

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

Office Use Only

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

12FE4M5

UnitedHealth Group Incorporated PAC (United for Health)

ADDRESS (number and street)

9900 Bren Road East

Check if different
than previously
reported. (ACC)

Minnetonka

MN

55343

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00274431

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

(b) Monthly
Report
Due On:

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

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

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

Election on

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

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

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

Election on

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

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
10 16 2008

through

M M M / D D D / Y Y Y Y Y Y
11 24 2008

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

Rangen, Eric, , ,

Signature of Treasurer

Rangen, Eric, , ,

Date

M M M / D D D / Y Y Y Y Y Y
12 04 2008

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

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

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

UnitedHealth Group Incorporated PAC (United for Health)

Report Covering the Period: From: M M / D D / Y Y Y Y Y 10 / 16 / 2008 To: M M / D D / Y Y Y Y Y 11 / 24 / 2008

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2008		243715.76
(b) Cash on Hand at Beginning of Reporting Period.....	286010.47	
(c) Total Receipts (from Line 19)	48349.25	577048.46
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	334359.72	820764.22
7. Total Disbursements (from Line 31)	130700.00	617104.50
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	203659.72	203659.72
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

UnitedHealth Group Incorporated PAC (United for Health)

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	0	8

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	4		2	0	0	8

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).....	45461.96	333291.18
(ii) Unitemized	2887.29	58720.41
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	48349.25	392011.59
(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)	48349.25	392011.59
12. Transfers From Affiliated/Other Party Committees.....	0.00	163964.67
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	13000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	8072.20
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	48349.25	577048.46
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	48349.25	577048.46

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	60000.00	342500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	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 (Including Non-Federal Donations).....	70700.00	274604.50
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	130700.00	617104.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	130700.00	617104.50

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	48349.25	392011.59
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	48349.25	392011.59
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

FOR LINE NUMBER: PAGE 6 OF 147

(check only one)

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

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

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. Sommer, Judah, C., ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.**C** UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2008

Transaction ID : 28895098

Amount of Each Receipt this Period

5000.00

☐ Memo Item

15

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

B. CHAPMAN, MOLLIE, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.**C** UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		24		2008

Transaction ID : PR1159790520894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

C. HOVERMAN, KEN L, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.**C** UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		24		2008

Transaction ID : PR1159790920894

Amount of Each Receipt this Period

90.00

☐ Memo Item

15

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

5120.00

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

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

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

FOR LINE NUMBER: PAGE 7 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. TULUMELLO, PAMELA A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159793120894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

B. SHEEHY, ROBERT J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4560.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159794020894

Amount of Each Receipt this Period

570.00

☐ Memo Item

15

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

C. STREB, DEBORAH S, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159794120894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

630.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. KAZLAUSKAS, ANTHONY J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159794620894

Amount of Each Receipt this Period

60.00

☐ Memo Item

15

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

B. MUGGIO, CARLA M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159798220894

Amount of Each Receipt this Period

57.69

☐ Memo Item

15

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

C. POPECK, CHERYL A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159799420894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

147.69

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

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

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

FOR LINE NUMBER: PAGE 9 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. WHETSTINE, HERBERT L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.64

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159803620894

Amount of Each Receipt this Period

28.83

☐ Memo Item

15

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

B. BELLOWS, BRIAN R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159803820894

Amount of Each Receipt this Period

45.00

☐ Memo Item

15

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

C. NOBLITT, KEITH W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159805520894

Amount of Each Receipt this Period

60.00

☐ Memo Item

15

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

133.83

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

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

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

FOR LINE NUMBER: PAGE 10 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. WATSON, JAMES S, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159806020894

Amount of Each Receipt this Period

57.69

☐ Memo Item

15

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

B. NEVIN, MARILYN C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159807420894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

C. BURDICK, KENNETH A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159808920894

Amount of Each Receipt this Period

240.00

☐ Memo Item

15

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

327.69

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

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

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

FOR LINE NUMBER: PAGE 11 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. ABELMANN, NANCY C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.96

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159809120894

Amount of Each Receipt this Period

34.62

☐ Memo Item

15

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

B. WHITELY, WILLIAM P, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4615.20

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159812620894

Amount of Each Receipt this Period

576.90

☐ Memo Item

15

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

C. COOK, WAYNE F, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C United HealthGroup

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

923.04

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159812820894

Amount of Each Receipt this Period

115.38

☐ Memo Item

15

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

726.90

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

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

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

FOR LINE NUMBER: PAGE 12 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. WICHMANN, DAVID S, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4616.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159814720894

Amount of Each Receipt this Period

1346.90

☐ Memo Item

15

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

B. ERLANDSON, PATRICK J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4615.20

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159815920894

Amount of Each Receipt this Period

576.90

☐ Memo Item

15

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

C. SAURO, PATRICIA R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C United HealthGroup, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159816420894

Amount of Each Receipt this Period

300.00

☐ Memo Item

15

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

2223.80

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

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

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

FOR LINE NUMBER: PAGE 13 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. MUNSELL, WILLIAM A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159816620894

Amount of Each Receipt this Period

300.00

☐ Memo Item

15

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

B. PENSHORN, JOHN S, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159816920894

Amount of Each Receipt this Period

300.00

☐ Memo Item

15

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

C. KALLMEYER, PAUL D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C United HealthGroup

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

840.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159817420894

Amount of Each Receipt this Period

105.00

☐ Memo Item

15

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

705.00

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

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

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

FOR LINE NUMBER: PAGE 14 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. MACH JR, JOHN R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4008.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159817620894

Amount of Each Receipt this Period

501.00

☐ Memo Item

15

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

B. RYAN, TIMOTHY F, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159817920894

Amount of Each Receipt this Period

57.00

☐ Memo Item

15

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

C. QUIRK, THOMAS J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

923.04

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159819120894

Amount of Each Receipt this Period

115.38

☐ Memo Item

15

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

673.38

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

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

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

FOR LINE NUMBER: PAGE 15 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. MOELLER, WILLIAM E, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1846.08

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159819520894

Amount of Each Receipt this Period

230.76

☐ Memo Item

15

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

B. TUCKSON, REED V, , , M.D.

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2769.12

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159819820894

Amount of Each Receipt this Period

346.14

☐ Memo Item

15

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

C. FALK, DAVID J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159820220894

Amount of Each Receipt this Period

37.50

☐ Memo Item

15

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

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

614.40

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

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

FOR LINE NUMBER: PAGE 16 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. OBERMAN, DEBRA A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159820720894

Amount of Each Receipt this Period

57.69

☐ Memo Item

15

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

B. YOUNG, WILLIAM D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

922.80

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159821320894

Amount of Each Receipt this Period

115.35

☐ Memo Item

15

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

C. TRACY, WILLIAM C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1384.80

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159821520894

Amount of Each Receipt this Period

173.10

☐ Memo Item

15

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

346.14

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

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

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

FOR LINE NUMBER: PAGE 17 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. HAWKINS, MICHAEL M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 24 / 2008

Transaction ID : PR1159822020894

Amount of Each Receipt this Period

34.62

☐ Memo Item

15

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

B. SCHNEEWEIS, CAROL M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 24 / 2008

Transaction ID : PR1159823520894

Amount of Each Receipt this Period

90.00

☐ Memo Item

15

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

C. MIGLIORI, RICHARD J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1846.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 24 / 2008

Transaction ID : PR1159827420894

Amount of Each Receipt this Period

230.76

☐ Memo Item

15

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

355.38

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

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

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

FOR LINE NUMBER: PAGE 18 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. BUENEMANN, BARBARA C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.96

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159828720894

Amount of Each Receipt this Period

34.62

☐ Memo Item

15

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

B. RIVET, JEANNINE M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4615.20

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159830020894

Amount of Each Receipt this Period

576.90

☐ Memo Item

15

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

C. SHUFF, JACK E, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

461.52

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159830520894

Amount of Each Receipt this Period

57.69

☐ Memo Item

15

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

669.21

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 19 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. GRANDPRE, PAUL J, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159837120894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

B. STEVENSON, JOHN F, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.20

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159839320894

Amount of Each Receipt this Period

29.40

☐ Memo Item

15

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

C. WINTERS, JILL, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1296.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1159840420894

Amount of Each Receipt this Period

162.00

☐ Memo Item

15

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

221.40

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

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

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

FOR LINE NUMBER: PAGE 20 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. WELTERS, ANTHONY, , Mr.,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4615.20

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1332013220894

Amount of Each Receipt this Period

576.90

☐ Memo Item

15

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

B. KIRCHNER, JOHN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.04

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1530190520894

Amount of Each Receipt this Period

115.38

☐ Memo Item

15

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

C. DUGGIN, THELMA, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4615.28

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1530799220894

Amount of Each Receipt this Period

576.93

☐ Memo Item

15

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

1269.21

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

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

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

FOR LINE NUMBER: PAGE 21 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. BOHNENKAMP, ROBERT J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4615.20

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1551005620894

Amount of Each Receipt this Period

576.90

☐ Memo Item

15

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

B. BRESOLIN, MICHAEL J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1551005720894

Amount of Each Receipt this Period

60.00

☐ Memo Item

15

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

C. HEADY, TIMOTHY J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

960.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1551122520894

Amount of Each Receipt this Period

120.00

☐ Memo Item

15

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

756.90

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

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

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

FOR LINE NUMBER: PAGE 22 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. HOCK, CHRISTOPHER R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.96

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1551128920894

Amount of Each Receipt this Period

34.62

☐ Memo Item

15

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

B. KAGAN, JEFFREY W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1551132320894

Amount of Each Receipt this Period

60.00

☐ Memo Item

15

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

C. KNUTSON, JERRY J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

923.04

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1551132520894

Amount of Each Receipt this Period

115.38

☐ Memo Item

15

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

210.00

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

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

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

FOR LINE NUMBER: PAGE 23 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. MATTEO, MICHAEL C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1551133420894

Amount of Each Receipt this Period

57.69

☐ Memo Item

15

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

B. OWENS, DAWN M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1551160320894

Amount of Each Receipt this Period

57.69

☐ Memo Item

15

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

C. ROGERS, ERIKA A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1551160720894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

145.38

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

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

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

FOR LINE NUMBER: PAGE 24 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. VALERIUS, THOMAS J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1846.08

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1551161320894

Amount of Each Receipt this Period

230.76

☐ Memo Item

15

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

B. WEIHRAUCH, LOIS T, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1296.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1551161420894

Amount of Each Receipt this Period

162.00

☐ Memo Item

15

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

C. ENDERLE, JOHN O, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1320.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1554323520894

Amount of Each Receipt this Period

165.00

☐ Memo Item

15

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

557.76

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

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

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

FOR LINE NUMBER: PAGE 25 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. HARRIS, CHRISTINE MCCARTNEY, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1554323620894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

