

**FEC
FORM 3X**

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

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
 UnitedHealth Group Incorporated Political Fund

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

C00274431

3. IS THIS REPORT X NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
 (a) Quarterly Reports:
 April 15 Quarterly Report(Q1) Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 July 15 Quarterly Report(Q2) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 October 15 Quarterly Report(Q3) Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (M13)
 January 31 Quarterly Report(YE)
 (c) 12-Day PRE-Election Report for the: Primary (12P) X General (12G) Runoff (12R)
 Election on 11 05 2002 in the State of
 July 31 Mid-Year Report(Non-election Year Only) (MY) (d) 30-Day Post -Election Report for the: General (30G) Runoff (30R) Special (30S)
 Termination Report (TER) Election on in the State of

5. Covering Period 10 01 2002 through 10 18 2002

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

Type or Print Name of Treasurer Patrick J. Erlandson

Signature of Treasurer Electronically Filed by Patrick J. Erlandson Date 10 21 2002

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

Office Use Only

FEC FORM 3X
(Revised 1/2001)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/2001)

Page 2

Write or Type Committee Name
UnitedHealth Group Incorporated Political Fund

Report Covering the Period: From: ^h10 ^D01 ^v2002 To: ^h10 ^D16 ^v2002

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^v 2002		20128.94
(b) Cash on Hand at Beginning of Reporting Period	1423.51	
(c) Total Receipts (from Line 19)	4247.30	100651.87
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	5670.81	120780.61
7. Total Disbursements (from Line 30)	3000.00	118110.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2670.81	2670.61
9. Debts and Obligations owed TO the committee (itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Revised 1/2001)

Page 3

Write or Type Committee Name

UnitedHealth Group Incorporated Political Fund

Report Covering the Period: From: ^W10 ^D01 ^Y2002 To: ^W10 ^D16 ^Y2002

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)	3783.34	
(ii) Unitemized	463.96	
(iii) TOTAL (add Lines 11(a)(i) and (ii)	4247.30	100351.87
(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 32, page 4)	4247.30	100351.87
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	300.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)	4247.30	100651.87
20. Total Federal Receipts (subtract Line 18 from Line 19)	4247.30	100651.87

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Revised 1/2001)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	110.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	110.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3000.00	117000.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	0.00
29. Other Disbursements.....	0.00	1000.00
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)..... ▶	3000.00	118110.00
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30)..... ▶	3000.00	118110.00
<hr/>		
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3).....	4247.30	100351.87
33. Total Contribution Refunds (from Line 28(d)).....	0.00	0.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32).....	4247.30	100351.87
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... ▶	0.00	110.00
36. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35)..... ▶	0.00	110.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 5 / 39	
	<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 Political Fund

A. Richard Collins Date of Receipt
M / D / Y
M / D / Y

Mailing Address
450 Columbus Blvd CTD30-1030
City State Zip Code
Hartford CT 06115-0450

FEC ID number of contributing federal political committee. Amount of Each Receipt this Period
11.54

Name of Employer Occupation
UnitedHealth Group, Inc. Director, Underwriting

Receipt For: Aggregate Year-to-Date Payroll Deduction (\$11.54 Biweekly)
Primary General Other (specify) 253.88

Transaction ID: 10000005488000002

B. Anthony J. Kazlauskas Date of Receipt
M / D / Y
M / D / Y

Mailing Address
475 Kilvert St, Suite 310 RI01D-3400
City State Zip Code
Warwick RI 02886-1392

FEC ID number of contributing federal political committee. Amount of Each Receipt this Period
20.00

Name of Employer Occupation
UnitedHealth Group, Inc. Medical Director

Receipt For: Aggregate Year-to-Date Payroll Deduction (\$20.00 Biweekly)
Primary General Other (specify) 440.00

Transaction ID: 10000005482100003

C. John P. Anton Date of Receipt
M / D / Y
M / D / Y

Mailing Address
2970 Clairmont Rd Suite 650 GA010-3380
City State Zip Code
Atlanta GA 30329-1834

FEC ID number of contributing federal political committee. Amount of Each Receipt this Period
38.48

Name of Employer Occupation
UnitedHealth Group, Inc. Senior Vice President

Receipt For: Aggregate Year-to-Date Payroll Deduction (\$38.48 Biweekly)
Primary General Other (specify) 846.12

Transaction ID: 10000005485000004

SUBTOTAL of Receipts This Page (optional) ▶ **70.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 / 39	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. Richard J. Migliori

