

**FEC
FORM 3X**

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

Office Use Only

1. NAME OF COMMITTEE (In full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

United Health Group Incorporated Political Fund

ADDRESS (number and street)

8900 Bran Road East

Check if different than previously reported. (ACC)

Minnetonka

MN

55343

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00274431

3. IS THIS REPORT

x

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report(Q1)

July 15 Quarterly Report(Q2)

October 15 Quarterly Report(Q3)

X January 31 Quarterly Report(YE)

July 31 Mid-Year Report(Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3)

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the State of

(d) 30-Day Post-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

11

29

2004

through

12

31

2004

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

Type or Print Name of Treasurer

Patrick J. Erlandson

Signature of Treasurer

Electronically Filed by Patrick J. Erlandson

Date

01

26

2005

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

Office Use Only

FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name

United Health Group Incorporated Political Fund

Report Covering the Period: From: ^M 1 ^D 23 ^Y 2004 To: ^M 12 ^D 31 ^Y 2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^Y 2004 ^Y		33920.24
(b) Cash on Hand at Beginning of Reporting Period	45370.23	
(c) Total Receipts (from Line 19)	21979.14	334954.13
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	67349.37	368874.37
<hr/>		
7. Total Disbursements (from Line 31)	0.00	301525.00
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	67349.37	67349.37
<hr/>		
9. Debts and Obligations owed TO the committee (itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

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Write or Type Committee Name

United Health Group Incorporated Political Fund

Report Covering the Period: From: ^M11 ^D23 ^Y2004 To: ^M12 ^D31 ^Y2004

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	18505.17	
(ii) Unitemized	3473.97	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	21979.14	330954.13
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	21979.14	330954.13
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	4000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	21979.14	334954.13
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	21979.14	334954.13

DETAILED SUMMARY PAGE

of Disbursements

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	263775.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	0.00
29. Other Disbursements.....	0.00	37750.00
30. Federal Election Activity (2 U.S.C. 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election ActMty (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	0.00	301525.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	0.00	301525.00

DETAILED SUMMARY PAGE
of Disbursements

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	21979.14	330954.13
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	21979.14	330954.13
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial) A. KEVIN J CASEY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road E. Suite 305 MNC08-T302		Transaction ID: PR1159836410693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Senior VP, Uniprise Health Plan Ops	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) B. PAUL J GRANDPRE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 450 Columbus Blvd 3NB-A		Transaction ID: PR1159837110693
City Hartford	State CT	Zip Code 06115-0450
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Director, Customer Admin Svcs	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) C. ROBERT G HARMON, MD		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 10467 White Granite Dr. Suite 300, VA31-1000		Transaction ID: PR1159837410693
City Oakton	State VA	Zip Code 22124-0450
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer UnitedHealth Group, Inc.	Occupation National Medical Director	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

SUBTOTAL of Receipts This Page (optional)	▶	90.00
TOTAL This Period (last page this line number only)	▶	

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

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FOR LINE NUMBER: PAGE 7 / 86
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 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. JOHN F STEVENSON		Date of Receipt M / D / Y
Mailing Address 450 Columbus Blvd SNB-B		Transaction ID: PR1159839310693
City Hartford	State Zip Code CT 06115-0450	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.60
Name of Employer UnitedHealth Group, Inc.	Occupation Associate General Counsel	P/R Deduction (\$9.80 Bi-W- eekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 264.60	

Full Name (Last, First, Middle Initial) B. JACK A WICKENS		Date of Receipt M / D / Y
Mailing Address 278 Franklin Rd, Suite 280 TN007-1000		Transaction ID: PR1159839510693
City Brentwood	State Zip Code TN 37024	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group, Inc.	Occupation SVP Regional Operations	P/R Deduction (\$38.46 Bi- Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1038.42	

Full Name (Last, First, Middle Initial) C. ROB VHERNDON, III		Date of Receipt M / D / Y
Mailing Address 415 N. McKinley, Suite 820		Transaction ID: PR1159840510693
City Little Rock	State Zip Code AR 72205	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer United HealthCare Corpora- tion	Occupation CEO, UHC of Arkansas	P/R Deduction (\$19.23 Bi- Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 442.29	

SUBTOTAL of Receipts TN's Page (optional)	▶	134.98
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 8 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. THOMAS E BURTON		Date of Receipt M / D / Y
Mailing Address 450 Columbus Boulevard 15NB-A/CT30-1030		Transaction ID: PR1159841610693
City Hartford	State CT	Zip Code 06115-0450
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.66
Name of Employer UnitedHealth Group, Inc.	Occupation Accountant	P/R Deduction (\$8.33 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 224.91	

Full Name (Last, First, Middle Initial) B. ROBERT CHANNING WHEELER		Date of Receipt M / D / Y
Mailing Address 450 Columbus Blvd CT030-12BB		Transaction ID: PR1159842110693
City Hartford	State CT	Zip Code 06115-0450
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 360.00
Name of Employer UnitedHealth Group, Inc.	Occupation Uniprise CEO	P/R Deduction (\$180.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4860.00	

Full Name (Last, First, Middle Initial) C. ROBERT WHATFIELD		Date of Receipt M / D / Y
Mailing Address 450 Columbus Blvd P.O. BOX 150450 13NB-A		Transaction ID: PR1159784810693
City Hartford	State CT	Zip Code 06115-0450
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.66
Name of Employer United HealthCare Corporation	Occupation Director, Pricing	P/R Deduction (\$8.33 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 224.91	

SUBTOTAL of Receipts This Page (optional)	393.32
TOTAL This Period (last page this line number only)	

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. MICHAEL R GROSS		Date of Receipt M / D / Y
Mailing Address 450 Columbus Boulevard 15NB-A		Transaction ID: PR1159789610693
City Hartford	State CT	Zip Code 06115-0450
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.00
Name of Employer United HealthCare Corporation	Occupation Vice President & Actuary, Pricing	P/R Deduction (\$8.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 216.00	

Full Name (Last, First, Middle Initial) B. MOLLIE CHAPMAN		Date of Receipt M / D / Y
Mailing Address 4501 Erskine Road OH035-3035		Transaction ID: PR1159789610693
City Cincinnati	State OH	Zip Code 45242
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Manager, Provider Relations	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) C. KEN L HOVERMAN		Date of Receipt M / D / Y
Mailing Address 3850 Olentangy River Rd OH020-301D		Transaction ID: PR1159789910693
City Columbus	State OH	Zip Code 43214-1138
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer UnitedHealth Group, Inc.	Occupation COO UHC Ohio	P/R Deduction (\$30.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 810.00	

SUBTOTAL of Receipts This Page (optional)	96.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 86

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. PAMELA A TULUMELLO		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 1949 E. Sunshine, Suite 300 MO015-1000		Transaction ID: PR1159793110693
City Springfield	State MO	Zip Code 65804
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Director, Group Services Admin	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) B. ROBERT J SHEEHY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-W3D1		Transaction ID: PR1159794010693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer UnitedHealth Group, Inc.	Occupation Executive Management	P/R Deduction (\$60.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. DEBORAH S STREB		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 3850 Olentangy River Rd. OH020-301D		Transaction ID: PR1159794110693
City Columbus	State OH	Zip Code 43214-1138
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Information Systems	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

SUBTOTAL of Receipts This Page (optional)	▶	290.00
TOTAL This Period (last page this line number only)	▶	

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

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FOR LINE NUMBER: PAGE 11 / 86
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 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. ANTHONY J KAZLAUSKAS		Date of Receipt M M / D D / Y Y Y Y
Mailing Address 475 Kilvert St, Suite 310 RI010-3400		Transaction ID: PR1159794610693
City Warwick	State RI	Zip Code 02886-1392
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer UnitedHealth Group, Inc.	Occupation Medical Director	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

Full Name (Last, First, Middle Initial) B. GEORGE D SHAFER		Date of Receipt M M / D D / Y Y Y Y
Mailing Address 8801 Centerville business Pkwy OH010-3005		Transaction ID: PR1159794910693
City Dayton	State OH	Zip Code 45459-8028
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer UnitedHealth Group, Inc.	Occupation CEO Dayton Ohio Plan	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

Full Name (Last, First, Middle Initial) C. MICHAEL J KOEHLER		Date of Receipt M M / D D / Y Y Y Y
Mailing Address 108 Farmers Alley, Suite 400 MI012-3200		Transaction ID: PR1159795310693
City Kalamazoo	State MI	Zip Code 49005-0271
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.00
Name of Employer UnitedHealth Group, Inc.	Occupation CEO PHP Southwest Michigan	P/R Deduction (\$40.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1080.00	

SUBTOTAL of Receipts This Page (optional)	160.00
TOTAL This Period (last page this line number only)	

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

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FOR LINE NUMBER: PAGE 12 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. R EDWARD BERGMARK		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 8300 Olson Memorial Hwy MND010-S203		Transaction ID: PR1159796010693
City Golden Valley	State MN	Zip Code 55427
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.94
Name of Employer UnitedHealth Group, Inc.	Occupation Vice President CEO IHR (OPTUM)	P/R Deduction (\$38.47 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1038.69	

Full Name (Last, First, Middle Initial) B. RONALD B COLBY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Rd East MND08-E211		Transaction ID: PR1159796210693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 350.00
Name of Employer UnitedHealth Group, Inc.	Occupation Senior VP, Insurance & Product Mgmt	P/R Deduction (\$175.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4725.00	

Full Name (Last, First, Middle Initial) C. LYNNE MONTAGUE-CLOUSE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 12125 Technology Drive MND02-D181		Transaction ID: PR1159796310693
City Eden Prairie	State MN	Zip Code 55344
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer UnitedHealth Group, Inc.	Occupation International HealthCare Consultant	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