B. JELINEK, RICK M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4615.20

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1554323920894

Amount of Each Receipt this Period

576.90

☐ Memo Item

15

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

C. RADU, MICHAEL, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

461.52

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1554324520894

Amount of Each Receipt this Period

57.69

☐ Memo Item

15

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

664.59

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

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

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

FOR LINE NUMBER: PAGE 26 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. SPILLANE, CATHERINE E, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1554324620894

Amount of Each Receipt this Period

57.69

☐ Memo Item

15

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

B. STAPLETON, KIRK E, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1554324720894

Amount of Each Receipt this Period

150.00

☐ Memo Item

15

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

C. FASOLA, KENNETH J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4422.90

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1557899820894

Amount of Each Receipt this Period

384.60

☐ Memo Item

15

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

592.29

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

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

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

FOR LINE NUMBER: PAGE 27 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. ERICKSON, KAREN L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4615.20

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1575957620894

Amount of Each Receipt this Period

576.90

☐ Memo Item

15

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

B. MONFILETTO, ERNEST, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1846.08

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1575958120894

Amount of Each Receipt this Period

230.76

☐ Memo Item

15

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

C. VALENTA, LEE D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4615.20

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1575958520894

Amount of Each Receipt this Period

576.90

☐ Memo Item

15

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

1384.56

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

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

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

FOR LINE NUMBER: PAGE 28 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. OSTLER, DAVID B, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1580864620894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

B. PAUL, THOMAS S, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.04

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1580864720894

Amount of Each Receipt this Period

115.38

☐ Memo Item

15

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

C. WEBB, ROB, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4615.20

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1580865320894

Amount of Each Receipt this Period

576.90

☐ Memo Item

15

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

722.28

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

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

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

FOR LINE NUMBER: PAGE 29 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. BOWLES, CHARLES A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596303920894

Amount of Each Receipt this Period

57.69

☐ Memo Item

15

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

B. HUGHES, RICHARD J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596304120894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

C. HURSH, PAMELA N, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596304220894

Amount of Each Receipt this Period

25.00

☐ Memo Item

15

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

112.69

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

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

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

FOR LINE NUMBER: PAGE 30 OF 147

(check only one)

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

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

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. KING, JOHN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596304420894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

B. MASSEY, GAYE A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2769.12

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596304520894

Amount of Each Receipt this Period

346.14

☐ Memo Item

15

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

C. MATUSHAK, JAY S, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

276.96

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596304620894

Amount of Each Receipt this Period

34.62

☐ Memo Item

15

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

410.76

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

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

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

FOR LINE NUMBER: PAGE 31 OF 147

(check only one)

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

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

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. MIKAN III, GEORGE L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4615.20

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596304820894

Amount of Each Receipt this Period

576.90

☐ Memo Item

15

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

B. MORNESS, CAROL B, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.04

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596304920894

Amount of Each Receipt this Period

115.38

☐ Memo Item

15

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

C. RUSSO, PAMELA J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

276.96

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596305020894

Amount of Each Receipt this Period

34.62

☐ Memo Item

15

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

726.90

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

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

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

FOR LINE NUMBER: PAGE 32 OF 147

(check only one)

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

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

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. THEISEN, SCOTT E, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596305620894

Amount of Each Receipt this Period

57.69

☐ Memo Item

15

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

B. LEWIS, THOMAS D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.04

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596306920894

Amount of Each Receipt this Period

115.38

☐ Memo Item

15

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

C. OBERRENDER, ROBERT W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

696.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596307020894

Amount of Each Receipt this Period

87.00

☐ Memo Item

15

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

260.07

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

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

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

FOR LINE NUMBER: PAGE 33 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. FLYNN, DIANE BEDNAR, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596309720894

Amount of Each Receipt this Period

60.00

☐ Memo Item

15

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

B. BEHNKE, LISA M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596309820894

Amount of Each Receipt this Period

300.00

☐ Memo Item

15

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

C. BORCA, TROY A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596310420894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

390.00

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

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

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

FOR LINE NUMBER: PAGE 34 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. COOK, JEFFREY S, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.96

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596311320894

Amount of Each Receipt this Period

34.62

☐ Memo Item

15

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

B. COTO, RAMON E, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596311520894

Amount of Each Receipt this Period

57.69

☐ Memo Item

15

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

C. DEFUSCO, ANNE D, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

276.96

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596311720894

Amount of Each Receipt this Period

34.62

☐ Memo Item

15

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

126.93

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

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

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

FOR LINE NUMBER: PAGE 35 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. DOOLEY, JEFFREY P, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.96

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596312120894

Amount of Each Receipt this Period

34.62

☐ Memo Item

15

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

B. DUNLOP, RICHARD G, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596312320894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

C. FOUCRE, JILLIAN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596312720894

Amount of Each Receipt this Period

60.00

☐ Memo Item

15

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

124.62

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

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

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

FOR LINE NUMBER: PAGE 36 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. GARCIA, STEVAN D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596312920894

Amount of Each Receipt this Period

57.69

☐ Memo Item

15

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

B. GILES, RANDY P, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596313220894

Amount of Each Receipt this Period

38.46

☐ Memo Item

15

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

C. HAWLEY, EDWARD J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

923.04

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596313620894

Amount of Each Receipt this Period

115.38

☐ Memo Item

15

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

211.53

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

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. HEUMANN, KURT A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596313720894

Amount of Each Receipt this Period

60.00

☐ Memo Item

15

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

B. KARTSONIS, NANETTE R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596314620894

Amount of Each Receipt this Period

105.00

☐ Memo Item

15

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

C. LAGERSTROM, EDWARD, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

884.58

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596315020894

Amount of Each Receipt this Period

76.92

☐ Memo Item

15

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

241.92

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

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

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

FOR LINE NUMBER: PAGE 38 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. RENNICK JR, JOHN H, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596316820894

Amount of Each Receipt this Period

57.69

☐ Memo Item

15

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

B. RODGERS, STEPHAN S, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4615.20

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596317120894

Amount of Each Receipt this Period

576.90

☐ Memo Item

15

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

C. ROSENTHAL, DANIEL I, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

461.52

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596317320894

Amount of Each Receipt this Period

57.69

☐ Memo Item

15

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

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

692.28

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

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

FOR LINE NUMBER: PAGE 39 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. RUTH, KEVIN J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596317420894

Amount of Each Receipt this Period

225.00

☐ Memo Item

15

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

B. SELVA, MANUEL A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596317720894

Amount of Each Receipt this Period

57.69

☐ Memo Item

15

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

C. THOMAS, ROXANNE, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

276.96

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596318920894

Amount of Each Receipt this Period

34.62

☐ Memo Item

15

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

317.31

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

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

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

FOR LINE NUMBER: PAGE 40 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. TURNAU, CHRIS B, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596319120894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

B. VIERLING, FRANK M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596319420894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

C. WASSERSTEIN, M LAURIE, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

461.52

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596319520894

Amount of Each Receipt this Period

57.69

☐ Memo Item

15

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

117.69

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

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

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

FOR LINE NUMBER: PAGE 41 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. WERLEY, MYRON R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596319620894

Amount of Each Receipt this Period

37.50

☐ Memo Item

15

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

B. WILSON, WILLIAM R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596320020894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

C. WRIGHT, JANET P, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1596320120894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

97.50

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

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

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

FOR LINE NUMBER: PAGE 42 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. BROECKERT, STEVE L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 24 / 2008

Transaction ID : PR1600597220894

Amount of Each Receipt this Period

11.54

☐ Memo Item

15

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

B. DODDY, JOHN P, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 24 / 2008

Transaction ID : PR1600597320894

Amount of Each Receipt this Period

60.00

☐ Memo Item

15

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

C. EDWARDS, MARGUERITE, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

884.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 24 / 2008

Transaction ID : PR1600597420894

Amount of Each Receipt this Period

76.92

☐ Memo Item

15

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

148.46

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

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

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

FOR LINE NUMBER: PAGE 43 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. ILE, MICHAEL, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1600597620894

Amount of Each Receipt this Period

57.69

☐ Memo Item

15

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

B. GREENBERG, STEPHEN B, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1600598420894

Amount of Each Receipt this Period

57.69

☐ Memo Item

15

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

C. MICHAUX, MICHAEL D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

276.96

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1600598520894

Amount of Each Receipt this Period

34.62

☐ Memo Item

15

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

150.00

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

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

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

FOR LINE NUMBER: PAGE 44 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. SANDY, LEWIS G, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1560.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1600598720894

Amount of Each Receipt this Period

195.00

☐ Memo Item

15

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

B. CAUTIN, MICHAEL P, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1602667520894

Amount of Each Receipt this Period

57.69

☐ Memo Item

15

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

C. PETERSON, MATTHEW W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

960.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1602669920894

Amount of Each Receipt this Period

120.00

☐ Memo Item

15

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

372.69

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

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

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

FOR LINE NUMBER: PAGE 45 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. MALONEY, JEFF W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1613243520894

Amount of Each Receipt this Period

288.45

☐ Memo Item

15

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

B. FINKELSTEIN, ALLEN LAWRENCE, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.04

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1620989020894

Amount of Each Receipt this Period

115.38

☐ Memo Item

15

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

C. CULLEN, LINDA L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1632359720894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

433.83

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

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

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

FOR LINE NUMBER: PAGE 46 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. WALLER, DANIEL S, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1271.40

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1632360020894

Amount of Each Receipt this Period

59.70

☐ Memo Item

15

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

B. KENNEDY, WILLIAM F, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.36

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1653443120894

Amount of Each Receipt this Period

46.17

☐ Memo Item

15

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

C. KOOREN, STEVE R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1384.56

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1653443220894

Amount of Each Receipt this Period

173.07

☐ Memo Item

15

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

278.94

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

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

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

FOR LINE NUMBER: PAGE 47 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. BELLAMY, THOMAS J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.80

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1653444320894

Amount of Each Receipt this Period

173.10

☐ Memo Item

15

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

B. BRAY, SUE E, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.96

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1653444420894

Amount of Each Receipt this Period

34.62

☐ Memo Item

15

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

C. HOLMAN, ROBERT L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1653445020894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

237.72

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

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

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

FOR LINE NUMBER: PAGE 48 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. SULLIVAN, DANIEL T, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.96

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1653445820894

Amount of Each Receipt this Period

34.62

☐ Memo Item

15

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

B. LARKIN, JOYCE A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1846.08

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1677771620894

Amount of Each Receipt this Period

230.76

☐ Memo Item

15

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

C. SNOWDEN, MILES S, , Mr.,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4615.20

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1746717820894

Amount of Each Receipt this Period

576.90

☐ Memo Item

15

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

842.28

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

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

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

FOR LINE NUMBER: PAGE 49 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. KOUTSOUMPAS JR, JOHN T, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4615.20