Date of Receipt
M / D / Y

Mailing Address
12125 Technology Drive MN002-0145
City State Zip Code
Eden Prairie MN 55344

Amount of Each Receipt this Period
76.92

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. Senior VP Ingenix Employer Group

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$76.92 Biweekly)
Primary General Other (specify) ▼ 1692.24

Transaction ID: 10000005484700005

Full Name (Last, First, Middle Initial)
B. Jeannie M. Rivet

Date of Receipt
M / D / Y

Mailing Address
8900 Bren Road E. MN008-W/315
City State Zip Code
Minnetonka MN 55343

Amount of Each Receipt this Period
100.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. COO of Health Plans

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$100.00 Biweekly)
Primary General Other (specify) ▼ 2200.00

Transaction ID: 10000005487100008

Full Name (Last, First, Middle Initial)
C. Brian Belova

Date of Receipt
M / D / Y

Mailing Address
1175 Post Rd East
City State Zip Code
Westport CT 06880

Amount of Each Receipt this Period
15.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. Vice President Sales Strategic Serv

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$15.00 Biweekly)
Primary General Other (specify) ▼ 330.00

Transaction ID: 10000005485800007

SUBTOTAL of Receipts This Page (optional) ▶ **191.92**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 / 39	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. R. Channing Wheeler

Date of Receipt
M / D / Y Y Y Y

Mailing Address
450 Columbus Blvd CTD30-12BB
City State Zip Code
Hartford CT 06115-0450

Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. 180.00

Name of Employer Occupation
UnitedHealth Group, Inc. Uniprise CEO

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$180.00 Biweekly)
Primary General Other (specify) ▼ 3960.00

Transaction ID: 10000005501000008

Full Name (Last, First, Middle Initial)
B. John Stevenson

Date of Receipt
M / D / Y Y Y Y

Mailing Address
450 Columbus Blvd 5NB-B
City State Zip Code
Hartford CT 06115-0450

Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. 9.80

Name of Employer Occupation
UnitedHealth Group, Inc. Associate General Counsel

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$9.80 Biweekly)
Primary General Other (specify) ▼ 215.60

Transaction ID: 10000005489400009

Full Name (Last, First, Middle Initial)
C. Beverly H. Nye

Date of Receipt
M / D / Y Y Y Y

Mailing Address
450 Columbus Blvd, CTD30-1090
City State Zip Code
Hartford CT 06115

Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. 19.23

Name of Employer Occupation
UnitedHealth Group, Inc. Senior VP Uniprise

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$19.23 Biweekly)
Primary General Other (specify) ▼ 423.06

Transaction ID: 1000000549500010

SUBTOTAL of Receipts This Page (optional) ▶ **209.03**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 / 39	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. Thomas J Quirk

Mailing Address
5800 Granite Parkway, ste 800 TX033-1000
City State Zip Code
Plano TX 75024

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period
10.00

FEC ID number of contributing federal political committee.

Name of Employer
UnitedHealth Group

Occupation
CEO Dallas/Austin Health Plan

Receipt For: Aggregate Year-to-Date ▼
Primary General Other (specify) ▼ 220.00

Payroll Deduction (\$10.00 Biweekly)

Transaction ID: 10000005486600011

Full Name (Last, First, Middle Initial)
B. Paul J Grandpre

Mailing Address
450 Columbus Blvd 3NB-A
City State Zip Code
Hartford CT 06115-0450

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period
10.00

FEC ID number of contributing federal political committee.

Name of Employer
UnitedHealth Group, Inc.

Occupation
Director, Customer Admin Svcs

Receipt For: Aggregate Year-to-Date ▼
Primary General Other (specify) ▼ 220.00

Payroll Deduction (\$10.00 Biweekly)

Transaction ID: 10000005480200012

Full Name (Last, First, Middle Initial)
C. Kenneth Alan Burdick

Mailing Address
9900 Bren Road East MN008-W318
City State Zip Code
Minnetonka MN 55345

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period
10.00

FEC ID number of contributing federal political committee.

Name of Employer
UnitedHealth Group, Inc.