SUBTOTAL of Receipts This Page (optional)	466.94
TOTAL This Period (last page this line number only)	

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

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

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

Full Name (Last, First, Middle Initial) A. MARY A WARNE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 255D University Ave W, S#401S MNO40-2500		Transaction ID: PR1159797110693
City St. Paul	State MN	Zip Code 55114-1804
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer UnitedHealth Group, Inc.	Occupation Clinical Team Leader	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) B. CARLA M MUGGIO		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address One South Wacker ILD14-3605		Transaction ID: PR1159798210693
City Chicago	State IL	Zip Code 60606
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation VP Operations	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 519.21	

Full Name (Last, First, Middle Initial) C. CHERYL A POPECK		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 800 N Magnolia Ave., S#600 FLD29-1029		Transaction ID: PR1159799410693
City Orlando	State FL	Zip Code 32803
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Director of Operations	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

SUBTOTAL of Receipts This Page (optional)	68.46
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 14 / 86

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) A. HERBERT L WHESTINE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 513 Eaton St. MN003-1000		Transaction ID: PR1159803610693
City State Zip Code St. Paul MN 55107	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 19.22
Name of Employer UnitedHealth Group, Inc.	Occupation Aviation Department Manager Aggregate Year-to-Date ▼ 259.47	P/R Deduction (\$9.61 Bi-W- eekly)
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. BRIAN R BELLOWS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 1175 Post Rd East		Transaction ID: PR1159803610693
City State Zip Code Westport CT 06880	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 30.00
Name of Employer UnitedHealth Group, Inc.	Occupation Vice President Sales Strategic Service Aggregate Year-to-Date ▼ 405.00	P/R Deduction (\$15.00 Bi- Weekly)
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. RUTH J KAPLAN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 425 Market St. 27th Floor CA035-2707		Transaction ID: PR1159803910693
City State Zip Code San Francisco CA 94105	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 23.08
Name of Employer UnitedHealth Group, Inc.	Occupation UBH VP of Employer Svcs Aggregate Year-to-Date ▼ 311.58	P/R Deduction (\$11.54 Bi- Weekly)
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts TNs Page (optional)	72.30
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 15 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial) A. CHARLES B SHIPP		Date of Receipt M / D / Y
Mailing Address 3401 West End Avenue Ste670 TN002		Transaction ID: PR1159805310693
City Nashville	State TN	Zip Code 37203
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.70
Name of Employer UnitedHealth Group, Inc.	Occupation CEO UHC of Tennessee	P/R Deduction (\$28.85 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 694.31	

Full Name (Last, First, Middle Initial) B. KEITH W NOBLITT		Date of Receipt M / D / Y
Mailing Address 2970 Clairmont Rd #650		Transaction ID: PR1159805510693
City Atlanta	State GA	Zip Code 30329-1634
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer UnitedHealth Group, Inc.	Occupation Strategic Account Executive	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

Full Name (Last, First, Middle Initial) C. JAMES S WATSON		Date of Receipt M / D / Y
Mailing Address 2717 N. 118th Lucile		Transaction ID: PR1159806010693
City Omaha	State NE	Zip Code 68164
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.48
Name of Employer UnitedHealth Group, Inc.	Occupation V.P. Govt Relations, UHC Midlands	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 519.21	

SUBTOTAL of Receipts TN's Page (optional)	▶	136.18
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 16 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial) A. DAVID J FALK		Date of Receipt M / D / Y
Mailing Address 2 Penn Plaza Ste 700 NY036-1000		Transaction ID: PR1159820210693
City New York	State NY	Zip Code 10121
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer UnitedHealth Group, Inc.	Occupation Medical Director	P/R Deduction (\$12.50 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 337.50	

Full Name (Last, First, Middle Initial) B. DEBRA A OBERMAN		Date of Receipt M / D / Y
Mailing Address 9900 Bren Road		Transaction ID: PR1159820710693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.38
Name of Employer UnitedHealth Group, Inc.	Occupation Mgr Policy & Legislative Analysis	P/R Deduction (\$7.69 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 207.63	

Full Name (Last, First, Middle Initial) C. ROBERT GHUSSEY		Date of Receipt M / D / Y
Mailing Address 8330 Boone Blvd Ste 300 VA30-1030		Transaction ID: PR1159821210693
City Vienna	State VA	Zip Code 22182-2624
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 78.92
Name of Employer UnitedHealth Group, Inc.	Occupation VP, Public Policy & Comm Ovations	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1038.42	

SUBTOTAL of Receipts This Page (optional)	117.30
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 17 / 86

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) A. WILLIAM D YOUNG		Date of Receipt M / D / Y
Mailing Address 800 N. Magnolia Ave Ste 800 FL029-1029		Transaction ID: PR1159821310693
City Orlando	State FL	Zip Code 32803
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.90
Name of Employer UnitedHealth Group, Inc.	Occupation Sr. Medical Director	P/R Deduction (\$38.45 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 822.79	

Full Name (Last, First, Middle Initial) B. WILLIAM C TRACY		Date of Receipt M / D / Y
Mailing Address 8300 W. 110th Ste 350		Transaction ID: PR1159821510693
City Overland	State KS	Zip Code 66210
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer UnitedHealth Group, Inc.	Occupation VP Sales	P/R Deduction (\$25.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	

Full Name (Last, First, Middle Initial) C. MICHAEL J HARRINGTON		Date of Receipt M / D / Y
Mailing Address 6300 Olson Memorial Hwy MN10-S203		Transaction ID: PR1159821710693
City Golden Valley	State MN	Zip Code 55427
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer UnitedHealth Group, Inc.	Occupation Optum-Sales	P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00	

SUBTOTAL of Receipts This Page (optional)	▶	226.90
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 18 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. MICHAEL M HAWKINS		Date of Receipt M / D / Y
Mailing Address 125D Capital of Tx Hwy S. Bldg I, Ste 400		Transaction ID: PR1159822010693
City Austin	State TX	Zip Code 78746
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 23.08
Name of Employer UnitedHealth Group, Inc.	Occupation Medical Director	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 305.42	

Full Name (Last, First, Middle Initial) B. MARGARET E STERNBERG		Date of Receipt M / D / Y
Mailing Address 2307 W. Cone Blvd NC10-375D		Transaction ID: PR1159822810693
City Greensboro	State NC	Zip Code 27408
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.70
Name of Employer UnitedHealth Group, Inc.	Occupation VP Corp Affairs & Gov't Programs	P/R Deduction (\$28.85 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 778.95	

Full Name (Last, First, Middle Initial) C. RHONDA R BAGBY		Date of Receipt M / D / Y
Mailing Address 3838 N Causeway Blvd Ste 2100 LA035-1000		Transaction ID: PR1159823210693
City Metairie	State LA	Zip Code 70002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.48
Name of Employer UnitedHealth Group, Inc.	Occupation Dir. of Finance, UHC of AL, LA, & MS	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 488.45	

SUBTOTAL of Receipts This Page (optional)	119.24
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 10 / 86

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. CHARLES F WEBER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9705 Data Park Drive MNC06-0252		Transaction ID: PR1159823410693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Information Systems	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) B. CAROL M SCHNEEWEIS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 8300 Olson Memorial Hwy MND10-S201		Transaction ID: PR1159823510693
City Golden Valley	State MN	Zip Code 55427
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer UnitedHealth Group, Inc.	Occupation HealthCare	P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00	

Full Name (Last, First, Middle Initial) C. DAVID J LUBBEN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Rd East		Transaction ID: PR1159823810693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.31
Name of Employer UnitedHealth Group, Inc.	Occupation General Counsel	P/R Deduction (\$192.31 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4999.90	

SUBTOTAL of Receipts This Page (optional)	312.31
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 20 / 86

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. ELISE A GEMEINHARDT		Date of Receipt M / D / Y
Mailing Address 1620 L St. NY #B00 DC030-1000		Transaction ID: PR1159824910693
City Washington	State DC	Zip Code 20036
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 153.84
Name of Employer UnitedHealth Group, Inc.	Occupation VP Federal Affairs	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1769.16	

Full Name (Last, First, Middle Initial) B. BEVERLY H NYCE		Date of Receipt M / D / Y
Mailing Address 450 Columbus Blvd, CT030-1030		Transaction ID: PR1159826010693
City Hartford	State CT	Zip Code 06115
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 230.76
Name of Employer UnitedHealth Group, Inc.	Occupation Senior VP Uniprise	P/R Deduction (\$115.98 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3115.28	

Full Name (Last, First, Middle Initial) C. LAWRENCE J KISSNER		Date of Receipt M / D / Y
Mailing Address 13621 NW 12Th Street FL075-1000		Transaction ID: PR1159826810693
City Sunrise	State FL	Zip Code 33323
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Vice President Sales & Marketing	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 519.21	

SUBTOTAL of Receipts This Page (optional)	423.06
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 21 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. RICHARD J MIGLIORI		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 12125 Technology Drive MN002-0145		Transaction ID: PR1159827410693
City Eden Prairie	State MN	Zip Code 55344
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 153.84
Name of Employer UnitedHealth Group, Inc.	Occupation Senior VP Ingenix Employer Group	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2076.84	

Full Name (Last, First, Middle Initial) B. BARBARA C BUENEMANN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 13855 Riverport Trail MO050-1000		Transaction ID: PR1159828710693
City Maryland Heights	State MO	Zip Code 63043
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 23.08
Name of Employer UnitedHealth Group, Inc.	Occupation COO UHC of the Midwest, Inc.	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 311.58	

Full Name (Last, First, Middle Initial) C. JEANNINE M RIVET		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road E. MND08-W315		Transaction ID: PR1159830010693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.30
Name of Employer UnitedHealth Group, Inc.	Occupation Executive VP/Operations	P/R Deduction (\$192.30 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4999.80	