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1748514520894

Amount of Each Receipt this Period

576.90

☐ Memo Item

15

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

B. DESTWOLINSKI, ANN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1806441620894

Amount of Each Receipt this Period

33.00

☐ Memo Item

15

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

C. DUDASH, JASON, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1806441920894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

639.90

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

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

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

FOR LINE NUMBER: PAGE 50 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. KERNER, DIANA, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1806442720894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

B. KRAMER, KARL H, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1806443020894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

C. LEVINE, JEFF L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1806443220894

Amount of Each Receipt this Period

60.00

☐ Memo Item

15

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 OF 147

(check only one)

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

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

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. TALAMANTES, WILLIAM, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

422.40

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1806444720894

Amount of Each Receipt this Period

52.80

☐ Memo Item

15

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

B. ARCHER, LORI A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.96

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1806750120894

Amount of Each Receipt this Period

34.62

☐ Memo Item

15

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

C. BAYER, GREGORY A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1806750220894

Amount of Each Receipt this Period

180.00

☐ Memo Item

15

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

267.42

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

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

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

FOR LINE NUMBER: PAGE 52 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. EMERSON, PAUL M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.04

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1806750320894

Amount of Each Receipt this Period

115.38

☐ Memo Item

15

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

B. BODE, HOLLY A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

847.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1817581120894

Amount of Each Receipt this Period

38.50

☐ Memo Item

15

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

C. PINOTTI, SHERRI C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

692.40

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1832039820894

Amount of Each Receipt this Period

86.55

☐ Memo Item

15

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

240.43

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

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

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

FOR LINE NUMBER: PAGE 53 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. LEDELL, MICHELLE D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1882850620894

Amount of Each Receipt this Period

120.00

☐ Memo Item

15

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

B. ANDERSON, CATHERINE K, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.80

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1903550720894

Amount of Each Receipt this Period

173.10

☐ Memo Item

15

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

C. BISHOP, KATHLEEN L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1903560820894

Amount of Each Receipt this Period

60.00

☐ Memo Item

15

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

353.10

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

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

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

FOR LINE NUMBER: PAGE 54 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. CASEY, SUSAN A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.96

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1903567820894

Amount of Each Receipt this Period

34.62

☐ Memo Item

15

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

B. DUFEK, ROBERT J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1903577120894

Amount of Each Receipt this Period

75.00

☐ Memo Item

15

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

C. EDBERG, SUSAN B, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1903578120894

Amount of Each Receipt this Period

300.00

☐ Memo Item

15

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

409.62

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

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

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

FOR LINE NUMBER: PAGE 55 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. JOHNSON, CHRISTOPHER T, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1903591120894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

B. SANTELLI, JOHN C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.96

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1903622020894

Amount of Each Receipt this Period

34.62

☐ Memo Item

15

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

C. WEYMOUTH, PAUL D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

461.52

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1903636920894

Amount of Each Receipt this Period

57.69

☐ Memo Item

15

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

122.31

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

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

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

FOR LINE NUMBER: PAGE 56 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. JAMIAN, PAMELA, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.96

Date of Receipt

11 / 24 / 2008

Transaction ID : PR1910417420894

Amount of Each Receipt this Period

34.62

☐ Memo Item

15

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

B. AHWAH, GARY J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119466720894

Amount of Each Receipt this Period

150.00

☐ Memo Item

15

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

C. ALLEN, BRADLEY E, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119466820894

Amount of Each Receipt this Period

60.00

☐ Memo Item

15

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

244.62

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 57 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. BARBER-SMITH, ALTHEA, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 24 / 2008

Transaction ID : PR2119467520894

Amount of Each Receipt this Period

60.00

☐ Memo Item

15

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

B. BEATY, JON D, D, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 24 / 2008

Transaction ID : PR2119467820894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

C. BENNETT, RUSSELL A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 24 / 2008

Transaction ID : PR2119468020894

Amount of Each Receipt this Period

60.00

☐ Memo Item

15

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

150.00

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

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

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

FOR LINE NUMBER: PAGE 58 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. BERKEL, SUSAN LYNN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4608.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119468120894

Amount of Each Receipt this Period

576.00

☐ Memo Item

15

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

B. BOOHER, DAVID N, N, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119468620894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

C. BRYAN, KATHIE L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119469420894

Amount of Each Receipt this Period

75.00

☐ Memo Item

15

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

681.00

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

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

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

FOR LINE NUMBER: PAGE 59 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. CADRIEL, DANIEL P, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119469820894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

B. CAMPBELL, COLLEEN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119469920894

Amount of Each Receipt this Period

45.00

☐ Memo Item

15

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

C. CARDER, ROBIN L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119470120894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

105.00

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

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 OF 147

(check only one)

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

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

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. CARLSON, DAVID S, , ,

Mailing Address 9900 Bren Road East

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

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 24 / 2008

Transaction ID : PR2119470220894

Amount of Each Receipt this Period

60.00

☐ Memo Item

15

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

B. CARTER, LESLIE J, , ,

Mailing Address 9900 Bren Road East

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

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2304.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 24 / 2008

Transaction ID : PR2119470320894

Amount of Each Receipt this Period

288.00

☐ Memo Item

15

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

C. CHIARODIT, MICHAEL J, , ,

Mailing Address 9900 Bren Road East

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

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 24 / 2008

Transaction ID : PR2119470520894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

378.00

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

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

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

FOR LINE NUMBER: PAGE 61 OF 147

(check only one)

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

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

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. COATS, HAROLD, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119471020894

Amount of Each Receipt this Period

150.00

☐ Memo Item

15

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

B. CORREIA, RANDELL J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119471320894

Amount of Each Receipt this Period

90.00

☐ Memo Item

15

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

C. CROSS, RICHARD A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119471820894

Amount of Each Receipt this Period

75.00

☐ Memo Item

15

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

315.00

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

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

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

FOR LINE NUMBER: PAGE 62 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. CUNNINGHAM, WILLIAM JOHN, , , MD

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119471920894

Amount of Each Receipt this Period

60.00

☐ Memo Item

15

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

B. DAVIS, KENNETH R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119472520894

Amount of Each Receipt this Period

60.00

☐ Memo Item

15

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

C. DAYAN, LINDA M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

456.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119472620894

Amount of Each Receipt this Period

57.00

☐ Memo Item

15

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

177.00

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

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

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

FOR LINE NUMBER: PAGE 63 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. DEMBROSKI, TODD J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119472820894

Amount of Each Receipt this Period

45.00

☐ Memo Item

15

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

B. DILWEG, ANDREA E, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

888.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119472920894

Amount of Each Receipt this Period

111.00

☐ Memo Item

15

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

C. DUNGAN, TARA M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119473220894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

186.00

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

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

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

FOR LINE NUMBER: PAGE 64 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. FLUITT, BRADLEY M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119474120894

Amount of Each Receipt this Period

90.00

☐ Memo Item

15

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

B. FRIEDMAN, ROBERT A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119474520894

Amount of Each Receipt this Period

60.00

☐ Memo Item

15

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

C. GIAMBRONE, ANGELO, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119475120894

Amount of Each Receipt this Period

180.00

☐ Memo Item

15

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

330.00

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

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

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

FOR LINE NUMBER: PAGE 65 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. GILDERNICK, AMY J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119475220894

Amount of Each Receipt this Period

60.00

☐ Memo Item

15

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

B. GLICKMAN, SANDRA R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119475320894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

C. GONZALES, MARIA C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119475420894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. HANSEN, DAVID M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119476720894

Amount of Each Receipt this Period

405.00

☐ Memo Item

15

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

B. HARLAN, MADELINE L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119476920894

Amount of Each Receipt this Period

57.00

☐ Memo Item

15

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

C. HARVEY, ANNE P, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119477220894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

492.00

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

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

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

FOR LINE NUMBER: PAGE 67 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. HAYES, PAULINE M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119477420894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

B. HO, SAMUEL W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119477920894

Amount of Each Receipt this Period

300.00

☐ Memo Item

15

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

C. HOSKINS, KEVIN C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119478120894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

360.00

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

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

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

FOR LINE NUMBER: PAGE 68 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. HOST, KEVIN D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119478220894

Amount of Each Receipt this Period

60.00

☐ Memo Item

15

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

B. HUSER, DONNA L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119478620894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

C. JEFFREY, BRIAN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119479120894

Amount of Each Receipt this Period

75.00

☐ Memo Item

15

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

165.00

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

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 69 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. JONES, JOHN D, , ,

Mailing Address 9900 Bren Road East

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

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2304.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 24 / 2008

Transaction ID : PR2119479220894

Amount of Each Receipt this Period

288.00

☐ Memo Item

15

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

B. JORDAN, RONALD W, , ,

Mailing Address 9900 Bren Road East

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

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 24 / 2008

Transaction ID : PR2119479320894

Amount of Each Receipt this Period

45.00

☐ Memo Item

15

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

C. KANNE, KATHLEEN M, , ,

Mailing Address 9900 Bren Road East

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

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 24 / 2008

Transaction ID : PR2119479620894

Amount of Each Receipt this Period

90.00

☐ Memo Item

15

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

423.00

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

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

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

FOR LINE NUMBER: PAGE 70 OF 147

(check only one)

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

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

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. KEEN, JOSEPH W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119479720894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

B. KNUTSON, MARK C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119480220894

Amount of Each Receipt this Period

45.00

☐ Memo Item

15

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

C. LAM, TIFFANY T, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119480720894

Amount of Each Receipt this Period

75.00

☐ Memo Item

15

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

150.00

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

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

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

FOR LINE NUMBER: PAGE 71 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. LEAL, PAMELA S, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119481020894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

B. LEWIS, CHARLES E, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119481520894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

C. LINDE, SUSAN A, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119481820894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. LOURTIE, KATHRYN H, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119482120894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

B. LUEDKE, SANDY M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119482220894

Amount of Each Receipt this Period

45.00

☐ Memo Item

15

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

C. MACE-MEADOR, HEATHER M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119482520894

Amount of Each Receipt this Period

60.00

☐ Memo Item

15

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

135.00

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

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

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

FOR LINE NUMBER: PAGE 73 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. MASON, JEFFREY S, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119483020894

Amount of Each Receipt this Period

45.00

☐ Memo Item

15

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

B. MCKINLEY, PETER W, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119483720894

Amount of Each Receipt this Period

225.00

☐ Memo Item

15

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

C. MILBURN, CHARLEEN M, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1560.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119483920894

Amount of Each Receipt this Period

195.00

☐ Memo Item

15

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

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

465.00

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

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

FOR LINE NUMBER: PAGE 74 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. MIRANDA, BENITO M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119484220894

