page (optional)		▶				9		9	8	61.50	)		
т	OTAL This Period (last page this line number only	/)	····· •				-				-			

## Use separate schedule(s)

FOR LINE NUMBER:

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			Use separate schedule(s)	(ch	(check only one)							
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	3	<b>K</b> 11a 13		11b 14	11c	12	17		
	y information copied from such Reports and Sta for commercial purposes, other than using the				for the		pose of	soliciting	contribu	tions		
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (L	JnitedHealth Group PA	AC)								
A.	Full Name of Individual (Last, First, Middle Initia HAUSMAN, ERIC, , ,	al) or Full Or	rganization Name		Date of	Re	eceipt					
	Mailing Address 1617 WEST 25TH STREET				05 31 2021							
	City MINNEAPOLIS	State MN	Zip Code 55405-2466						5 <b>1276197</b> is Period			
	FEC ID number of contributing federal political committee.	С							384.	60		
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Comm		Me	əmc	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Initia BAKER, OMAR, , ,	al) or Full Or	rganization Name		Date of	Re	eceipt					
	Mailing Address 505 WEST 19TH STREET MANHATTAN		<sup>M</sup> 05	/	31		y y 2021	Y				
	City NEW YORK	State NY	Zip Code 10011-2883		Transaction ID : PR27789866619 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C					384.60					
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ? Strat Intv & CMO HIth Svc		Me	emc	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	]	P/R Dedu	uctio	on (\$192	2.30 Bi-W	/eekly)				
С.	Full Name of Individual (Last, First, Middle Initia PIERINI, RYAN, , ,	al) or Full Or	rganization Name		Date of	Re	eceipt					
	Mailing Address 3761 SAN YSIDRO WAY				05 <sup>M</sup>	1	31	) / Y	ү ү 2021	Y		
	City SACRAMENTO	State CA	Zip Code 95864-2866				-		98736197 is Period			
	FEC ID number of contributing federal political committee.	С		<u> </u>		, .	9	76.	92			
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) Dir Govt Affs					) Item					
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 423.06					on (\$38	.46 Bi-We	eekly)			
s	UBTOTAL of Receipts This Page (optional)			•			, ,		846.	12		
т	OTAL This Period (last page this line number o	nly)		•			<del>.</del>					

FOR LINE NUMBER:

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ITE	MIZED RECEIPTS		for each category of the Detailed Summary Page	X     11a     11b     11c     12       13     14     15     16     17
Any or f	v information copied from such Reports and State for commercial purposes, other than using the na	ements ma ame and a	ay not be sold or used by any pe ddress of any political committee	rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	C)
<b>A.</b>	Full Name of Individual (Last, First, Middle Initial) DOCIMO, ANNE, , , Mailing Address 338 S 4TH STREET City PHILADELPHIA	) or Full O State PA	rganization Name Zip Code 19106-4217	Date of Receipt 05 / 31 / 2021 Transaction ID : PR2779271861977 Amount of Each Receipt this Period
1 ī ī	Primary General Other (specify) ▼	Mkt Aggregate	upation (for Individual) Grp Chief Med Off Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)
B	Full Name of Individual (Last, First, Middle Initial) LEWIS, PATRICIA, , , Mailing Address 10823 ROCK RUN DRIVE City POTOMAC FEC ID number of contributing rederal political committee.	Date of Receipt		
ī	Primary General Other (specify) ▼	EVF Aggregate	upation (for Individual) P Human Capital Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)
<b>C.</b> _	Full Name of Individual (Last, First, Middle Initial) GHAZANFARIAN TALEGHANI, AZI Mailing Address 1039 MOUNTAIN AVE		rganization Name	Date of Receipt
-       	City BERKELEY HEIGHTS FEC ID number of contributing iederal political committee. Name of Employer (for Individual) Optum Care, Inc. Receipt For:	Dir C	Zip Code 07922-2343 upation (for Individual) Gen Mgmt Year-to-Date ▼ 423.06	Orange       Orange
รเ	JBTOTAL of Receipts This Page (optional)		•	846.12
тс	OTAL This Period (last page this line number onl	y)		

## Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17						
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle <b>A.</b> ROMANOW, KATHLEEN, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 6804 MARBURY ROAD			M M / D D / Y Y Y Y 05 31 2021						
City BETHESDA	State MD	Zip Code 20817-6052	Transaction ID : PR2782733061977           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		192.30						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1057.65	P/R Deduction (\$96.15 Bi-Weekly)						
Full Name of Individual (Last, First, Middle SABAL, PETER, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 6151 WILLOW ROCK ST			05 / D D / Y Y Y Y 2021						
City	State NV	Zip Code	Transaction ID : PR2783559961977						
LAS VEGAS	INV	89135-1482	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	FEC ID number of contributing federal political committee.								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	7						
Other (specify) ▼		423.06	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. OWEN, CHRISTOPHER, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 29 CHAMPIONS LANE			05 / D D / Y Y Y Y 2021						
City SAN ANTONIO	State TX	Zip Code 78257-1292	Transaction ID : PR2786908661977           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			653.82						
TOTAL This Period (last page this line numb	er only)								

### Use separate schedule(s)

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17						
			erson for the purpose of soliciting contributions to solicit contributions from such committee.						
NAME OF COMMITTEE (In UnitedHealth Group		JnitedHealth Group PA	NC)						
Full Name of Individual (Las A. CONWAY, PATRICK, , ,	t, First, Middle Initial) or Full Or	rganization Name	Date of Receipt						
Mailing Address 190 WINDIN	NG RIVER RD		05 31 2021						
City WELLESLEY	State MA	Zip Code 02482-7320	Transaction ID : PR2787875561977Amount of Each Receipt this Period						
FEC ID number of contributi federal political committee.	ng C		384.60						
Name of Employer (for Indiv Optum Services, Inc	,	upation (for Individual) Unit CEO	Memo Item						
Receipt For: Primary Gene Other (specify) ▼		Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Las CLARKE, LACEY, , ,	t, First, Middle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 15 MILO ST			05 / D D / Y Y Y Y 2021						
City HUDSON	State	Zip Code 12534-2722	Transaction ID : PR2789668261977						
FEC ID number of contributi federal political committee.			Amount of Each Receipt this Period						
Name of Employer (for Indiv United HealthCare Services In	'	upation (for Individual) Govt Affs	Memo Item						
Receipt For: Primary Gene Other (specify) ▼		Year-to-Date ▼ 846.12	P/R Deduction (\$76.92 Bi-Weekly)						
Full Name of Individual (Las c. SARGENT, PATRIC	t, First, Middle Initial) or Full Or $K,,,$	rganization Name	Date of Receipt						
Mailing Address 8493 SILVE	1		05 / D / Y Y Y Y 2021						
City LORTON	State VA	Zip Code 22079-4404	Transaction ID : PR2790273061977           Amount of Each Receipt this Period						
FEC ID number of contributi federal political committee.	ng C		384.60						
Name of Employer (for Indiv Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary Gene Other (specify)		Year-to-Date ▼ 2115.30	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This F	Page (optional)		923.04						
TOTAL This Period (last page	this line number only)	<b>b</b>							

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

FOR LINE NUMBER:

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ITEMIZED RECEIPTS			Use separate schedule(s)	(ch	(check only one)								
			for each category of the Detailed Summary Page		¥ 11a 13		11b	11c	12	<b></b>			
	y information copied from such Reports and S for commercial purposes, other than using the				for the								
	NAME OF COMMITTEE (In Full)												
$\rangle$	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)									
Α.	Full Name of Individual (Last, First, Middle Init BILLS, MATTHEW, , ,	ial) or Full O	rganization Name		Date o	f Re	eceipt						
	Mailing Address 18961 DEVONSHIRE ST				м м 05	/	D 31	D / Y	Y Y 2021	Y			
	City BEVERLY HILLS	State MI	Zip Code 48025-4031	_					55876197 his Period				
	FEC ID number of contributing federal political committee.	С							96.	00			
	Name of Employer (for Individual) Optum Services, Inc		ipation (for Individual) Clnt Svc Acct Mgt		М	emo	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 480.00	]	P/R Deduction (\$48.00 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Init HAMDORF, JON, , ,	ial) or Full O	rganization Name		Date o	f Re	eceipt						
	Mailing Address 17600 W 84TH STREET		05 / <sup>1</sup> 2021										
	City	State		Transaction ID : PR2791330861977									
	LENEXA FEC ID number of contributing federal political committee.	KS C	66219-8062	Amount of Each Receipt this Period					_				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Health Plan Operations		М	emo	) Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	F	P/R Ded	uctio	on (\$57.	.69 Bi-We	eekly)					
<u>с</u> .	Full Name of Individual (Last, First, Middle Init SEGERMAN, ANDREW, , ,	ial) or Full O	rganization Name		Date o	f Re	eceipt						
	Mailing Address 4729 29TH STREET SOUTH						05 / 05 / 2021						
	City ARLINGTON	State VA	Zip Code 22206-1307	_					47586197 his Period				
	FEC ID number of contributing federal political committee.	С			<u> </u>		, .	,	38.	46			
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Govt		M	emo	o Item							
	Receipt For: Primary General Other (specify)	Aggregate	1	P/R Dec	lucti	on (\$19	.23 Bi-W	eekly)					
⊢	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number o			• -		-	<del>y</del> -		249.	84			

### SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

FOR LINE NUMBER:

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			Use separate schedule(s)	(ch	(check only one)						
	EMIZED RECEIPTS		for each category of the Detailed Summary Page		<b>×</b> 11a		11b	11c	12		
	y information copied from such Reports and Sta for commercial purposes, other than using the r										
$\overline{)}$	NAME OF COMMITTEE (In Full)										
	UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	AC)							
A.	Full Name of Individual (Last, First, Middle Initia POPEJOY, NANCY, , ,	ll) or Full Or	rganization Name		Date of	Re	eceipt				
	Mailing Address 1680 MARSH HAWK CIRCLE				05 <sup>M</sup>	/	D 31	/ Y	y y 2021	Y	
	City CASTLE ROCK	State CO	Zip Code 80109-9594						74086197	7	
			00109-9394	_	Amount	of	Each R	eceipt th	is Period		
FEC ID number of contributing federal political committee.					Ľ.	_	_		184.	60	
	Name of Employer (for Individual) Optum Services, Inc		ipation (for Individual) Gen Mgmt		Me	emo	ltem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1015.30	P/R Deduction (\$92.30 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Initia SMITH, TAMEEKA, , ,	ll) or Full Or	rganization Name		Date of	Re	eceipt				
	Mailing Address 1605 PARK AVE				<sup>M</sup> 05	/	D D D 31	/ Y	y y 2021	Y	
	City RICHMOND	State VA	Zip Code 23220-2908					D : PR2791832961977			
		C		Amount	of	Each R	eceipt th	is Period	_		
	FEC ID number of contributing federal political committee.		Ļ.	_	- <b>J</b>		384.	60			
	Name of Employer (for Individual)Occupation (for Individual)United HealthCare Services IncHIth Plan CEO					emo	ltem				
	Receipt For:	Aggregate	Year-to-Date 🔻								
	Primary General Other (specify) ▼		2115.30	]   f	P/R Dedu	uctio	on (\$192	2.30 Bi-W	(eekly)		
	Full Name of Individual (Last, First, Middle Initia MORSE, SARA, , ,	ll) or Full Or	rganization Name		Date of	Re	eceipt				
	Mailing Address 6398 VALE STREET				05 31 2021						
	City ALEXANDRIA	State VA	Zip Code 22312-1435						47346197	7	
	FEC ID number of contributing federal political committee.	С		Amount	OT	Each R	eceipt th	is Period 384.	60		
	Name of Employer (for Individual)	(for Individual) Occupation (for Individual)						,			
	United HealthCare Services Inc Receipt For:		Sovt Affs	_							
	Primary General Other (specify)	Primary General General						2.30 Bi-W	/eekly)		
s	UBTOTAL of Receipts This Page (optional)			•			,		953.	30	
т	OTAL This Period (last page this line number or	וy)	••••••	<b>→</b>			-		132364.	22	