SUBTOTAL of Receipts This Page (optional)	▶	369.22
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 22 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. WILLIAM J ANTHONY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-W130		Transaction ID: PR1159830210693
City Minnetonka	State MN	Zip Code 55440-1459
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group, Inc.	Occupation V.P. Call Center Operations - Oventions	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1038.42	

Full Name (Last, First, Middle Initial) B. JACK E SHUFF		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 1160 Town Center Dr., Ste 390 NV005-1000		Transaction ID: PR1159830510693
City Las Vegas	State NV	Zip Code 89134
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Director, Sales and Service	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 519.21	

Full Name (Last, First, Middle Initial) C. MARILYN C NEVIN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-N220		Transaction ID: PR1159807410693
City Edina	State MN	Zip Code 55438
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Director of Risk Management	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

SUBTOTAL of Receipts This Page (optional)	135.38
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 23 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. TRACY L BAHL		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 450 Columbus Blvd Uniprise Towers, 12NB		Transaction ID: PR1159808410693
City Hartford	State CT	Zip Code 06115
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 230.76
Name of Employer UnitedHealth Group, Inc.	Occupation President, Strategic Services Group	P/R Deduction (\$115.38 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3115.26	

Full Name (Last, First, Middle Initial) B. KENNETH A BURDICK		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-W318		Transaction ID: PR1159808910693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer UnitedHealth Group, Inc.	Occupation VP of Underwriting	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. NANCY G ABELMANN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-N220		Transaction ID: PR1159809110693
City Edina	State MN	Zip Code 55440-1459
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 23.08
Name of Employer United HealthCare Corpora- tion	Occupation Tax Director	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 311.58	

SUBTOTAL of Receipts This Page (optional)	▶	293.84
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 24 / 86

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. MARCIA E SMITH		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-W211		Transaction ID: PR1159810010693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.40
Name of Employer UnitedHealth Group, Inc.	Occupation CEO - Evercare	P/R Deduction (\$9.70 Bi-W- eekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 261.90	

Full Name (Last, First, Middle Initial) B. JOHN P ANTON		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 297D Clairmont Rd Suite 650 GA01D-3360		Transaction ID: PR1159811610693
City Atlanta	State GA	Zip Code 30329-1634
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group, Inc.	Occupation Senior Vice President	P/R Deduction (\$38.46 Bi- Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1038.42	

Full Name (Last, First, Middle Initial) C. SHEILA G LETSCHER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T203		Transaction ID: PR1159812010693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Attorney	P/R Deduction (\$19.23 Bi- Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 519.21	

SUBTOTAL of Receipts This Page (optional)	▶	134.78
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 25 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial) A. WILLIAM P WHITELY		Date of Receipt M / D / Y
Mailing Address One South Wacker IL014-0810		Transaction ID: PR1159812810693
City Chicago	State Zip Code IL 60606	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 384.60
Name of Employer UnitedHealth Group, Inc.	Occupation CEO, United HealthCare of Illinois	P/R Deduction (\$182.90 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3576.78	

Full Name (Last, First, Middle Initial) B. WAYNE F COOK		Date of Receipt M / D / Y
Mailing Address 801 Office Center Drive PA020-1008		Transaction ID: PR1159812810693
City Fort Washington	State Zip Code PA 19034	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer United HealthGroup	Occupation Accountant AARP	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) C. WILLIAM J GARLAN		Date of Receipt M / D / Y
Mailing Address 1800 West Plano Parkway, S 100 TX032-1000		Transaction ID: PR1159812910693
City Plano	State Zip Code TX 75075	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.38
Name of Employer UnitedHealth Group, Inc.	Occupation Account Executive	P/R Deduction (\$7.69 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 207.63	

SUBTOTAL of Receipts This Page (optional)	419.98
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 26 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial) A. RICHARD J RASKIN, MD		Date of Receipt M / D / Y
Mailing Address 1375 E 8th St., Suite 1100 OH030-3015		Transaction ID: PR1159813510693
City Cleveland	State OH	Zip Code 44114
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Medical Director	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 519.21	

Full Name (Last, First, Middle Initial) B. LOIS E QUAM		Date of Receipt M / D / Y
Mailing Address 9900 Bren Road East MND08-T300		Transaction ID: PR1159813710693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.30
Name of Employer UnitedHealth Group, Inc.	Occupation CEO, Ovations	P/R Deduction (\$192.30 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4899.80	

Full Name (Last, First, Middle Initial) C. RICHARD A COLLINS		Date of Receipt M / D / Y
Mailing Address 450 Columbus Blvd CT030-1030		Transaction ID: PR1159814010693
City Hartford	State CT	Zip Code 06115-0450
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer UnitedHealth Group, Inc.	Occupation Director, Underwriting	P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1198.18	

SUBTOTAL of Receipts TNs Page (optional)	▶	330.76
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 27 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial) A. THOMASH LINDQUIST		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-T300		Transaction ID: PR1159814110693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 307.68
Name of Employer UnitedHealth Group, Inc.	Occupation President, AARP Division, Ovations	P/R Deduction (\$153.84 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3019.11	

Full Name (Last, First, Middle Initial) B. THOMAS G FAUSTMAN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 450 Columbus Blvd CT030-0588		Transaction ID: PR1159814310693
City Hartford	State CT	Zip Code 06115
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer United Health Group	Occupation V.P. Operations & Services Uniprise	P/R Deduction (\$15.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 345.00	

Full Name (Last, First, Middle Initial) C. GLENN J REINHARDT		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 10701 W. Research Drive WI030-S420		Transaction ID: PR1159814410693
City Milwaukee	State WI	Zip Code 53228
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Vice President, Finance and Medicare	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

SUBTOTAL of Receipts This Page (optional)	▶	357.68
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 28 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial) A. DAVID SWICHMANN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-W304		Transaction ID: PR1159814710693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.30
Name of Employer UnitedHealth Group, Inc.	Occupation SVP - Corporate Development	P/R Deduction (\$192.30 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4699.80	

Full Name (Last, First, Middle Initial) B. SAUL FELDMAN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 405 Market Street CA035-2701		Transaction ID: PR1159815210693
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 153.84
Name of Employer UnitedHealth Group, Inc.	Occupation CEO United Behavioral Health	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2078.84	

Full Name (Last, First, Middle Initial) C. EUGENE C DAVANAUGH		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 450 Columbus Blvd CT030-12NB-BB		Transaction ID: PR1159815310693
City Hartford	State CT	Zip Code 06115
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 153.84
Name of Employer UnitedHealth Group, Inc.	Occupation CFQ Uniprise	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1807.82	

SUBTOTAL of Receipts This Page (optional)	▶	499.98
TOTAL This Period (last page this line number only)	▶	

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

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

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. PATRICK J ERLANDSON		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road E MNC08-8315		Transaction ID: PR1159815910693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.30
Name of Employer UnitedHealth Group, Inc.	Occupation VP Corporate Controller	P/R Deduction (\$192.30 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4699.80	

Full Name (Last, First, Middle Initial) B. PIERRE A MCMAHON		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 450 Columbus Blvd CT030-12BB		Transaction ID: PR1159816010693
City Hartford	State CT	Zip Code 06115-0430
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation General Council - Uniprise	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) C. PATRICIA R SAURO		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T500		Transaction ID: PR1159816410693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.48
Name of Employer United Health Group, Inc.	Occupation VP Product Development AARP	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 519.21	

SUBTOTAL of Receipts This Page (optional)	▶	250.78
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 30 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial) A. WILLIAM A MUNSELL		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road E MNC08-W301		Transaction ID: PR1159816610693
City	State	Zip Code
Minnetonka	MN	55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer UnitedHealth Group, Inc.	Occupation Chief Operating Officer	P/R Deduction (\$100.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2700.00	

Full Name (Last, First, Middle Initial) B. JOHN S PENSCHORN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-B092		Transaction ID: PR1159816910693
City	State	Zip Code
Minnetonka	MN	55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer UnitedHealth Group, Inc.	Occupation VP Investor Relations	P/R Deduction (\$100.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2700.00	

Full Name (Last, First, Middle Initial) C. GERAFIN F SANDELLA		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 601 Office Center Drive		Transaction ID: PR1159817210693
City	State	Zip Code
Et Washington	PA	19034
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer United Health Group, Inc.	Occupation Director Compliance AARP	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

SUBTOTAL of Receipts This Page (optional)	420.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 31 / 86

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. PAUL D KALLMEYER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 801 Office Center Drive PA020-1011		Transaction ID: PR1159817410693
City Ft. Washington	State PA	Zip Code 19034
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer United Health Group	Occupation Attorney	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) B. SHEILA E MCMILLAN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T300		Transaction ID: PR1159817510693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 153.84
Name of Employer United Health Group, Inc.	Occupation VP - Finance AARP Division	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1348.10	

Full Name (Last, First, Middle Initial) C. JOHN R MAGH JR		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-W130		Transaction ID: PR1159817610693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 160.00
Name of Employer United Health Group, Inc.	Occupation Chief Medical Officer, Evercare	P/R Deduction (\$80.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 830.00	

SUBTOTAL of Receipts This Page (optional)	▶	333.84
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 32 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. KEVIN W PEARSON		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5225 Wiley Post Way, Suite 500 UT015-0500		Transaction ID: PR1159817810693
City Salt Lake City	State UT	Zip Code 84116
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer UnitedHealth Group, Inc.	Occupation CEO Ingenix Health Intelligence	P/R Deduction (\$75.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2025.00	