Amount of Each Receipt this Period

36.00

☐ Memo Item

15

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

B. MONK, NANCY J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119484320894

Amount of Each Receipt this Period

150.00

☐ Memo Item

15

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

C. MURRAY, CAROLYN L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119484820894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

216.00

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

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

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

FOR LINE NUMBER: PAGE 75 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. NEURURER, SCOTT A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1296.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119484920894

Amount of Each Receipt this Period

162.00

☐ Memo Item

15

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

B. NYGARD, KEITH E, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119485020894

Amount of Each Receipt this Period

60.00

☐ Memo Item

15

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

C. OLLMANN-WAGNER, TRACY L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119485220894

Amount of Each Receipt this Period

45.00

☐ Memo Item

15

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

267.00

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

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

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

FOR LINE NUMBER: PAGE 76 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. OLSON, WILLIAM H, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119485320894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

B. OTTO, CYNTHIA ANN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119485420894

Amount of Each Receipt this Period

60.00

☐ Memo Item

15

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

C. PARSONS, ANNETTE K, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119485620894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. PAULSON, ARNOLD C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119485720894

Amount of Each Receipt this Period

57.00

☐ Memo Item

15

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

B. PAXSON, LYND A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119485820894

Amount of Each Receipt this Period

75.00

☐ Memo Item

15

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

C. PETE, DIANA S, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

288.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119486320894

Amount of Each Receipt this Period

36.00

☐ Memo Item

15

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

168.00

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

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

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

FOR LINE NUMBER: PAGE 78 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. PETERS, MICHELLE LYNN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119486420894

Amount of Each Receipt this Period

45.00

☐ Memo Item

15

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

B. PITTMAN, AUSTIN T, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119486720894

Amount of Each Receipt this Period

405.00

☐ Memo Item

15

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

C. POLICH, CYNTHIA L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119486820894

Amount of Each Receipt this Period

300.00

☐ Memo Item

15

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

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

750.00

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

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

FOR LINE NUMBER: PAGE 79 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. RICCIUTI, SHARON A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119487920894

Amount of Each Receipt this Period

60.00

☐ Memo Item

15

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

B. ROGERS, DEBBIE E, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119488620894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

C. SCACCIA, CAROL A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119489320894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. SEABOLT, CAROLYN M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119489820894

Amount of Each Receipt this Period

48.00

☐ Memo Item

15

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

B. SING, MARTIN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119490120894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

C. STETTLER, RONALD R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119490420894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

108.00

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

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

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

FOR LINE NUMBER: PAGE 81 OF 147

(check only one)

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

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

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. STYERS, MARILYNN D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119490720894

Amount of Each Receipt this Period

60.00

☐ Memo Item

15

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

B. TANIGAWA, CHERYL, , , MD

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119491120894

Amount of Each Receipt this Period

150.00

☐ Memo Item

15

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

C. TEYLAN, MARY R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119491420894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

240.00

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

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

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

FOR LINE NUMBER: PAGE 82 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. THOMSON, CHERYL A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119491620894

Amount of Each Receipt this Period

45.00

☐ Memo Item

15

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

B. TUCKER, STEVEN M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2304.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119492020894

Amount of Each Receipt this Period

288.00

☐ Memo Item

15

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

C. VANASTEN, SUSAN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

960.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119492620894

Amount of Each Receipt this Period

120.00

☐ Memo Item

15

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

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

453.00

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

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

FOR LINE NUMBER: PAGE 83 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. WESTPHAL, SCOTT B, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.96

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119493220894

Amount of Each Receipt this Period

34.62

☐ Memo Item

15

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

B. WHETSON, LINDA D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119493520894

Amount of Each Receipt this Period

60.00

☐ Memo Item

15

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

C. WOLFE, LORI S, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119493720894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

124.62

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

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

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

FOR LINE NUMBER: PAGE 84 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. WRIGHT, GREGORY, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119494120894

Amount of Each Receipt this Period

75.00

☐ Memo Item

15

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

B. YEE, TIM K, K, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119494320894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

C. YOUNG, GEORGE M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119494420894

Amount of Each Receipt this Period

45.00

☐ Memo Item

15

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

150.00

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

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

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

FOR LINE NUMBER: PAGE 85 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. YOUNG, STEVEN C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2119494520894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

B. BURKE, FORREST G, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2133132420894

Amount of Each Receipt this Period

60.00

☐ Memo Item

15

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

C. CUMMINGS, DANIEL M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2133132620894

Amount of Each Receipt this Period

45.00

☐ Memo Item

15

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

135.00

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

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

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

FOR LINE NUMBER: PAGE 86 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. DONOHOE, CINDY K, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.04

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2133132720894

Amount of Each Receipt this Period

115.38

☐ Memo Item

15

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

B. DUFFIELD, ELLEN M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1296.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2133132820894

Amount of Each Receipt this Period

162.00

☐ Memo Item

15

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

C. FORD, PATRICIA A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

692.40

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2133132920894

Amount of Each Receipt this Period

86.55

☐ Memo Item

15

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

363.93

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

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

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

FOR LINE NUMBER: PAGE 87 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. GOLDEN, KIMBERLY A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2133133020894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

B. HANSON, CHARLES W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1238.88

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2133133120894

Amount of Each Receipt this Period

154.86

☐ Memo Item

15

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

C. HULTGREN, BROR O, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

923.04

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2133133220894

Amount of Each Receipt this Period

115.38

☐ Memo Item

15

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

300.24

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

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

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

FOR LINE NUMBER: PAGE 88 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. LITTLEFIELD, NANCY W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2133133420894

Amount of Each Receipt this Period

120.00

☐ Memo Item

15

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

B. MAGILL, CAROLYN E, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2133133520894

Amount of Each Receipt this Period

57.69

☐ Memo Item

15

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

C. MILLER, ALLEN D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

840.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2133133620894

Amount of Each Receipt this Period

105.00

☐ Memo Item

15

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

282.69

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

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

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

FOR LINE NUMBER: PAGE 89 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. MORISATO, SUSAN C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3600.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2133133820894

Amount of Each Receipt this Period

450.00

☐ Memo Item

15

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

B. NETTLETON, KIM A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2133133920894

Amount of Each Receipt this Period

60.00

☐ Memo Item

15

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

C. PUTNAM, T JEFFREY, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4615.20

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2133134220894

Amount of Each Receipt this Period

576.90

☐ Memo Item

15

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

1086.90

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

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

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

FOR LINE NUMBER: PAGE 90 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. ROYBAL, HELENE S, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1296.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2133134520894

Amount of Each Receipt this Period

162.00

☐ Memo Item

15

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

B. SCHIMMELBUSCH, DIANE M, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2133134620894

Amount of Each Receipt this Period

75.00

☐ Memo Item

15

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

C. SHIELDS, ANITA W, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2133134720894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

267.00

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

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

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

FOR LINE NUMBER: PAGE 91 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. TRIVEDI, AMIT, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2133134820894

Amount of Each Receipt this Period

57.69

☐ Memo Item

15

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

B. BARNOWSKI, CYNTHIA A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.40

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2145728120894

Amount of Each Receipt this Period

86.55

☐ Memo Item

15

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

C. COLE, DANIEL M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2145728320894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

174.24

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

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

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

FOR LINE NUMBER: PAGE 92 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. FALKENBERG, ROBERT C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 24 / 2008

Transaction ID : PR2145728420894

Amount of Each Receipt this Period

115.38

☐ Memo Item

15

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

B. FARAHANI, ROB, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 24 / 2008

Transaction ID : PR2145728520894

Amount of Each Receipt this Period

115.38

☐ Memo Item

15

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

C. JOHNSTON, JULIE, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

923.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 24 / 2008

Transaction ID : PR2145728720894

Amount of Each Receipt this Period

115.38

☐ Memo Item

15

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

346.14

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

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

FOR LINE NUMBER: PAGE 93 OF 147

(check only one)

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

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

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. KIDD, CARL T, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.**C** UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		24		2008

Transaction ID : PR2145728820894

Amount of Each Receipt this Period

86.55

☐ Memo Item

15

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

B. LINDIMORE, NANCY E, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.**C** UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		24		2008

Transaction ID : PR2145728920894

Amount of Each Receipt this Period

60.00

☐ Memo Item

15

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

C. MICKLE, WILLIAM Y, , ,

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343-9664FEC ID number of contributing
federal political committee.**C** UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		24		2008

Transaction ID : PR2145729120894

Amount of Each Receipt this Period

57.69

☐ Memo Item

15

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

204.24

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

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

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

FOR LINE NUMBER: PAGE 94 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. MILLER, WAYNE, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2145729220894

Amount of Each Receipt this Period

105.00

☐ Memo Item

15

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

B. PFOTENHAUER, ROBERT P, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2145729420894

Amount of Each Receipt this Period

300.00

☐ Memo Item

15

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

C. RUMMEL, LEAH C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2145729520894

Amount of Each Receipt this Period

45.00

☐ Memo Item

15

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

450.00

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

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

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

FOR LINE NUMBER: PAGE 95 OF 147

(check only one)

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

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

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. SCHWARZ, MICHAEL P, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2145729720894

Amount of Each Receipt this Period

105.00

☐ Memo Item

15

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

B. SMITH, DANNETTE L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2769.12

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2145729920894

Amount of Each Receipt this Period

346.14

☐ Memo Item

15

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

C. SMITH, RANDALL, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

276.96

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2145730020894

Amount of Each Receipt this Period

34.62

☐ Memo Item

15

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

485.76

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

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

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

FOR LINE NUMBER: PAGE 96 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. WEAR, MARGARET W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2145730220894

Amount of Each Receipt this Period

150.00

☐ Memo Item

15

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

B. KAPPAS-LARSON, PATRICIA A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2162867220894

Amount of Each Receipt this Period

50.00

☐ Memo Item

15

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

C. LEWIS, KURT C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

276.96

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2203967520894

Amount of Each Receipt this Period

34.62

☐ Memo Item

15

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

234.62

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

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

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

FOR LINE NUMBER: PAGE 97 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. GIBSON, CHRISTINE W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2769.12

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2225166720894

Amount of Each Receipt this Period

346.14

☐ Memo Item

15

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

B. BEAULE, JEAN-FRANCOIS, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.80

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2225813620894

Amount of Each Receipt this Period

173.10

☐ Memo Item

15

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

C. HARRIS, DANIEL M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

461.52

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2225817520894

Amount of Each Receipt this Period

57.69

☐ Memo Item

15

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

576.93

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

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

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

FOR LINE NUMBER: PAGE 98 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. MACK, NANCY S, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2225818420894