SCHEDULE B (FEC Form 3X)			FC	DR L	NE I	NUMBER: PAGE 199 OF 200					
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the			neck		/ one)					
		Summary Page			210 28a	22 23 26 27 28b 28c <b>x</b> 29 30b					
Any information copied from such Reports and State or for commercial purposes, other than using the na						on for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorporated	PAC (Ur	nitedHealth G	Grou	р Р.	AC	C)					
Full Name (Last, First, Middle Initial) A. Commonwealth Victory Fund						Date of Disbursement					
Mailing Address 1710 East Franklin St 2nd Floor						05 10 / Y Y Y Y 025 10 2021					
City Richmond	State VA	Zip Code 23223				FEC Identification Number					
Purpose of Disbursement Contribution		23223	0	11	1	С					
Candidate Name			Cate	-	/	Transaction ID : 46018439 Amount of Each Disbursement this Period					
Office Sought: House Disburs Senate President	ement For: Primary Other (spe	General	.,	, po		10000.00 Contribution					
State: District:		(Ciry) V				Memo Item					
Full Name (Last, First, Middle Initial) B. Eileen Filler-Corn for Delegate Mailing Address, PO Day 500000						Date of Disbursement					
Mailing Address PO Box 523082	Otata	Zin Onde				05 10 2021					
City Springfield	State VA	Zip Code 22152				FEC Identification Number					
Purpose of Disbursement Contribution Candidate Name			0	11		C Transaction ID : 46018440					
Filler-Corn, Eileen, , VA Del.,			Cate Ty	egory. /pe	/	Amount of Each Disbursement this Period					
	ement For: Primary	General				5000.00 Contribution					
State: District:	Other (spe	city)				Memo Item					
Full Name (Last, First, Middle Initial) C. Sickles For Delegate						Date of Disbursement					
Mailing Address PO Box 10628						05 / 10 / Y Y Y Y 2021					
City Franconia	State VA	Zip Code 22310		FEC Identification Number							
Purpose of Disbursement Contribution	1		0,	C Transaction ID : 46018441							
Candidate Name Sickles, Mark, D., VA Del.,				egory. /pe	/	Amount of Each Disbursement this Period					
Senate President	rsement For: Primary General Other (specify) ▼					5000.00 Contribution Memo Item					
State: District:											
SUBTOTAL of Disbursements This Page (optional)					_	20000.00					
TOTAL This Period (last page this line number onl	y)					, ,					

SCHEDULE	B (FEC Form 3X)			FOR LI	NE NUMBER: PAGE 200 OF 200				
ITEMIZED D	for each	arate schedule(s) category of the Summary Page	(check of 2 2						
					erson for the purpose of soliciting contributions e to solicit contributions from such committee.				
	MMITTEE (In Full)	// .							
UnitedHea	alth Group Incorporated	d PAC (Ur	nitedHealth (	Group P/	AC)				
Full Name (Las A. Assembly	Committe	ee		Date of Disbursement					
Mailing Address	s PO Box 814				05 27 2021				
City Madison		State WI	Zip Code 53701		FEC Identification Number				
Purpose of Dis Contribution	bursement		33701	011	С				
Candidate Nam	ie			Category/ Type	Transaction ID : 46103066 Amount of Each Disbursement this Period				
Office Sought:	House Disbur Senate President	sement For: Primary Other (spe	General ecify) ▼		Contribution Memo Item				
State:	District:								
Full Name (Las B.	t, First, Middle Initial)				Date of Disbursement				
Mailing Address	3								
City		State	Zip Code		FEC Identification Number				
Purpose of Dis	bursement			· · · ·	С				
Candidate Nam	ie			Category/ Type	Amount of Each Disbursement this Period				
Office Sought:	Senate	sement For: Primary	General						
State:	District:	Other (spe	ecity)		Memo Item				
Full Name (Las C.	st, First, Middle Initial)				Date of Disbursement				
Mailing Address	3								
City		State	Zip Code		FEC Identification Number				
Purpose of Dis					С				
Candidate Nam				Category/ Type	Amount of Each Disbursement this Period				
Office Sought:	Senate	Sement For: Primary	General						
State:	District:	Other (spe	ecity) ▼		Memo Item				
	isbursements This Page (optiona od (last page this line number of								