Full Name (Last, First, Middle Initial) B. TIMOTHY F RYAN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Rd East MND08-T400		Transaction ID: PR1159817910693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.00
Name of Employer UnitedHealth Group	Occupation Segment General Counsel	P/R Deduction (\$19.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 513.00	

Full Name (Last, First, Middle Initial) C. L ROBERT DAPPER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T902		Transaction ID: PR1159818010693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 307.70
Name of Employer UnitedHealth Group	Occupation Senior Vice President Human Capital	P/R Deduction (\$153.85 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4153.95	

SUBTOTAL of Receipts This Page (optional)	▶	495.70
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 33 / 86

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. KELLY J DEKEYSER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 450 Columbus Blvd CT030-15NB		Transaction ID: PR1159818410693
City Hartford	State CT	Zip Code 06103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group	Occupation Senior VP, Business Process Outsourcin	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 519.21	

Full Name (Last, First, Middle Initial) B. MARK F LINDSAY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-N215		Transaction ID: PR1159818610693
City Edina	State MN	Zip Code 55436
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.30
Name of Employer UnitedHealth Group, Inc.	Occupation Public Relations	P/R Deduction (\$192.30 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4899.80	

Full Name (Last, First, Middle Initial) C. WALTER H BENDICK		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 3141 N. 3rd Ave AZ080-110D		Transaction ID: PR1159818810693
City Phoenix	State AZ	Zip Code 85013
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.38
Name of Employer UnitedHealth Group	Occupation Executive Director Evercare Phoenix AZ	P/R Deduction (\$7.69 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 207.63	

SUBTOTAL of Receipts TNs Page (optional)	▶	246.14
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 34 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. MATTHEW M DAVIES		Date of Receipt M / D / Y
Mailing Address 800 N. Magnolia Ave, Suite 800 FL029-1029		Transaction ID: PR1159819010693
City Orlando	State FL	Zip Code 32803
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group	Occupation CEO, Health Plans	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 015.34	

Full Name (Last, First, Middle Initial) B. THOMAS J QUIRK		Date of Receipt M / D / Y
Mailing Address 5900 Granite Parkway, ste 900 TX033-1000		Transaction ID: PR1159819110693
City Plano	State TX	Zip Code 75024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group	Occupation CEO Dallas/Austin Health Plan	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 024.58	

Full Name (Last, First, Middle Initial) C. CHARLES C PITTS		Date of Receipt M / D / Y
Mailing Address 3700 Colonnade Parkway AL001-0607		Transaction ID: PR1159819210693
City Birmingham	State AL	Zip Code 35243
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group	Occupation CEO, UnitedHealthCare of AL, LA & MS	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1038.42	

SUBTOTAL of Receipts This Page (optional)	230.76
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 35 / 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) A. AMY K KNAPP		Date of Receipt M / D / Y
Mailing Address Two Penn Plaza, 7th Floor NY036-1000		Transaction ID: PR1159819310693
City New York	State NY	Zip Code 10121
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 230.76
Name of Employer UnitedHealth Group	Occupation Regional President, Eastern Region, UH	P/R Deduction (\$115.38 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3115.26	

Full Name (Last, First, Middle Initial) B. BRIAN H ROSE		Date of Receipt M / D / Y
Mailing Address 8051 E. Maplewood Ave. #300 CO030-1000		Transaction ID: PR1159819410693
City Greenwood Village	State CO	Zip Code 80111
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.38
Name of Employer UnitedHealthGroup	Occupation Assoc Medical Director	P/R Deduction (\$7.69 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 207.63	

Full Name (Last, First, Middle Initial) C. WILLIAM E MOELLER		Date of Receipt M / D / Y
Mailing Address 233 North Michigan Ave IL014-0300		Transaction ID: PR1159819510693
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 153.84
Name of Employer UnitedHealth Group	Occupation CEO UnitedHealthcare Illinois	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1730.70	

SUBTOTAL of Receipts This Page (optional)	399.98
TOTAL This Period (last page this line number only)	

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

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

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial) A. LYNELLE IRELAN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 333 North Alabama St Ste 350 IND05-1000		Transaction ID: PR1159819610693
City	State	
Indianapolis	IN	Zip Code 46204
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Executive Director LifeMark	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) B. ROBERT FLESHNER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 4416 East-West Highway MD031-1000		Transaction ID: PR1159819710693
City	State	
Bethesda	MD	Zip Code 20817
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group	Occupation CEO UHC of the Mid Atlantic	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1038.42	

Full Name (Last, First, Middle Initial) C. REED V TUCKSON, M.D.		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-1902		Transaction ID: PR1159819810693
City	State	
Minnetonka	MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 230.76
Name of Employer UnitedHealth Group	Occupation Sr. V.P. Consumer Health & Medical Car	P/R Deduction (\$115.38 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3115.26	

SUBTOTAL of Receipts This Page (optional)	▶	327.88
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 37 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial) A. DONNA L. HOFFMEIER		Date of Receipt M / D / Y
Mailing Address 1225 New York Ave, Nw, Suite 475 DC030-1000		Transaction ID: PR1162354510693
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 140.00
Name of Employer UnitedHealth Group, Inc.	Occupation Public Affairs	P/R Deduction (\$70.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1650.00	

Full Name (Last, First, Middle Initial) B. STEVEN MATTHEWS		Date of Receipt M / D / Y
Mailing Address 7 Hanover Square NY037-1000		Transaction ID: PR1530189410693
City New York	State NY	Zip Code 10004
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Public Affairs	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 519.21	

Full Name (Last, First, Middle Initial) C. JESSE SWEELY		Date of Receipt M / D / Y
Mailing Address 8045 Leesburg Pke Ste 650 VA028-1000		Transaction ID: PR1530189710693
City Vienna	State VA	Zip Code 22182
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.25
Name of Employer UnitedHealth Group, Inc.	Occupation Chief Operating Officer	P/R Deduction (\$192.25 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	370.71
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 38 / 86

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. JOHN KIRCHNER		Date of Receipt M / D / Y
Mailing Address 172 West State St., Suite 102 NJ040-1000		Transaction ID: PR1530190510693
City Trenton	State NJ	Zip Code 08530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group, Inc.	Occupation Vice President	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1038.42	

Full Name (Last, First, Middle Initial) B. SHIVRAJ J DESAI		Date of Receipt M / D / Y
Mailing Address The Wannamaker Building 100 Penn S PA040-1000		Transaction ID: PR1530707510693
City Philadelphia	State PA	Zip Code 19107
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group, Inc.	Occupation Medical Director	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1038.42	

Full Name (Last, First, Middle Initial) C. LESLIE GIDDENS ROBINSON		Date of Receipt M / D / Y
Mailing Address 8045 Leesburg Pike Ste B50 VA028-1000		Transaction ID: PR1530708310693
City Vienna	State VA	Zip Code 22182
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 230.76
Name of Employer UnitedHealth Group, Inc.	Occupation SVP Medical Management	P/R Deduction (\$115.38 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3115.26	

SUBTOTAL of Receipts This Page (optional)	384.80
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 38 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. DEBORAH MATES CHASKES		Date of Receipt M / D / Y
Mailing Address 8045 Leesburg Pike Ste 650 VA026-1000		Transaction ID: PR1530798510693
City Vienna	State VA	Zip Code 22182
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer UnitedHealth Group, Inc.	Occupation Attorney	P/R Deduction (\$100.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2700.00	

Full Name (Last, First, Middle Initial) B. THELMA DUGGIN		Date of Receipt M / D / Y
Mailing Address 8045 Leesburg Pike Ste 650 VA026-1000		Transaction ID: PR1530798210693
City Vienna	State VA	Zip Code 22182
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.25
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$192.25 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. RICHARD H MCGASKILL JR		Date of Receipt M / D / Y
Mailing Address 9900 Bren Rd East MND08-1500		Transaction ID: PR1550188710693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 230.76
Name of Employer UnitedHealth Group, Inc.	Occupation Administration	P/R Deduction (\$115.38 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2538.38	

SUBTOTAL of Receipts This Page (optional)	623.01
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 40 / 86

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. MARY G SHINHAM		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 100 Penn Square, FL9 PA040-1000		Transaction ID: PR1550190910693
City Philadelphia	State PA	Zip Code 19107
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

Full Name (Last, First, Middle Initial) B. JAQUELYN E ALBRIGHT		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T202		Transaction ID: PR1550191010693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.70
Name of Employer UnitedHealth Group, Inc.	Occupation Attorney	P/R Deduction (\$28.85 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 778.95	

Full Name (Last, First, Middle Initial) C. DAVID P INGRAHAM		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T500		Transaction ID: PR1550191110693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 134.62
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$67.31 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1289.22	

SUBTOTAL of Receipts This Page (optional)	▶	232.32
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 41 / 86

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. CYNTHIA ADAMS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9700 Bissonnet Suite 2300/2500 TX037-E268		Transaction ID: PR1551003910693
City Houston	State TX	Zip Code 77036-8000
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 23.08
Name of Employer UnitedHealth Group, Inc.	Occupation Medical Services	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 311.58	

Full Name (Last, First, Middle Initial) B. DAVID RASTAR		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 12125 Technology Drive MND02-D100		Transaction ID: PR1551005110693
City Eden Prairie	State MN	Zip Code 55344
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer UnitedHealth Group, Inc.	Occupation COO Ingenix	P/R Deduction (\$100.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) C. ROBERT J BOHNENKAMP		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-W300		Transaction ID: PR1551005810693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 78.92
Name of Employer UnitedHealth Group, Inc.	Occupation Systems	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1038.42	

SUBTOTAL of Receipts This Page (optional)	▶	300.00
TOTAL This Period (last page this line number only)	▶	