Amount of Each Receipt this Period

40.50

☐ Memo Item

15

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

B. MARTEL, CHARLES W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2225818620894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

C. MCGUIRE, MICHAEL, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1384.80

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2225818820894

Amount of Each Receipt this Period

173.10

☐ Memo Item

15

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

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

243.60

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

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

FOR LINE NUMBER: PAGE 99 OF 147

(check only one)

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

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

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. RANGEN, ERIC S, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4615.20

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2225819320894

Amount of Each Receipt this Period

576.90

☐ Memo Item

15

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

B. RYAN, JOHN D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.04

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2225819620894

Amount of Each Receipt this Period

115.38

☐ Memo Item

15

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

C. SAILOR, ROY T, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1846.08

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2225819720894

Amount of Each Receipt this Period

230.76

☐ Memo Item

15

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

923.04

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

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

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

FOR LINE NUMBER: PAGE 100 OF 147

(check only one)

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

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

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. WEILER, A R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2225820620894

Amount of Each Receipt this Period

40.00

☐ Memo Item

15

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

B. DIPALMO, KAREN A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2231347220894

Amount of Each Receipt this Period

90.00

☐ Memo Item

15

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

C. DROZDA, JEFFERY A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2231347420894

Amount of Each Receipt this Period

150.00

☐ Memo Item

15

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 101 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. FOWLER, SUSAN A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2231349720894

Amount of Each Receipt this Period

45.00

☐ Memo Item

15

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

B. GREENMAN, DEE A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2231350220894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

C. HAMPTON, MICHAEL, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2231350520894

Amount of Each Receipt this Period

60.00

☐ Memo Item

15

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

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

135.00

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

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

FOR LINE NUMBER: PAGE 102 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. HANNA, KASIA, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2231350620894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

B. HAYS, MARGARET C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2231350720894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

C. JOY, ROBERT ANTHONY, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2231350920894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 103 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. METHENY, KIP J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2231351420894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

B. MOORE, PAMELA ANN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.60

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2231351720894

Amount of Each Receipt this Period

29.70

☐ Memo Item

15

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

C. MUDGETT, DONALD M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2231351920894

Amount of Each Receipt this Period

60.00

☐ Memo Item

15

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

119.70

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

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 104 OF 147

(check only one)

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

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

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. PEARSON, ANDREW L, , ,

Mailing Address 9900 Bren Road East

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

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		24		2008

Transaction ID : PR2231352020894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

B. PHELPS, JILL, , ,

Mailing Address 9900 Bren Road East

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

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		24		2008

Transaction ID : PR2231352120894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

C. RICHEY, DARRELL S, , ,

Mailing Address 9900 Bren Road East

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

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		24		2008

Transaction ID : PR2231352320894

Amount of Each Receipt this Period

240.00

☐ Memo Item

15

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 105 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. SELF, JANET SUE, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2231352420894

Amount of Each Receipt this Period

45.00

☐ Memo Item

15

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

B. SNIVELY, AMANDA JANE, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2231352520894

Amount of Each Receipt this Period

30.00

☐ Memo Item

15

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

C. CONNLY, MICHAEL R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

960.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2247625820894

Amount of Each Receipt this Period

120.00

☐ Memo Item

15

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

195.00

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

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

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

FOR LINE NUMBER: PAGE 106 OF 147

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. GREENE, ANDREA M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2247626020894

Amount of Each Receipt this Period

45.00

☐ Memo Item

15

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

B. IACARELLA, CYNTHIA L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2247626120894

Amount of Each Receipt this Period

45.00

☐ Memo Item

15

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

C. KERR, CAROLYN B, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

461.52

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2247626220894

Amount of Each Receipt this Period

57.69

☐ Memo Item

15

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

147.69

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

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 107 OF 147

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RAO, SHANKAR, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.64

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2247626320894

Amount of Each Receipt this Period

28.83

☐ Memo Item

15

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RUDDOCK, JOYCE M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2247626420894

Amount of Each Receipt this Period

150.00

☐ Memo Item

15

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARCIONE JR, JOSEPH R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1384.80

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2247626820894

Amount of Each Receipt this Period

173.10

☐ Memo Item

15

SUBTOTAL of Receipts This Page (optional)..... ►

351.93

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 108 OF 147

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KANTOLA, KEVIN DAVID, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2247627020894

Amount of Each Receipt this Period

75.00

☐ Memo Item

15

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LAWHORN, ANGELA R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

646.08

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2247627120894

Amount of Each Receipt this Period

80.76

☐ Memo Item

15

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. O'BRIEN, DENNIS P, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1384.80

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2247627320894

Amount of Each Receipt this Period

173.10

☐ Memo Item

15

SUBTOTAL of Receipts This Page (optional)..... ►

328.86

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 109 OF 147

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VERNEY, JEFFERY RICHARD, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.80

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2247627420894

Amount of Each Receipt this Period

173.10

☐ Memo Item

15

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BROOKS, DARRELL, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.80

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2247627620894

Amount of Each Receipt this Period

173.10

☐ Memo Item

15

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GARODIA, SANJAY, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

884.58

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2247627820894

Amount of Each Receipt this Period

115.38

☐ Memo Item

15

SUBTOTAL of Receipts This Page (optional)..... ►

461.58

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 110 OF 147

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KOSECOFF, JACQUELINE B, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4615.20

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2247627920894

Amount of Each Receipt this Period

576.90

☐ Memo Item

15

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OHMAN, DANIEL L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

646.08

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2247628020894

Amount of Each Receipt this Period

80.76

☐ Memo Item

15

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PRINCE, JOHN M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

720.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2259738420894

Amount of Each Receipt this Period

120.00

☐ Memo Item

15

SUBTOTAL of Receipts This Page (optional)..... ►

777.66

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 111 OF 147

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KOEHLER, DAWN M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2270335120894

Amount of Each Receipt this Period

60.00

☐ Memo Item

15

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CRONN, CHRISTOPHER, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.90

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2270522920894

Amount of Each Receipt this Period

115.38

☐ Memo Item

15

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MYERS, WILLIAM F, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2359784120894

Amount of Each Receipt this Period

120.00

☐ Memo Item

15

SUBTOTAL of Receipts This Page (optional)..... ►

295.38

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 112 OF 147

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STEVENS, SIMON L, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C UnitedHealth Group, Inc.

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

11 / 24 / 2008

Transaction ID : PR2364863220894

Amount of Each Receipt this Period

576.90

☐ Memo Item

15

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

/ /

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

/ /

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

576.90

TOTAL This Period (last page this line number only)..... ►

45461.96

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 113 OF 147

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Enzi for Senate

Mailing Address P.O. Box 2775

City
CodyState
WYZip Code
82414

Purpose of Disbursement

011

Category/
Type

Candidate Name

, , Enzi, Michael B.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		1	7		2	0	0	8		

FEC Identification Number

C

Transaction ID : 28784826

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. White Mountain PAC

Mailing Address PO Box 1772

City
ConcordState
NHZip Code
03302

Purpose of Disbursement

Leadership PAC

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		1	7		2	0	0	8		

FEC Identification Number

C

Transaction ID : 28784831

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bluegrass Committee

Mailing Address 400 North Capitol Street NW #585

City
WashingtonState
DCZip Code
20001

Purpose of Disbursement

011

Category/
Type

Candidate Name

Bluegrass Committee, , , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		1	7		2	0	0	8		

FEC Identification Number

C

C00235655

Transaction ID : 28784833

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

13000.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 114 OF 147

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Pat Roberts For SenateMailing Address 228 South Washington Street
Ste B20City
AlexandriaState
VAZip Code
22314

Purpose of Disbursement

Re-elect to US Senate

011

Candidate Name

Pat Roberts For Senate, , Roberts, Pat,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		1	7		2	0	0	8		

FEC Identification Number

C C00128876

Transaction ID : 28784838

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ryan for Congress Committee

Mailing Address P. O. Box 1919

City
JanesvilleState
WIZip Code
53547-1919

Purpose of Disbursement

Elect to US House

011

Candidate Name

Ryan for Congress Committee, , Ryan, Paul,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		1	7		2	0	0	8		

FEC Identification Number

C C00330894

Transaction ID : 28784841

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Congressman Joe Barton Committee

Mailing Address 701 Williamsburg

City
EnnisState
TXZip Code
75120

Purpose of Disbursement

Re-elect to US Congress

011

Candidate Name

, , Barton, Joe L.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		1	7		2	0	0	8		

FEC Identification Number

C

Transaction ID : 28784848

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

10000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 115 OF 147

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Putnam For Congress

Mailing Address Post Office Box 2257

City
BartowState
FLZip Code
33831

Purpose of Disbursement

Re-elect to US Congress

011

Candidate Name

Putnam For Congress, , Putnam, Adam,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		1	7		2	0	0	8		

FEC Identification Number

C C00364117

Transaction ID : 28784893

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Cantor For Congress

Mailing Address P. O. Box 17813

City
RichmondState
VAZip Code
23226

Purpose of Disbursement

Re-elect to US Congress

011

Candidate Name

Cantor For Congress, , Cantor, Eric,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		1	7		2	0	0	8		

FEC Identification Number

C C00355461

Transaction ID : 28784895

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Cummings for Congress

Mailing Address P.O. Box 1631

City
BaltimoreState
MDZip Code
21203-1631

Purpose of Disbursement

Re-elect to US Congress

011

Candidate Name

, , Cummings, Elijah,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		1	7		2	0	0	8		

FEC Identification Number

C

Transaction ID : 28784897

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

7500.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 116 OF 147

☐ 21b ☐ 22 ☒ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Committee To Elect David Boswell To Congress

Mailing Address 5591 Panther Creek Park Drive

City
Owensboro

State
KY

Zip Code
42301

Purpose of Disbursement

011

Candidate Name

Committee To Elect David Boswell To Congress, , Boswell, David,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 17 / 2008

FEC Identification Number

C C00444596

Transaction ID : 28784916

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bright For Congress.Com

Mailing Address 2901 Zelda Road

City
Montgomery

State
AL

Zip Code
36102

Purpose of Disbursement

Elect to US Congress

011

Candidate Name

Bright For Congress.Com, , Bright, Bobby,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 17 / 2008

FEC Identification Number

C C00446138

Transaction ID : 28784928

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Blaine For Congress, Inc.