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

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

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(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. MICHAEL J BRESOLIN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 1900 E Golf Rd #200/300 IL035-0300		Transaction ID: PR1551005710693
City Schaumburg	State IL	Zip Code 60173
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer UnitedHealth Group, Inc.	Occupation Health Care	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

Full Name (Last, First, Middle Initial) B. RITA T T DONOVAN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 11141 Aurora Ave IA040-1000		Transaction ID: PR1551006610693
City Urbandale	State IA	Zip Code 50322
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.38
Name of Employer UnitedHealth Group, Inc.	Occupation Systems	P/R Deduction (\$7.69 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 207.63	

Full Name (Last, First, Middle Initial) C. TIMOTHY J HEADY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-S234		Transaction ID: PR1551122510693
City Edina	State MN	Zip Code 55438
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.00
Name of Employer UnitedHealth Group, Inc.	Occupation Management	P/R Deduction (\$40.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1020.00	

SUBTOTAL of Receipts This Page (optional)	▶	135.38
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 43 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. CHRISTOPHER R R HOCK		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 450 Columbus Blvd CT030-13NB		Transaction ID: PR1551128910693
City Hartford	State CT	Zip Code 06103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 23.08
Name of Employer UnitedHealth Group, Inc.	Occupation Management	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 280.82	

Full Name (Last, First, Middle Initial) B. LISA G GHOLUBEC		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 1600 W. Plano Parkway #100 TX032-1000		Transaction ID: PR1551129210693
City Plano	State TX	Zip Code 75075
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.38
Name of Employer UnitedHealth Group, Inc.	Occupation	P/R Deduction (\$7.69 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 207.63	

Full Name (Last, First, Middle Initial) C. JAMES T JARRATT		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-E115		Transaction ID: PR1551132110693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group, Inc.	Occupation Customer Relations	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1038.42	

SUBTOTAL of Receipts This Page (optional)	▶	115.38
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 44 / 86

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. AMYE E JOY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-W245		Transaction ID: PR1551132210693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.38
Name of Employer UnitedHealth Group, Inc.	Occupation Systems	P/R Deduction (\$7.68 Bi-W- eekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 207.63	

Full Name (Last, First, Middle Initial) B. JEFFREY W III KAGAN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 295D Expressway Drive South Ste 24 NYD33-1000		Transaction ID: PR1551132310693
City Islandia	State NY	Zip Code 11749-1412
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer UnitedHealth Group, Inc.	Occupation Financial Analyst	P/R Deduction (\$20.00 Bi- Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

Full Name (Last, First, Middle Initial) C. JERRY J J KNUTSON		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T500		Transaction ID: PR1551132510693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.38
Name of Employer UnitedHealth Group, Inc.	Occupation	P/R Deduction (\$7.68 Bi-W- eekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 207.63	

SUBTOTAL of Receipts This Page (optional)	70.78
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 45 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. MICHAEL C MATTEO		Date of Receipt M / D / Y
Mailing Address 450 Columbus Blvd CT030-15NB		Transaction ID: PR1551133410693
City Hartford	State CT	Zip Code 06103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Management	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 519.21	

Full Name (Last, First, Middle Initial) B. DANIEL MORAGA		Date of Receipt M / D / Y
Mailing Address First Security Bank Building 5301 Ste 800 (NM035-1000)		Transaction ID: PR1551134210693
City Albuquerque	State NM	Zip Code 87108
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.38
Name of Employer UnitedHealth Group, Inc.	Occupation Management	P/R Deduction (\$7.69 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 207.63	

Full Name (Last, First, Middle Initial) C. KAREN ELIZABETH WILLIAMSON		Date of Receipt M / D / Y
Mailing Address Americhoice 8045 Leesburg Pike Ste VA028-1000		Transaction ID: PR1551136510693
City Vienna	State VA	Zip Code 22182
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 7.70
Name of Employer UnitedHealth Group, Inc.	Occupation Sales	P/R Deduction (\$3.85 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 277.00	

SUBTOTAL of Receipts This Page (optional)	61.54
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 46 / 86

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. DAWN M OWENS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address FL 35 1114 AVENUE OF THE AMERICAS NY065-W350		Transaction ID: PR1551160310693
City NEW YORK	State NY	Zip Code 10036
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer UnitedHealth Group, Inc.	Occupation Management	P/R Deduction (\$8.00 Bi-W- eekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. CATHERINE M PERRY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 8051 East Maplewood Ave. #300 CO030-1000		Transaction ID: PR1551160410693
City Greenwood Village	State CO	Zip Code 80111
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer UnitedHealth Group, Inc.	Occupation Nurse	P/R Deduction (\$20.00 Bi- Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

Full Name (Last, First, Middle Initial) C. MILES R PORTER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MN008-W212		Transaction ID: PR1551160810693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Information Systems	P/R Deduction (\$10.00 Bi- Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

SUBTOTAL of Receipts This Page (optional)	▶	280.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 47 / 86

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) A. ERIKA A. ROGERS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 208D East 20th Street CA060-1000		Transaction ID: PR1551160710693
City Chicago	State CA	Zip Code 95828
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Management	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) B. THOMAS J VALERIUS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 990D Bren Road East MND08-T850		Transaction ID: PR1551161310693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 153.84
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$78.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2078.84	

Full Name (Last, First, Middle Initial) C. LOIS T WEIHRACH		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 990D Bren Road East MND08-W130		Transaction ID: PR1551161410693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer UnitedHealth Group, Inc.	Occupation Computer Systems	P/R Deduction (\$15.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 355.00	

SUBTOTAL of Receipts This Page (optional)	▶	203.84
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 48 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial) A. RONALD C WHITE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-T830		Transaction ID: PR1551161510693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group, Inc.	Occupation Sales	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1038.42	

Full Name (Last, First, Middle Initial) B. ANTHONY R CARR		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 13621 Nw 12th St FLD75-1000		Transaction ID: PR1554323410693
City Sunrise	State FL	Zip Code 33323
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer UnitedHealth Group, Inc.	Occupation Sales	P/R Deduction (\$15.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 405.00	

Full Name (Last, First, Middle Initial) C. JOHN O ENDERLE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 450 Columbus Blvd CT030-075B		Transaction ID: PR1554323510693
City Hartford	State CT	Zip Code 06103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 22.00
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$11.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 297.00	

SUBTOTAL of Receipts This Page (optional)	▶	128.92
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 48 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial) A. CHRISTINE M HARRIS		Date of Receipt M / D / Y
Mailing Address 450 Columbus Blvd CT030-11NA		Transaction ID: PR1554323610693
City Hartford	State CT	Zip Code 06103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Marketing	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) B. RICK M JELINEK		Date of Receipt M / D / Y
Mailing Address 9900 Bren Road East MND08-T500		Transaction ID: PR1554323910693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 96.00
Name of Employer UnitedHealth Group, Inc.	Occupation Senior Management	P/R Deduction (\$48.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1114.74	

Full Name (Last, First, Middle Initial) C. CYNTHIA H JOHNSON		Date of Receipt M / D / Y
Mailing Address 3700 Colonnade Parkway AL001-02D1		Transaction ID: PR1554324010693
City Birmingham	State AL	Zip Code 35243
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 23.08
Name of Employer UnitedHealth Group, Inc.	Occupation Sales	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 311.58	

SUBTOTAL of Receipts This Page (optional)	▶	139.08
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 60 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. JOSEPH J MCERLANE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5402 Parkdale Drive #300 MN025-2500		Transaction ID: PR1554324110693
City	State	
Minneapolis	MN	Zip Code 55416
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Management	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 519.21	

Full Name (Last, First, Middle Initial) B. MICHAEL D PERLMUTTER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address FL 35 1114 Avenue of the Americas NY065-W350		Transaction ID: PR1554324410693
City	State	
New York	NY	Zip Code 10036
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer UnitedHealth Group, Inc.	Occupation Sales	P/R Deduction (\$7.50 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 202.50	

Full Name (Last, First, Middle Initial) C. MICHAEL RADJ		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 3141 North Third Ave AZ080-S120		Transaction ID: PR1554324510693
City	State	
Phoenix	AZ	Zip Code 85013
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Marketing	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 519.21	

SUBTOTAL of Receipts This Page (optional)	91.92
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 51 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial) A. CATHERINE E SPILLANE		Date of Receipt M / D / Y
Mailing Address 9700 Bissonnet Suite 2300/2500 TX037-0100		Transaction ID: PR1554324610693
City Houston	State TX	Zip Code 77036-8000
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Administration	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 519.21	

Full Name (Last, First, Middle Initial) B. KIRK E STAPLETON		Date of Receipt M / D / Y
Mailing Address 5901 Lincoln Drive MND12-S13B		Transaction ID: PR1554324710693
City Edina	State MN	Zip Code 55436
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer UnitedHealth Group, Inc.	Occupation Network Development	P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00	

Full Name (Last, First, Middle Initial) C. CRAIG C ANDERSON		Date of Receipt M / D / Y
Mailing Address 450 Columbus Blvd CT030-15NB		Transaction ID: PR1575957310693
City Hartford	State CT	Zip Code 06103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 519.21	

SUBTOTAL of Receipts This Page (optional)	176.92
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 52 / 86

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) A. KAREN L ERICKSON		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-N110		Transaction ID: PR1575957610693
City Edina	State MN	Zip Code 55436
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.00
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$40.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. MARIO F FABRIZIO JR		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 815D Trenbon Lane N MND13-N300		Transaction ID: PR1575957710693
City Plymouth	State MN	Zip Code 55442
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer UnitedHealth Group, Inc.	Occupation Data Systems Management	P/R Deduction (\$75.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1625.00	

Full Name (Last, First, Middle Initial) C. GATHERINE B KILLIAN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address The Wannamaker Building 100 Penn S PAD40-1000		Transaction ID: PR1575957810693
City Philadelphia	State PA	Zip Code 19107
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 153.84
Name of Employer UnitedHealth Group, Inc.	Occupation Public Relations	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2076.84	

SUBTOTAL of Receipts This Page (optional)	383.84
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 53 / 86

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. ERNEST MONFILETTO		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address The Wannamaker Building 100 Penn S PA040-1000		Transaction ID: PR1575958110693
City Philadelphia	State PA	Zip Code 19107
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 153.84
Name of Employer UnitedHealth Group, Inc.	Occupation Computer Operations	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2076.84	

Full Name (Last, First, Middle Initial) B. LEE D VALENTA		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 12125 TECHNOLOGY DRIVE MND02-D100		Transaction ID: PR1575958510693
City EDEN PRAIRIE	State MN	Zip Code 55344
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 384.60
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$192.90 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4128.00	

Full Name (Last, First, Middle Initial) C. PATRICK J BYRNE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 6300 Olson Memorial HWY MND10-S203		Transaction ID: PR1580863010693
City Golden Valley	State MN	Zip Code 55427
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1038.42	

SUBTOTAL of Receipts This Page (optional)	▶	615.38
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 54 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. DAVID L COLE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 8300 Olson Memorial HWY MNO10-W120		Transaction ID: PR1580863210693
City Golden Valley	State MN	Zip Code 55427
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1038.42	

Full Name (Last, First, Middle Initial) B. C RICHARD COOK		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5900 Granite PKWY STE 900 TX033-1000		Transaction ID: PR1580863310693
City Plano	State TX	Zip Code 75024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1038.42	

Full Name (Last, First, Middle Initial) C. TOM M DAVIS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5975 Castle Creek PKWY N DR STE 1 IND40-1000		Transaction ID: PR1580863510693
City Indianapolis	State IN	Zip Code 46250
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.00
Name of Employer UnitedHealth Group, Inc.	Occupation Director Sales	P/R Deduction (\$40.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1080.00	

SUBTOTAL of Receipts This Page (optional)	▶	233.84
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 55 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial) A. DAVID B OSTLER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 2525 Lake Park Boulevard UT015-0500		Transaction ID: PR1580864610693
City West Valley City	State UT	Zip Code 84120
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Marketing	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) B. THOMAS S PAUL		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T500		Transaction ID: PR1580864710693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group, Inc.	Occupation Pharmacy	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1038.42	

Full Name (Last, First, Middle Initial) C. JIMMIE L PDGUE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 601 Office Center Drive PAD20-1000		Transaction ID: PR1580864810693
City Fort Washington	State PA	Zip Code 19034
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Health Care	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 519.21	

SUBTOTAL of Receipts This Page (optional)	▶	135.38
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 66 / 86

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. PAMELA J SAUNDERS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 145 Commercial St ME009-1000		Transaction ID: PR1580865010693
City Portland	State ME	Zip Code 04101
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1273.80	

Full Name (Last, First, Middle Initial) B. KAREN R SCHIEVELBEIN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 425 Market St Floor 12/13/27 CA035-2700		Transaction ID: PR1580865110693
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 153.84
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2078.84	

Full Name (Last, First, Middle Initial) C. JOSEPH O WEISSENBORN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T850		Transaction ID: PR1580865410693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 170.00
Name of Employer UnitedHealth Group, Inc.	Occupation HR Benefits	P/R Deduction (\$85.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2295.00	

SUBTOTAL of Receipts This Page (optional)	▶	343.84
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 57 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. PATRICK YUNG		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 450 Columbus Blvd CT030-03NB		Transaction ID: PR1580865510693
City Hartford	State CT	Zip Code 06103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.38
Name of Employer UnitedHealth Group, Inc.	Occupation Marketing/Sales	P/R Deduction (\$7.69 Bi-W- eekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 207.63	

Full Name (Last, First, Middle Initial) B. GEORGE E BENNETT		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 4170 Ashford Dunwoody RD Ste 100 GA035-1000		Transaction ID: PR1586303610693
City Atlanta	State GA	Zip Code 30319
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$10.00 Bi- Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) C. WILLIAM S BOJAN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T205		Transaction ID: PR1586303710693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.00
Name of Employer UnitedHealth Group, Inc.	Occupation Risk Management	P/R Deduction (\$40.00 Bi- Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1080.00	

SUBTOTAL of Receipts This Page (optional)	▶	115.38
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 58 / 86

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) A. BRIGID A BONNER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-W212		Transaction ID: PR1596303810693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer UnitedHealth Group, Inc.	Occupation Information Technology	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

Full Name (Last, First, Middle Initial) B. CHARLES A BOWLES		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address P.O Box 9472 PAB6D-1000		Transaction ID: PR1596303910693
City Minneapolis	State MN	Zip Code 55440-9472
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Sales & Marketing	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 519.21	

Full Name (Last, First, Middle Initial) C. PAUL H GULSTRAND		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 6300 Olson Memorial HWY MND10-E112		Transaction ID: PR15963D4010693
City Golden Valley	State MN	Zip Code 55427
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 78.92
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1038.42	

SUBTOTAL of Receipts This Page (optional)	▶	155.38
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 58 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial) A. RICHARD J HUGHES		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 8300 Olson Memorial Hwy MND10-S268		Transaction ID: PR1596304110693
City Golden Valley	State MN	Zip Code 55427
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Administration	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) B. PAMELA N HURSH		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 8300 Olson Memorial HWY MND10-S203		Transaction ID: PR1596304210693
City Golden Valley	State MN	Zip Code 55427
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer UnitedHealth Group, Inc.	Occupation Accountant	P/R Deduction (\$25.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	

Full Name (Last, First, Middle Initial) C. JOHN KING		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 450 Columbus Blvd CT030-03NE		Transaction ID: PR1596304410693
City Hartford	State CT	Zip Code 06103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Sales	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

SUBTOTAL of Receipts This Page (optional)	90.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 60 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial) A. GAYE ADAMS MASSEY			Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-T500			Transaction ID: PR1596304510693
City Minnetonka	State MN	Zip Code 55343	Amount of Each Receipt this Period 38.46
FEC ID number of contributing federal political committee. C			
Name of Employer UnitedHealth Group, Inc.	Occupation Attorney	Aggregate Year-to-Date ▼ 519.21	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. JAY S MATUSHAK			Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-T700			Transaction ID: PR1596304610693
City Minnetonka	State MN	Zip Code 55343	Amount of Each Receipt this Period 23.08
FEC ID number of contributing federal political committee. C			
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	Aggregate Year-to-Date ▼ 311.58	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MICHAEL JOHN McDONNELL			Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-N205			Transaction ID: PR1596304710693
City Edina	State MN	Zip Code 55438	Amount of Each Receipt this Period 154.00
FEC ID number of contributing federal political committee. C			
Name of Employer UnitedHealth Group, Inc.	Occupation Attorney	Aggregate Year-to-Date ▼ 2079.00	P/R Deduction (\$77.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	▶	215.54
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 61 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial) A. GEORGE L MIKAN III			Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-T700			Transaction ID: PR1596304810693
City	State	Zip Code	
Minnetonka	MN	55343	Amount of Each Receipt this Period 153.84
FEC ID number of contributing federal political committee. C			P/R Deduction (\$76.92 Bi-Weekly)
Name of Employer UnitedHealth Group, Inc.		Occupation Finance	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 2076.84	

Full Name (Last, First, Middle Initial) B. CAROL B MORNESS			Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 8300 Olson Memorial HWY MND10-E112			Transaction ID: PR1596304910693
City	State	Zip Code	
Golden Valley	MN	55427	Amount of Each Receipt this Period 76.92
FEC ID number of contributing federal political committee. C			P/R Deduction (\$38.46 Bi-Weekly)
Name of Employer UnitedHealth Group, Inc.		Occupation Underwriting	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 1038.42	

Full Name (Last, First, Middle Initial) C. PAMELA J RUSSO			Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 425 Market St FL 12/13/27 CA035-2700			Transaction ID: PR1596305010693
City	State	Zip Code	
San Francisco	CA	94105	Amount of Each Receipt this Period 23.08
FEC ID number of contributing federal political committee. C			P/R Deduction (\$11.54 Bi-Weekly)
Name of Employer UnitedHealth Group, Inc.		Occupation Personnel	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 311.58	

SUBTOTAL of Receipts TNs Page (optional)	253.84
TOTAL This Period (last page this line number only)	

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

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

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(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. METE SAHIN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 800 King Farm Blvd Ste 600 MD051-1000		Transaction ID: PR1596305110693
City Rockville	State Zip Code MD 20850	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 153.84
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2076.84	

Full Name (Last, First, Middle Initial) B. DANIEL J SCHUMACHER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 8300 Olson Memorial Hwy MND10-W115		Transaction ID: PR1596305410693
City Golden Valley	State Zip Code MN 55427	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.38
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$7.69 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 207.63	

Full Name (Last, First, Middle Initial) C. DAVID LYNN SPARKMAN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9300 Bren Road East MND08-T700		Transaction ID: PR1596305510693
City Minnetonka	State Zip Code MN 55343	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.38
Name of Employer UnitedHealth Group, Inc.	Occupation	P/R Deduction (\$7.69 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 207.63	

SUBTOTAL of Receipts This Page (optional)	▶	184.60
TOTAL This Period (last page this line number only)	▶	

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

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

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. SCOTT E THEISEN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-W385		Transaction ID: PR1596305610693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 519.21	

Full Name (Last, First, Middle Initial) B. ROGER A WEBER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 8300 Olson Memorial Hwy MND10-W115		Transaction ID: PR1596305710693
City Golden Valley	State MN	Zip Code 55427
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 23.08
Name of Employer UnitedHealth Group, Inc.	Occupation Administration	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 311.58	