Mailing Address PO Box 1526

City
Columbia

State
MO

Zip Code
65205

Purpose of Disbursement

Elect to the US Congress (MO-09)

011

Candidate Name

Blaine For Congress, Inc., , Luetkemeyer, Blaine,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 21 / 2008

FEC Identification Number

C C00447748

Transaction ID : 28819890

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

5000.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 117 OF 147

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Friends Of Gordon Smith

Mailing Address 1331 H Street NW, 12th Floor

City
WashingtonState
DCZip Code
20005

Purpose of Disbursement

Re-elect to US Senate

011

Candidate Name

Friends Of Gordon Smith, , Smith, Gordon,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2008

FEC Identification Number

C C00383554

Transaction ID : 28835774

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Tinklenberg For Congress

Mailing Address 9380 Central Ave NE

City
BlaineState
MNZip Code
55434

Purpose of Disbursement

Elect to US Congress

011

Candidate Name

Tinklenberg For Congress, , Tinklenberg, Elwyn,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2008

FEC Identification Number

C C00439596

Transaction ID : 28835859

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CHRIS PAC, Citizens for Hope Responsibility IndepeMailing Address 607 14th Street NW
Suite 800City
WashingtonState
DCZip Code
20005

Purpose of Disbursement

Political Action Committee

011

Candidate Name

CHRIS PAC, Citizens for Hope Responsibility Indepe, , , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2008

FEC Identification Number

C C00391961

Transaction ID : 28835911

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

10500.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 118 OF 147

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Halvorson For Congress

Mailing Address 20 East Cass Street

City
JolietState
ILZip Code
60432

Purpose of Disbursement

Elect to US Congress

011

Candidate Name

Halvorson For Congress, , Halvorson, Deborah,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			27			2008					

FEC Identification Number

C C00440016

Transaction ID : 28835913

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. John Shadegg's Friends

Mailing Address Po Box 45444

City
PhoenixState
AZZip Code
85064

Purpose of Disbursement

Re-Elect to Congress

011

Candidate Name

, , Shadegg, John,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			27			2008					

FEC Identification Number

C

Transaction ID : 28835918

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Pennsylvania Democratic PartyMailing Address 300 North 2nd Street
8th FloorCity
HarrisburgState
PAZip Code
17101

Purpose of Disbursement

Federal

011

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			27			2008					

FEC Identification Number

C

Transaction ID : 28842108

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

9000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 119 OF 147

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Friends Of Erik PaulsenMailing Address P.O. Box 44369
250 Prairie Center DriveCity
Eden PrairieState
MNZip Code
55344

Purpose of Disbursement

Re-election to Congress

011

Candidate Name

Friends Of Erik Paulsen, , Paulsen, Erik,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District: H

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		1	9		2	0	0	8		

FEC Identification Number

C C00439661

Transaction ID : 28905176

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Citizens for Arlen SpecterMailing Address 300 I Street N.E.
Suite 100BCity
WashingtonState
DCZip Code
20002

Purpose of Disbursement

Re-elect to US Senate

011

Candidate Name

, , Specter, Arlen,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District: S

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		1	9		2	0	0	8		

FEC Identification Number

C

Transaction ID : 28905189

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Chris Lee For Congress

Mailing Address PO Box 15395

City
RochesterState
NYZip Code
14615

Purpose of Disbursement

Debt retirement 2008 election

011

Candidate Name

Chris Lee For Congress, , Lee, Christopher,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District: H

Debt Retirement 2008

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		1	9		2	0	0	8		

FEC Identification Number

C C00450148

Transaction ID : 28905190

Amount of Each Disbursement this Period

1500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5000.00

TOTAL This Period (last page this line number only).....▶

60000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 120 OF 147

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Rodriguez for Senate

Mailing Address 1838 Camino La Canada

City
Santa FeState
NMZip Code
87501

Purpose of Disbursement

Nancy Rodriguez, STATE SENATE 24th NM

Candidate Name

, , Rodriguez, Nancy,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	7			2	0	0	8		

FEC Identification Number

C**Transaction ID : 28787863**

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Campos for Senate

Mailing Address 500 Raynolds Avenue

City
Las VegasState
NMZip Code
87701

Purpose of Disbursement

Pete Campos, STATE SENATE 8th NM

Candidate Name

, , Campos, Pete,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	7			2	0	0	8		

FEC Identification Number

C**Transaction ID : 28787865**

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Keller for Senate

Mailing Address 11023 Vistazo Place SE

City
AlbuquerqueState
NMZip Code
87123

Purpose of Disbursement

Tim Keller, STATE SENATE NM

Candidate Name

, , Keller, Tim,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	7			2	0	0	8		

FEC Identification Number

C**Transaction ID : 28787881**

Amount of Each Disbursement this Period

250.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

750.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Committee to Elect Diane D. Denish

Mailing Address State Capitol, Suite 417

City
Santa FeeState
NMZip Code
87501

Purpose of Disbursement

Diane Denish, LT. GOVERNOR NM

Candidate Name

, , Denish, Diane,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			17			2008					

FEC Identification Number

C**Transaction ID : 28787908**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Varela for House

Mailing Address 1709 Callejon Zenaida

City
Santa FeState
NMZip Code
87501

Purpose of Disbursement

Luciano Varela, STATE HOUSE 48th NM

Candidate Name

, , Varela, Luciano,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			20			2008					

FEC Identification Number

C**Transaction ID : 28798801**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. The Speakers Fund

Mailing Address 05 Entrada Celedon y Nestora

City
Santa FeeState
NMZip Code
87506

Purpose of Disbursement

Ben Lujan, STATE HOUSE 46th NM

Candidate Name

, , Lujan, Ben,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			20			2008					

FEC Identification Number

C**Transaction ID : 28798811**

Amount of Each Disbursement this Period

750.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3250.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Martinez for House

Mailing Address PO Box 730

City
GrantsState
NMZip Code
87020

Purpose of Disbursement

W. Martinez, STATE HOUSE 69th NM

011

Candidate Name

, , Martinez, W., Ken

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State: Jr.

District: H

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				20				2008					

FEC Identification Number

C

Transaction ID : 28798820

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Papen for Senate

Mailing Address 904 Conway Avenue

City
Las CrucesState
NMZip Code
88005

Purpose of Disbursement

Mary Papen, STATE SENATE 38th NM

011

Candidate Name

, , Papen, Mary,

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				20				2008					

FEC Identification Number

C

Transaction ID : 28801149

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. John Arthur Smith for Senate

Mailing Address P.O. Box 998

City
DemingState
NMZip Code
88031

Purpose of Disbursement

John Smith, STATE SENATE 35th NM

011

Candidate Name

, , Smith, John,

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				20				2008					

FEC Identification Number

C

Transaction ID : 28801160

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. PAC 22

Mailing Address 2106 West University Drive

City
PortalesState
NMZip Code
88130

Purpose of Disbursement

Stuart Ingle, STATE SENATE 27th NM

Candidate Name

, , Ingle, Stuart,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			20			2008					

FEC Identification Number

C**Transaction ID : 28801173**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Phil Griego for Senate

Mailing Address PO Box 10

City
San JoseState
NMZip Code
87505

Purpose of Disbursement

Phil Griego, STATE SENATE 39th NM

Candidate Name

, , Griego, Phil,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			20			2008					

FEC Identification Number

C**Transaction ID : 28803715**

Amount of Each Disbursement this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Eric Griego for Senate

Mailing Address PO Box 25191

City
AlbuquerqueState
NMZip Code
87125

Purpose of Disbursement

Eric Griego, STATE SENATE 14th NM

Candidate Name

, , Griego, Eric,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			20			2008					

FEC Identification Number

C**Transaction ID : 28804552**

Amount of Each Disbursement this Period

250.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1050.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Nava for Senate

Mailing Address 3002 Broadmoor

City
Las CrucesState
NMZip Code
88001

Purpose of Disbursement

Cynthia Nava, STATE SENATE 31st NM

Candidate Name

, , Nava, Cynthia,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2008

FEC Identification Number

C

Transaction ID : 28805132

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Leavell for Senate

Mailing Address Drawer D

City
JalState
NMZip Code
88252

Purpose of Disbursement

Carroll Leavell, STATE SENATE 41st NM

Candidate Name

, , Leavell, Carroll,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2008

FEC Identification Number

C

Transaction ID : 28805571

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Garcia for Senate

Mailing Address PO Box 22

City
Dona AnaState
NMZip Code
88032

Purpose of Disbursement

Mary Garcia, STATE SENATE 36th NM

Candidate Name

, , Garcia, Mary, Jane

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2008

FEC Identification Number

C

Transaction ID : 28805705

Amount of Each Disbursement this Period

300.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

800.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Bernadette Sanchez for Senate

Mailing Address 3 Bunton Road

City
BelenState
NMZip Code
87002

Purpose of Disbursement

Bernadette Sanchez, STATE SENATE 26th NM

Candidate Name

, , Sanchez, Bernadette,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			20			2008					

FEC Identification Number

C**Transaction ID : 28805729**

Amount of Each Disbursement this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Heaton for House

Mailing Address 102 South Canyon

City
CarlsbadState
NMZip Code
88220

Purpose of Disbursement

John Heaton, STATE HOUSE 55th NM

Candidate Name

, , Heaton, John,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			20			2008					

FEC Identification Number

C**Transaction ID : 28806177**

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Rodella for House

Mailing Address 16 Private Drive 1156

City
EspanolaState
NMZip Code
87532

Purpose of Disbursement

Debbie Rodella, STATE HOUSE 41st NM

Candidate Name

, , Rodella, Debbie,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			20			2008					

FEC Identification Number

C**Transaction ID : 28806183**

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1050.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Sandoval for House

Mailing Address 5016 12th Street, NW

City
AlbuquerqueState
NMZip Code
87107

Purpose of Disbursement

Edward Sandoval, STATE HOUSE 17th NM

Candidate Name

, , Sandoval, Edward,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

011

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			20			2008					

FEC Identification Number

C

Transaction ID : 28806191

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Gardner for House

Mailing Address 4500 Verde Drive

City
RoswellState
NMZip Code
88201

Purpose of Disbursement

Keith Gardner, STATE HOUSE 66th NM

Candidate Name

, , Gardner, Keith,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

011

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			20			2008					

FEC Identification Number

C

Transaction ID : 28806195

Amount of Each Disbursement this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Saavedra for House

Mailing Address 2838 2nd Street SW

City
AlbuquerqueState
NMZip Code
87102

Purpose of Disbursement

Henry Saavedra, STATE HOUSE 10th NM

Candidate Name

, , Saavedra, Henry, Kiki

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

011

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			20			2008					

FEC Identification Number

C

Transaction ID : 28806354

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1300.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. New Mexico Senate Democratic Caucus

Mailing Address PO Box 1297

City
Los LunasState
NMZip Code
87031Purpose of Disbursement
2008

011

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			20			2008					

FEC Identification Number

C

Transaction ID : 28806366

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. New Mexico DLCC

Mailing Address PO Box 8492

City
AlbuquerqueState
NMZip Code
87198Purpose of Disbursement
2008

011

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			20			2008					

FEC Identification Number

C

Transaction ID : 28806368

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Senate Majority Leadership Fund