Full Name (Last, First, Middle Initial) C. GEOFFREY ALAN GOTHRO		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T700		Transaction ID: PR1596306810693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group, Inc.	Occupation Marketing	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 961.50	

SUBTOTAL of Receipts This Page (optional)	▶	138.46
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
or each category of the
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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. THOMAS D LEWIS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 383B N Causeway Blvd STE 2100 LA035-1000		Transaction ID: PR1596306910693
City State Zip Code Metairie LA 70002	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 661.50	

Full Name (Last, First, Middle Initial) B. ROBERT W OBERRENDER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 990D Bren Road East MND08-T380		Transaction ID: PR1596307010693
City State Zip Code Minnetonka MN 55343	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 58.00
Name of Employer UnitedHealth Group, Inc.	Occupation Cash Management	P/R Deduction (\$29.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 725.00	

Full Name (Last, First, Middle Initial) C. ROBERT REBITZER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 425 Market St Fl 12/13/27 CA035-2700		Transaction ID: PR1596307110693
City State Zip Code San Francisco CA 94105	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 480.75	

SUBTOTAL of Receipts This Page (optional)	▶	173.38
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 65 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. KEVINJOE SWANSON		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address One Research Drive #300B MA065-1600		Transaction ID: PR1596307310693
City Westborough	State MA	Zip Code 01581
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer UnitedHealth Group, Inc.	Occupation Sales	P/R Deduction (\$15.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

Full Name (Last, First, Middle Initial) B. DIANE L BEDNAR FLYNN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 990D Bren Road East MND08-W130		Transaction ID: PR1596309710693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer UnitedHealth Group, Inc.	Occupation Health Care Services	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) C. LISA M BEHNKE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address Two Penn Plaza 6/7 Floors NYD38-1000		Transaction ID: PR1596309810693
City New York	State NY	Zip Code 10121
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer UnitedHealth Group, Inc.	Occupation Medicine	P/R Deduction (\$100.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2300.00	

SUBTOTAL of Receipts This Page (optional)	270.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 66 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. JAMES M BLETZER			Date of Receipt M / M / D D / Y Y Y Y
Mailing Address Two Penn Plaza 8/7 Floors NY036-1000			Transaction ID: PR1596310210693
City New York	State NY	Zip Code 10121	Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. C			
Name of Employer UnitedHealth Group, Inc.	Occupation Sales	Aggregate Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. JAMES M BOGDAN			Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-S204			Transaction ID: PR1596310310693
City Edina	State MN	Zip Code 55426	Amount of Each Receipt this Period 38.00
FEC ID number of contributing federal political committee. C			
Name of Employer UnitedHealth Group, Inc.	Occupation Management	Aggregate Year-to-Date ▼ 437.00	P/R Deduction (\$19.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. TROY A BORGA			Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T500			Transaction ID: PR1596310410693
City Minnetonka	State MN	Zip Code 55343	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	Aggregate Year-to-Date ▼ 230.00	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	98.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 67 / 86

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) A. THOMAS R BRADY		Date of Receipt M / D / Y
Mailing Address 9200 Worthington Road OH020-3010		Transaction ID: PR1596310510693
City Westerville	State OH	Zip Code 43082
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 153.84
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1769.16	

Full Name (Last, First, Middle Initial) B. ROBERT W BURG		Date of Receipt M / D / Y
Mailing Address 2700 Midwest Drive WI010-1000		Transaction ID: PR1596310810693
City Onalaska	State WI	Zip Code 54650
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.00
Name of Employer UnitedHealth Group, Inc.	Occupation Attorney	P/R Deduction (\$40.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 820.00	

Full Name (Last, First, Middle Initial) C. PATRICIA M GARROLL		Date of Receipt M / D / Y
Mailing Address 9700 Bissonnet, Suite 2300/2500 TX037-0100		Transaction ID: PR1596311110693
City Houston	State TX	Zip Code 77038-6000
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Customer Relations	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional)	▶	253.84
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 68 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial) A. JEFFREY S COOK		Date of Receipt M / D / Y
Mailing Address 5959 Northwest Pkwy Ste 107 TX061-1000		Transaction ID: PR1596311310693
City San Antonio	State TX	Zip Code 78249
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 23.08
Name of Employer UnitedHealth Group, Inc.	Occupation Network Management	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 265.42	

Full Name (Last, First, Middle Initial) B. RAMON E COTO		Date of Receipt M / D / Y
Mailing Address 13621 NW 12th St FL075-1000		Transaction ID: PR1596311510693
City Sunrise	State FL	Zip Code 33323
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 442.29	

Full Name (Last, First, Middle Initial) C. ANNE D DEFUSCO		Date of Receipt M / D / Y
Mailing Address 450 Columbus Blvd CT030-15NA		Transaction ID: PR1596311710693
City Hartford	State CT	Zip Code 06103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 23.08
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 265.42	

SUBTOTAL of Receipts This Page (optional)	84.62
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
or each category of the
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FOR LINE NUMBER: PAGE 68 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. JEFFREY P DOOLEY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 900B Corporate Lake Drive FL021-1021		Transaction ID: PR1596312110693
City Tampa	State FL	Zip Code 33634
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 23.08
Name of Employer UnitedHealth Group, Inc.	Occupation Sales	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 265.42	

Full Name (Last, First, Middle Initial) B. RICHARD G DUNLOP		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 920D Worthington Road OH020-301D		Transaction ID: PR1596312310693
City Westerville	State OH	Zip Code 43082
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$25.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 575.00	

Full Name (Last, First, Middle Initial) C. KEITH A EPPERSON		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-N230		Transaction ID: PR1596312410693
City Edina	State MN	Zip Code 55438
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer UnitedHealth Group, Inc.	Occupation Actuary	P/R Deduction (\$15.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 345.00	

SUBTOTAL of Receipts This Page (optional)	▶	103.08
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 70 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial) A. JILLIAN R FOUCRE		Date of Receipt M / D / Y
Mailing Address 233 North Michigan Ave IL014-3605		Transaction ID: PR1596312710693
City Chicago	State IL Zip Code 60601	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer UnitedHealth Group, Inc.	Occupation Senior Management	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

Full Name (Last, First, Middle Initial) B. STEVAN D GARCIA		Date of Receipt M / D / Y
Mailing Address 5901 Lincoln Drive MND12-N110		Transaction ID: PR1596312910693
City Edina	State MN Zip Code 55426	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Data Systems	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 442.29	

Full Name (Last, First, Middle Initial) C. RANDY P GILES		Date of Receipt M / D / Y
Mailing Address 2000 West Loop South Suite #60070 TX035-1000		Transaction ID: PR1596313210693
City Houston	State TX Zip Code 77027	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 78.92
Name of Employer UnitedHealth Group, Inc.	Occupation Health Care	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 854.58	

SUBTOTAL of Receipts This Page (optional)	155.38
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 71 / 86

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) A. RONALD H HARMS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-S110		Transaction ID: PR1596313510693
City	State	Zip Code
Edina	MN	55436
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 153.84
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1769.16	

Full Name (Last, First, Middle Initial) B. EDWARD J HAWLEY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 2700 Midwest Drive WID10-1000		Transaction ID: PR1596313610693
City	State	Zip Code
Onalaska	WI	54650
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group, Inc.	Occupation Health Care	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 884.58	

Full Name (Last, First, Middle Initial) C. KURT A HEJMANN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 13655 Riverport Drive MO050-1000		Transaction ID: PR1596313710693
City	State	Zip Code
Manlyand Heights	MO	63043
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 24.00
Name of Employer UnitedHealth Group, Inc.	Occupation Information Networking	P/R Deduction (\$12.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 278.00	

SUBTOTAL of Receipts THs Page (optional)	▶	254.78
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 72 / 86

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) A. DALE JONES		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 10 Cadillac Drive #200 TN002-1002		Transaction ID: PR1596314210693
City Brentwood	State TN	Zip Code 37027
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group, Inc.	Occupation Health Care	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 884.58	

Full Name (Last, First, Middle Initial) B. NANETTE R. KARTSONIS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-W130		Transaction ID: PR1596314610693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer UnitedHealth Group, Inc.	Occupation Sales	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) C. EDWARD LAGERSTROM		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T430		Transaction ID: PR1596315010693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group, Inc.	Occupation Information Systems	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 884.58	

SUBTOTAL of Receipts TN's Page (optional)	193.84
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 73 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. BRIAN C MURRAY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-T700		Transaction ID: PR1596316210693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.24
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$9.62 Bi-W- eekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 221.26	

Full Name (Last, First, Middle Initial) B. THOMAS CHARLES REKART		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 12125 Technology Drive MND02-D100		Transaction ID: PR1596316710693
City Eden Prairie	State MN	Zip Code 55344
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Information Systems	P/R Deduction (\$19.23 Bi- Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 442.29	

Full Name (Last, First, Middle Initial) C. JOHN H RENNICK JR		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 6230 Rainview Rd #315 NC015-1000		Transaction ID: PR1596316810693
City Charlotte	State NC	Zip Code 28210-5253
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Doctor	P/R Deduction (\$19.23 Bi- Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 442.29	

SUBTOTAL of Receipts This Page (optional)	▶	96.16
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 74 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial) A. JAMISON RICE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-S200		Transaction ID: PR1596316910693
City Edina	State MN	Zip Code 55436
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 230.08
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 265.42	

Full Name (Last, First, Middle Initial) B. STEPHAN S RODGERS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-S200		Transaction ID: PR1596317110693
City Edina	State MN	Zip Code 55436
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 230.76
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$115.98 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2653.74	

Full Name (Last, First, Middle Initial) C. DANIEL I ROSENTHAL		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 13621 NW 12Th St FLD75-1000		Transaction ID: PR1596317310693
City Sunrise	State FL	Zip Code 33323
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 442.29	

SUBTOTAL of Receipts This Page (optional)	292.30
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 75 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. KEVIN J RUTH		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 80 King Farm Blvd Ste 600 MD051-1000		Transaction ID: PR1596317410693
City State Zip Code Rockville MD 20850	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 150.00
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$75.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1725.00	

Full Name (Last, First, Middle Initial) B. MANJELA SELVA		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 13621 NW 12th St FLD75-1000		Transaction ID: PR1596317710693
City State Zip Code Sunrise FL 33323	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Doctor	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 442.29	

Full Name (Last, First, Middle Initial) C. JUAN R SERRANO		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5800 Granite Parkway Ste 900 TX033-1000		Transaction ID: PR1596317810693
City State Zip Code Plano TX 75024	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 442.29	

SUBTOTAL of Receipts This Page (optional)	226.92
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 76 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial) A. DAVID C STURKEY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 107 Westpark Blvd Ste 110 SC020-1000		Transaction ID: PR1596318410693
City Columbia	State SC	Zip Code 29210
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group, Inc.	Occupation Health Care	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 884.58	

Full Name (Last, First, Middle Initial) B. ROXANNE THOMAS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T815		Transaction ID: PR1596318910693
City Minnetoka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 23.08
Name of Employer UnitedHealth Group, Inc.	Occupation Administrative	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 285.42	

Full Name (Last, First, Middle Initial) C. CHRIS B TURNAU		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T390		Transaction ID: PR1596319110693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Tax Specialist	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

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

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

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

FOR LINE NUMBER: PAGE 77 / 86

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. ROSEMARY VENUTO		Date of Receipt M / D / Y
Mailing Address 1900 E Golf Road #200/300 IL035-0300		Transaction ID: PR1596319310693
City Schaumburg	State IL	Zip Code 60173
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Medicine	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 442.29	

Full Name (Last, First, Middle Initial) B. FRANK M VIERLING		Date of Receipt M / D / Y
Mailing Address 2700 Midwest Drive WI010-1000		Transaction ID: PR1596319410693
City Onalaska	State WI	Zip Code 54650
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) C. M LAURIE WASSERSTEIN		Date of Receipt M / D / Y
Mailing Address 450 Columbus Blvd CT030-12NB		Transaction ID: PR1596319510693
City Hartford	State CT	Zip Code 06103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Information Systems	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 442.29	

SUBTOTAL of Receipts TNs Page (optional)	96.92
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 78 / 86

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. MYRON R WERLEY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MNO12-N123		Transaction ID: PR1596319610693
City Edina	State MN	Zip Code 55436
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer UnitedHealth Group, Inc.	Occupation Insurance	P/R Deduction (\$12.50 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 287.50	

Full Name (Last, First, Middle Initial) B. WILLIAM R WILSON		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 450 Columbus Blvd CT028-095B		Transaction ID: PR1596320010693
City Hartford	State CT	Zip Code 06103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Underwriting	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) C. JANET P WRIGHT		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9200 Worthington Road OH020-301D		Transaction ID: PR1596320110693
City Westerville	State OH	Zip Code 43082
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Information Systems	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional)	▶	65.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 78 / 86

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. JANET K WUORENMA		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-W130		Transaction ID: PR1590320210693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Administration	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 442.29	

Full Name (Last, First, Middle Initial) B. EDWARD J WHEELER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 84 Warner Road OH910-1000		Transaction ID: PR1600504410693
City Hubbard	State OH	Zip Code 44325
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.00
Name of Employer UnitedHealth Group, Inc.	Occupation Mktg & Strategic Performance	P/R Deduction (\$40.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) C. STEVE L BROECKERT		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 2700 MIDWEST DRIVE WI010-1000		Transaction ID: PR1600507210693
City ONALASKA	State WI	Zip Code 54850
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 23.08
Name of Employer UnitedHealth Group, Inc.	Occupation Securities	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 253.88	

SUBTOTAL of Receipts TNs Page (optional)	▶	141.54
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 80 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial) A. JOHN P DODDY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 131 MORRISTOWN ROAD NJ006-1200		Transaction ID: PR1600597310693
City BASKING RIDGE	State NJ	Zip Code 07820
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer UnitedHealth Group, Inc.	Occupation Information Systems	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

Full Name (Last, First, Middle Initial) B. MARGUERITE EDWARDS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9009 CORPORATE LAKE DRIVE FL021-0540		Transaction ID: PR1600597410693
City TAMPA	State FL	Zip Code 33624
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group, Inc.	Occupation Management	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 848.12	

Full Name (Last, First, Middle Initial) C. MICHAEL ILE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 LINCOLN DRIVE MND12-S200		Transaction ID: PR1600597810693
City EDINA	State MN	Zip Code 55438
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Management	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 423.06	

SUBTOTAL of Receipts This Page (optional)	▶	155.38
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 81 / 86

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) A. THOMAS J O'BRIEN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 880 OAKMONT LANE #200 IL036-1000		Transaction ID: PR1600597810693
City WESTMONT	State IL	Zip Code 60559
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group, Inc.	Occupation Management	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 846.12	

Full Name (Last, First, Middle Initial) B. LISA VANDERHEYDEN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 815D TRENTON LN N MND13-N400		Transaction ID: PR1600598010693
City PLYMOUTH	State MN	Zip Code 55442
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer UnitedHealth Group, Inc.	Occupation Information Systems	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

Full Name (Last, First, Middle Initial) C. SUSAN L FLANAGAN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9200 WORTHINGTON ROAD OH020-3010		Transaction ID: PR1600598310693
City WESTERVILLE	State OH	Zip Code 43082
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Information Technology	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	▶	136.92
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 82 / 86

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. STEPHEN B GREENBERG		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 1925 ISAAC NEWTON SQ STE 300 VA019-1000		Transaction ID: PR1600598410693
City RESTON	State VA	Zip Code 20191
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Operations	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 403.83	

Full Name (Last, First, Middle Initial) B. MICHAEL D MICHAUX		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 12125 TECHNOLOGY DRIVE MND02-D245		Transaction ID: PR1600598510693
City EDEN PRAIRIE	State MN	Zip Code 55344
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 23.08
Name of Employer UnitedHealth Group, Inc.	Occupation Attorney	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 242.34	

Full Name (Last, First, Middle Initial) C. LEWIS G SANDY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 LINCOLN DRIVE MND12-N205		Transaction ID: PR1600598710693
City EDINA	State MN	Zip Code 55438
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 130.00
Name of Employer UnitedHealth Group, Inc.	Occupation Doctor	P/R Deduction (\$65.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1385.00	

SUBTOTAL of Receipts This Page (optional)	▶	191.54
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 83 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. PAUL N WEAVER			Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 8345 LENEKA DRIVE # 300 KS040-1000			Transaction ID: PR1600598810693
City	State	Zip Code	
LENEKA	KS	66214	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer UnitedHealth Group, Inc.		Occupation Executive	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) B. MICHAEL P CAUTIN			Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T500			Transaction ID: PR1602667510693
City	State	Zip Code	
Minnetonka	MN	55343	Amount of Each Receipt this Period 38.46
FEC ID number of contributing federal political committee. C			P/R Deduction (\$19.23 Bi-Weekly)
Name of Employer UnitedHealth Group, Inc.		Occupation Information Systems	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 384.60	

Full Name (Last, First, Middle Initial) C. MATTHEW W PETERSON			Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-S286			Transaction ID: PR1602669910693
City	State	Zip Code	
Edina	MN	55438	Amount of Each Receipt this Period 80.00
FEC ID number of contributing federal political committee. C			P/R Deduction (\$40.00 Bi-Weekly)
Name of Employer UnitedHealth Group, Inc.		Occupation Human Resources	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 800.00	

SUBTOTAL of Receipts This Page (optional)	▶	138.46
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 84 / 86
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. JEFF W MALONEY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 8900 Bren Road East MNC08-W130		Transaction ID: PR1613243510693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 153.84
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1461.48	

Full Name (Last, First, Middle Initial) B. LAURA M BRANKER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 8045 Leesburg Pike VA028-1000		Transaction ID: PR1613243610693
City Vienna	State VA	Zip Code 22182
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.70
Name of Employer UnitedHealth Group, Inc.	Occupation Public Relations	P/R Deduction (\$28.85 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 519.30	

Full Name (Last, First, Middle Initial) C. ALLEN LAWRENCE FINKELSTEIN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 2 Gateway Center NJ040-1000		Transaction ID: PR1620989010693
City Newark	State NJ	Zip Code 07102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group, Inc.	Occupation Administration	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 653.82	

SUBTOTAL of Receipts This Page (optional)	▶	288.48
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 85 / 86

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. VALERIE GREY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 7 Hanover Square NY037-1000		Transaction ID: PR1620989210693
City New York	State NY	Zip Code 10004
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Information Systems	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 326.91	

Full Name (Last, First, Middle Initial) B. DANIEL S WALLER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-W385		Transaction ID: PR1632360010693
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.70
Name of Employer UnitedHealth Group, Inc.	Occupation Management	P/R Deduction (\$28.85 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 403.90	

Full Name (Last, First, Middle Initial) C. STEVE R KOOREN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 6150 Trenton Lane N MND13-N400		Transaction ID: PR1653443210693
City Plymouth	State MN	Zip Code 55442
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$57.69 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 692.28	

SUBTOTAL of Receipts This Page (optional)	▶	211.54
TOTAL This Period (last page this line number only)	▶	