Mailing Address 3 Bunton Road

City
BelenState
NMZip Code
87002Purpose of Disbursement
Michael Sanchez, STATE SENATE 29th NM

011

Candidate Name
, , Sanchez, Michael,Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: District: S

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			20			2008					

FEC Identification Number

C

Transaction ID : 28806374

Amount of Each Disbursement this Period

750.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4750.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. President's Pro Tem's Fund

Mailing Address Box 1797

City
RoswellState
NMZip Code
88202-1797

Purpose of Disbursement

Timothy Jennings, STATE SENATE 32nd NM

Candidate Name

, , Jennings, Timothy,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			20			2008					

FEC Identification Number

C**Transaction ID : 28806405**

Amount of Each Disbursement this Period

750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Cisneros for Senate

Mailing Address PO Box 1129

City
QuestaState
NMZip Code
87556

Purpose of Disbursement

Carlos Cisneros, STATE SENATE 6th NM

Candidate Name

, , Cisneros, Carlos,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			20			2008					

FEC Identification Number

C**Transaction ID : 28806408**

Amount of Each Disbursement this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ryan for Senate

Mailing Address 1020 Salamanca NW

City
AlbuquerqueState
NMZip Code
87107

Purpose of Disbursement

John Ryan, STATE SENATE 10th NM

Candidate Name

, , Ryan, John,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			20			2008					

FEC Identification Number

C**Transaction ID : 28806411**

Amount of Each Disbursement this Period

300.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1450.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Fox-Young for House

Mailing Address 2913 Dallas Street NE

City
Albuquerque

State
NM

Zip Code
87110

Purpose of Disbursement

Justine Fox-Young, STATE HOUSE 30th NM

Candidate Name

, , Fox-Young, Justine,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

Date of Disbursement

M M / D D / Y Y Y Y Y Y
 10 / 20 / 2008

FEC Identification Number

C

Transaction ID : 28806566

Amount of Each Disbursement this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Committee to Elect Tony Rand

Mailing Address 2014 Litho Place

City
Fayetteville

State
NC

Zip Code
28304

Purpose of Disbursement

Anthony Rand, STATE SENATE 19th NC

Candidate Name

, , Rand, Anthony,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

Date of Disbursement

M M / D D / Y Y Y Y Y Y
 10 / 24 / 2008

FEC Identification Number

C

Transaction ID : 28830693

Amount of Each Disbursement this Period

4000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Hugh Holliman for NC House

Mailing Address P.O. Box 588

City
Lexington

State
NC

Zip Code
27293

Purpose of Disbursement

Lindsey Holliman, STATE HOUSE 81st NC

Candidate Name

, , Holliman, Lindsey,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

Date of Disbursement

M M / D D / Y Y Y Y Y Y
 10 / 24 / 2008

FEC Identification Number

C

Transaction ID : 28830702

Amount of Each Disbursement this Period

4000.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

8300.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Senate Republican Caucus Campaign Committee

Mailing Address P.O. Box 1068

City
Frankfort

State
KY

Zip Code
40602

Purpose of Disbursement

KY Senate Republican Committee

Candidate Name

011

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 27 / 2008

FEC Identification Number

C

Transaction ID : 28835923

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Tim Shaughnessy for State Senate

Mailing Address 302 E. Muhammad Ali Blvd

City
Louisville

State
KY

Zip Code
40202

Purpose of Disbursement

Tim Shaughnessy, STATE SENATE 19th KY

Candidate Name

, , Shaughnessy, Tim,

011

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 27 / 2008

FEC Identification Number

C

Transaction ID : 28835929

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jeff Greer for State Representative

Mailing Address 2125 Hwy 79

City
Brandenburg

State
KY

Zip Code
40108

Purpose of Disbursement

Jeff Greer, STATE HOUSE 27th KY

Candidate Name

, , Greer, Jeff,

011

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 27 / 2008

FEC Identification Number

C

Transaction ID : 28835932

Amount of Each Disbursement this Period

500.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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(check only one)

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☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Steve Riggs for State Representative

Mailing Address 8108 Thornwood Road

City
Louisville

State
KY

Zip Code
40220

Purpose of Disbursement

Steven Riggs, STATE HOUSE 31st KY

Candidate Name

, , Riggs, Steven,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 27 / 2008

FEC Identification Number

C

Transaction ID : 28835936

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ron Crimm for State Representative

Mailing Address P.O. Box 43244

City
Louisville

State
KY

Zip Code
40253

Purpose of Disbursement

Ronald Crimm, STATE HOUSE 33rd KY

Candidate Name

, , Crimm, Ronald,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 27 / 2008

FEC Identification Number

C

Transaction ID : 28835938

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Adam Koenig for State Representative

Mailing Address 3346 Canterburg CT.

City
Erlanger

State
KY

Zip Code
41018

Purpose of Disbursement

Adam Koenig, STATE HOUSE 69th KY

Candidate Name

, , Koenig, Adam,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 27 / 2008

FEC Identification Number

C

Transaction ID : 28835943

Amount of Each Disbursement this Period

500.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Campaign to Elect Julie Denton

Mailing Address 1708 Golden Leaf Way

City
LouisvilleState
KYZip Code
40245

Purpose of Disbursement

Julie Denton, STATE SENATE 36th KY

Candidate Name

, , Denton, Julie,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

011

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			27			2008					

FEC Identification Number

C

Transaction ID : 28836031

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Tom Buford for Senate

Mailing Address 409 W Maple Street

City
NicholasvilleState
KYZip Code
40356

Purpose of Disbursement

Tom Buford, STATE SENATE 22nd KY

Candidate Name

, , Buford, Tom,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

011

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			27			2008					

FEC Identification Number

C

Transaction ID : 28836306

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. David Williams for Senate

Mailing Address P.O. Box 666

City
BurkesvilleState
KYZip Code
42717

Purpose of Disbursement

David Williams, STATE SENATE 16th KY

Candidate Name

, , Williams, David,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

011

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			27			2008					

FEC Identification Number

C

Transaction ID : 28836652

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. UnitedHealth Group Inc Political Action Committee of Iowa

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343

Purpose of Disbursement

Initial funding of UHG PAC of Iowa

Candidate Name

011

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	7			2	0	0	8		

FEC Identification Number

C

Transaction ID : 28837190

Amount of Each Disbursement this Period

8000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of Richard Devlin

Mailing Address 10290 SW Anderson CT

City
TualatinState
ORZip Code
97062

Purpose of Disbursement

Richard Devlin, STATE SENATE 19th OR

Candidate Name

, , Devlin, Richard,

011

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	7			2	0	0	8		

FEC Identification Number

C

Transaction ID : 28841957

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Peter Courtney for State Senate

Mailing Address 2925 Island View Dr. NE

City
SalemState
ORZip Code
97303

Purpose of Disbursement

Peter Courtney, STATE SENATE 11th OR

Candidate Name

, , Courtney, Peter,

011

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	7			2	0	0	8		

FEC Identification Number

C

Transaction ID : 28842270

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Friends of Ted Ferrioli

Mailing Address 111 Skyline Drive

City
John DayState
ORZip Code
97845

Purpose of Disbursement

Ted Ferrioli, STATE SENATE 30th OR

Candidate Name

, , Ferrioli, Ted,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			27			2008					

FEC Identification Number

C**Transaction ID : 28842280**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of Laurie Monnes-Anderson

Mailing Address 735 NW Day Drive

City
GreshmanState
ORZip Code
97030

Purpose of Disbursement

Laurie Monnes Anderson, STATE SENATE 25th OR

Candidate Name

, , Monnes Anderson, Laurie,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			28			2008					

FEC Identification Number

C**Transaction ID : 28848862**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Friends of Ginny Burdick

Mailing Address 6227 SW 18th Drive

City
PortlandState
ORZip Code
97239

Purpose of Disbursement

Ginny Burdick, STATE SENATE 18th OR

Candidate Name

, , Burdick, Ginny,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			28			2008					

FEC Identification Number

C**Transaction ID : 28848863**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Friends of Suzanne Bonamici

Mailing Address 2370 SW Scenic Drive

City
Portland

State
OR

Zip Code
97225

Purpose of Disbursement

Suzanne Bonamici, STATE SENATE 17th OR

Candidate Name

, , Bonamici, Suzanne,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 28 / 2008

FEC Identification Number

C

Transaction ID : 28848864

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of Dave Hunt

Mailing Address 16655 SE Kingsridge CT

City
Milwaukie

State
OR

Zip Code
97267

Purpose of Disbursement

Dave Hunt, STATE HOUSE 40th OR

Candidate Name

, , Hunt, Dave,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 28 / 2008

FEC Identification Number

C

Transaction ID : 28848865

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Re-Elect Arnie Roblan

Mailing Address 2170 Timberline Drive

City
Coos Bay

State
OR

Zip Code
97420

Purpose of Disbursement

Arnie Roblan, STATE HOUSE 9th OR

Candidate Name

, , Roblan, Arnie,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 28 / 2008

FEC Identification Number

C

Transaction ID : 28848866

Amount of Each Disbursement this Period

500.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Committee to Re-Elect Peter Buckley

Mailing Address 71 Dewey Street

City
Ashland

State
OR

Zip Code
97520

Purpose of Disbursement

Peter Buckley, STATE HOUSE 5th OR

Candidate Name

, , Buckley, Peter,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 28 / 2008

FEC Identification Number

C

Transaction ID : 28848867

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of Phil Barnhart

Mailing Address 2790 Echo Lane

City
Eugene

State
OR

Zip Code
97404

Purpose of Disbursement

Phil Barnhart, STATE HOUSE 11th OR

Candidate Name

, , Barnhart, Phil,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 28 / 2008

FEC Identification Number

C

Transaction ID : 28848868

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mitch Greenlick for State Legislature

Mailing Address 712 NW Spring Avenue

City
Portland

State
OR

Zip Code
97229

Purpose of Disbursement

Mitch Greenlick, STATE HOUSE 33rd OR

Candidate Name

, , Greenlick, Mitch,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 28 / 2008

FEC Identification Number

C

Transaction ID : 28848869

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 137 OF 147

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Friends of Bruce Hanna

Mailing Address 494 State Street, Suite 230

City
SalemState
ORZip Code
97301

Purpose of Disbursement

Bruce Hanna, STATE HOUSE 7th OR

Candidate Name

, , Hanna, Bruce,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

011

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			28			2008					

FEC Identification Number

C

Transaction ID : 28848870

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Scott Bruun for State Rep

Mailing Address 23069 Bland Circle

City
West LinnState
ORZip Code
97068

Purpose of Disbursement

Scott Bruun, STATE HOUSE 37th OR

Candidate Name

, , Bruun, Scott,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

011

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			28			2008					

FEC Identification Number

C

Transaction ID : 28848871

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Committee to Elect Ron Maurer

Mailing Address 1316 NE Evans Street

City
Grants PassState
ORZip Code
97526

Purpose of Disbursement

Ron Maurer, STATE HOUSE 3rd OR

Candidate Name

, , Maurer, Ron,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

011

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			28			2008					

FEC Identification Number

C

Transaction ID : 28848872

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 138 OF 147

☐ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Citizens to Elect Dennis Richardson

Mailing Address 55 S 5th Street

City
Central Point

State
OR

Zip Code
97502

Purpose of Disbursement

Dennis Richardson, STATE HOUSE 4th OR

Candidate Name

, , Richardson, Dennis,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 28 / 2008

FEC Identification Number

C

Transaction ID : 28848873

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of Vicki Berger

Mailing Address 805 Kingswood Drive NW

City
Salem

State
OR

Zip Code
97304

Purpose of Disbursement

Vicki Berger, STATE HOUSE 20th OR

Candidate Name

, , Berger, Vicki,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 28 / 2008

FEC Identification Number

C

Transaction ID : 28848874

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Friends of Linda Flores

Mailing Address 494 State Street, Suite 23P

City
Salem

State
OR

Zip Code
97301

Purpose of Disbursement

Linda Flores, STATE HOUSE 51st OR

Candidate Name

, , Flores, Linda,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 28 / 2008

FEC Identification Number

C

Transaction ID : 28848875

Amount of Each Disbursement this Period

500.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 139 OF 147

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Friends of Larry Springer

Mailing Address 700 20th Avenue West

City
KirklandState
WAZip Code
98033

Purpose of Disbursement

Larry Springer, STATE HOUSE 45th WA

Candidate Name

, , Springer, Larry,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

011

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			30			2008					

FEC Identification Number

C

Transaction ID : 28860128

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of Troy Kelley

Mailing Address 2521 Fremont Street

City
TacomaState
WAZip Code
98406

Purpose of Disbursement

Troy Kelley, STATE HOUSE 28th WA

Candidate Name

, , Kelley, Troy,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

011

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			30			2008					

FEC Identification Number

C

Transaction ID : 28860131

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Citizens to Re-elect Mark Ericks

Mailing Address PO Box 1406

City
BothellState
WAZip Code
98041

Purpose of Disbursement

Mark Ericks, STATE HOUSE 1st WA

Candidate Name

, , Ericks, Mark,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

011

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			30			2008					

FEC Identification Number

C

Transaction ID : 28860132

Amount of Each Disbursement this Period

250.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

750.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Citizens to elect Larry Seaquist

Mailing Address PO Box 821

City
Gig HarborState
WAZip Code
98335

Purpose of Disbursement

Larry Seaquist, STATE HOUSE 26th WA

Candidate Name

, , Seaquist, Larry,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

011

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			30			2008					

FEC Identification Number

C

Transaction ID : 28860133

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Committee to Re-elect Dawn Morrell

Mailing Address 426 2nd Street NE

City
PuyallupState
WAZip Code
98372

Purpose of Disbursement

Dawn Morrell, STATE HOUSE 25th WA

Candidate Name

, , Morrell, Dawn,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

011

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			30			2008					

FEC Identification Number

C

Transaction ID : 28860138

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Committee to Elect Eileen Cody

Mailing Address 5209 36th Avenue SW

City
SeattleState
WAZip Code
98126

Purpose of Disbursement

Eileen Cody, STATE HOUSE 34th WA

Candidate Name

, , Cody, Eileen,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

011

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			30			2008					

FEC Identification Number

C

Transaction ID : 28860140

Amount of Each Disbursement this Period

250.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

750.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 141 OF 147

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Friends of Norma Smith

Mailing Address PO Box 270

City
ClintonState
WAZip Code
98236

Purpose of Disbursement

Norma Smith, STATE HOUSE 10th WA

Candidate Name

, , Smith, Norma,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

011

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			30			2008					

FEC Identification Number

C

Transaction ID : 28860142

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Citizens to Elect John Ahern

Mailing Address PO Box 8504

City
SpokaneState
WAZip Code
99203

Purpose of Disbursement

John Ahern, STATE HOUSE 6th WA

Candidate Name

, , Ahern, John,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

011

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			30			2008					

FEC Identification Number

C

Transaction ID : 28860145

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Committee to Re-Elect Barb Bailey

Mailing Address PO Box 374

City
Oak HarborState
WAZip Code
98277

Purpose of Disbursement

Barbara Bailey, STATE HOUSE 10th WA

Candidate Name

, , Bailey, Barbara,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

011

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			30			2008					

FEC Identification Number

C

Transaction ID : 28860146

Amount of Each Disbursement this Period

250.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

750.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 142 OF 147

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Friends to Retain Jaime Herrera

Mailing Address PO Box 1614

City
RidgefieldState
WAZip Code
98642

Purpose of Disbursement

Jaime Herrera, STATE HOUSE 18th WA

Candidate Name

, , Herrera, Jaime,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

011

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			30			2008					

FEC Identification Number

C

Transaction ID : 28860147

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Citizens to Re-elect Bill Hinkle

Mailing Address 110 E. Fourth Avenue

City
EllensburgState
WAZip Code
98926

Purpose of Disbursement

Bill Hinkle, STATE HOUSE 13th WA

Candidate Name

, , Hinkle, Bill,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

011

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			30			2008					

FEC Identification Number

C

Transaction ID : 28860149

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Re-Elect Gary Alexander for State Rep

Mailing Address PO Box 48

City
OlympiaState
WAZip Code
98507

Purpose of Disbursement

Gary Alexander, STATE HOUSE 20th WA

Candidate Name

, , Alexander, Gary,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: H

011

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			30			2008					

FEC Identification Number

C

Transaction ID : 28860152

Amount of Each Disbursement this Period

250.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

750.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 143 OF 147

☐ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Committee to Elect Don Benton

Mailing Address PO Box 5076

City
Vancouver

State
WA

Zip Code
98668

Purpose of Disbursement

Don Benton, STATE SENATE 17th WA

Candidate Name

, , Benton, Don,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

011

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 30 / 2008

FEC Identification Number

C

Transaction ID : 28860157

Amount of Each Disbursement this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Citizens for Mike Carrell

Mailing Address 10210 Lake Louise Drive SW

City
Lakewood

State
WA

Zip Code
98498

Purpose of Disbursement

Michael Carrell, STATE SENATE 28th WA

Candidate Name

, , Carrell, Michael,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

011

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 30 / 2008

FEC Identification Number

C

Transaction ID : 28860162

Amount of Each Disbursement this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Friends to Elect Marilyn Rasmussen

Mailing Address 33419 Mountain Highway East

City
Eatonville

State
WA

Zip Code
98328

Purpose of Disbursement

Marilyn Rasmussen, STATE SENATE 2nd WA

Candidate Name

, , Rasmussen, Marilyn,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

011

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 30 / 2008

FEC Identification Number

C

Transaction ID : 28860165

Amount of Each Disbursement this Period

400.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1200.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 144 OF 147

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Committee to Re-Elect Mary Margaret Haugen

Mailing Address 1268 N Olsen Road

City
Camano IslandState
WAZip Code
98292

Purpose of Disbursement

Mary Haugen, STATE SENATE 10th WA

Candidate Name

, , Haugen, Mary,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			30			2008					

FEC Identification Number

C**Transaction ID : 28860166**

Amount of Each Disbursement this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of Cheryl Pflug

Mailing Address 23705 230th Place SE

City
Maple ValleyState
WAZip Code
98038

Purpose of Disbursement

Cheryl Pflug, STATE SENATE 5th WA

Candidate Name

, , Pflug, Cheryl,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			30			2008					

FEC Identification Number

C**Transaction ID : 28860183**

Amount of Each Disbursement this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Re-Elect Linda Parlette

Mailing Address PO Box 2151

City
WenatcheeState
WAZip Code
98801

Purpose of Disbursement

Linda Parlette, STATE SENATE 12th WA

Candidate Name

, , Parlette, Linda,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: S

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			30			2008					

FEC Identification Number

C**Transaction ID : 28860184**

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1300.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 145 OF 147

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Re-Elect Rob McKenna

Mailing Address PO Box 955

City
Mercer IslandState
WAZip Code
98040

Purpose of Disbursement

Robert McKenna, ATTORNEY GENERAL WA

Candidate Name

, , McKenna, Robert,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			30			2008			

FEC Identification Number

C**Transaction ID : 28860185**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. House Republican Organizational Committee

Mailing Address PO Box 7222

City
OlympiaState
WAZip Code
98507

Purpose of Disbursement

Washington State - House

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			30			2008			

FEC Identification Number

C**Transaction ID : 28860186**

Amount of Each Disbursement this Period

800.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Senate Democratic Campaign Committee

Mailing Address PO Box 11025

City
OlympiaState
WAZip Code
98508

Purpose of Disbursement

Washington State - Senate

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			30			2008			

FEC Identification Number

C**Transaction ID : 28860198**

Amount of Each Disbursement this Period

800.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2600.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 146 OF 147

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. House Democratic Campaign Committee

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		30		2008

Mailing Address 1000 Aurora Avenue North
Unit N-100City
SeattleState
WAZip Code
98109Purpose of Disbursement
Washington State - House

011

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : 28860201

Amount of Each Disbursement this Period

800.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Senate Republican Campaign Committee

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		30		2008

Mailing Address PO Box 45042

City
SeattleState
WAZip Code
98145Purpose of Disbursement
Washington State - Senate

011

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : 28860215

Amount of Each Disbursement this Period

800.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jim Tucker Campaign

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		07		2008

Mailing Address PO Box 1592

City
GretnaState
LAZip Code
70054Purpose of Disbursement
James Tucker, STATE HOUSE 86th LA

011

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2011
☐ Primary ☒ General
☐ Other (specify) ▼

State: District: H

FEC Identification Number

C

Transaction ID : 28871160

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2600.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 147 OF 147

☐ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Coleman for Senate Recount Fund

Mailing Address 680 Transfer Road, Suite A

City
Saint Paul

State
MN

Zip Code
55114

Purpose of Disbursement

Recount fund for November 2008 election results

Candidate Name

011

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 13 / 2008

FEC Identification Number

C

Transaction ID : 28894612

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Strickland for Governor

Mailing Address 42 Park Dr

City
Columbus

State
OH

Zip Code
43215

Purpose of Disbursement

Ted Strickland, GOVERNOR OH

Candidate Name

, , Strickland, Ted,

011

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 13 / 2008

FEC Identification Number

C

Transaction ID : 28894776

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

7500.00

67900.00