Occupation
VP of Underwriting

Receipt For: Aggregate Year-to-Date ▼
Primary General Other (specify) ▼ 220.00

Payroll Deduction (\$10.00 Biweekly)

Transaction ID: 10000005486800013

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 / 39	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
				<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. Peter M. Landau

Date of Receipt
M / D / Y Y Y Y

Mailing Address
505 Baices Lane

City State Zip Code
Kingston NY 12401

Amount of Each Receipt this Period
10.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. Director of OPS, Kingston Service C

Receipt For: Aggregate Year-to-Date Payroll Deduction (\$10.00 Biweekly)
Primary General Other (specify) 220.00

Transaction ID: 10000005482900014

Full Name (Last, First, Middle Initial)
B. Thomas H. Lindquist

Date of Receipt
M / D / Y Y Y Y

Mailing Address
8900 Bren Road East MN008-T300

City State Zip Code
Minnetonka MN 55343

Amount of Each Receipt this Period
19.23

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. President, AARP Division, Ovations

Receipt For: Aggregate Year-to-Date Payroll Deduction (\$19.23 Biweekly)
Primary General Other (specify) 423.06

Transaction ID: 10000005483100015

Full Name (Last, First, Middle Initial)
C. Thomas M. O'Connor

Date of Receipt
M / D / Y Y Y Y

Mailing Address
9900 Bren Road East MN008-W250

City State Zip Code
Minnetonka MN 55343

Amount of Each Receipt this Period
9.62

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. VP Real Estate

Receipt For: Aggregate Year-to-Date Payroll Deduction (\$9.62 Biweekly)
Primary General Other (specify) 211.64

Transaction ID: 10000005485700016

SUBTOTAL of Receipts This Page (optional) **38.85**

TOTAL This Period (last page this line number only) **38.85**

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 / 39	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. Ronald S. Franzese

Date of Receipt
M / D / Y Y Y Y

Mailing Address
Terrace Plaza, 250 Morris Ave MID13-3250
City State Zip Code
Muskegon MI 49440-1143

Amount of Each Receipt this Period
40.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. CEO, PHP of West MI

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$40.00 Biweekly)
Primary General Other (specify) ▼ 880.00

Transaction ID: 10000005489700017

Full Name (Last, First, Middle Initial)
B. Gary Schultz

Date of Receipt
M / D / Y Y Y Y

Mailing Address
13621 N.W. 12 Street FL075-1000
City State Zip Code
Sunrise FL 33323

Amount of Each Receipt this Period
40.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. CEO - South Florida

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$40.00 Biweekly)
Primary General Other (specify) ▼ 880.00

Transaction ID: 10000005488500018

Full Name (Last, First, Middle Initial)
C. Robert Hussey

Date of Receipt
M / D / Y Y Y Y

Mailing Address
8930 Boone Blvd Ste 300 VA30-1030
City State Zip Code
Vienna VA 22182-2824

Amount of Each Receipt this Period
38.48

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. VP, Public Policy & Comm Ovations

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$38.48 Biweekly)
Primary General Other (specify) ▼ 846.12

Transaction ID: 10000005491400019

SUBTOTAL of Receipts This Page (optional) ▶ **118.46**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 / 39	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. Saul Feldman

Date of Receipt
M / D / Y Y Y Y

Mailing Address
405 Market Street CA035-2701

City State Zip Code
San Francisco CA 04105

Amount of Each Receipt this Period
76.92

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. CEO United Behavioral Health

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$76.92 Biweekly)
Primary General 1692.24
Other (specify) ▼

Transaction ID: 10000005489300020

Full Name (Last, First, Middle Initial)
B. Pierre Alain McMahon

Date of Receipt
M / D / Y Y Y Y

Mailing Address
450 Columbus Blvd CTD30-12BB

City State Zip Code
Hartford CT 06115-0430

Amount of Each Receipt this Period
10.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. General Council - Uniprise

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$10.00 Biweekly)
Primary General 220.00
Other (specify) ▼

Transaction ID: 10000005484400021

Full Name (Last, First, Middle Initial)
C. Robert Fleahner

Date of Receipt
M / D / Y Y Y Y

Mailing Address
4416 East-West Highway MD031-1000

City State Zip Code
Bethesda MD 20817

Amount of Each Receipt this Period
38.48

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group CEO UHC of the Mid Atlantic

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$38.48 Biweekly)
Primary General 230.76
Other (specify) ▼

Transaction ID: 10000005489800022

SUBTOTAL of Receipts This Page (optional) ▶ **125.38**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 / 39	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. Jack A. Wickens

Date of Receipt
M M / D D / Y Y Y Y

Mailing Address
278 Franklin Rd, Suite 280 TND07-1000

City State Zip Code
Brentwood TN 37024

Amount of Each Receipt this Period
19.23

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. SVP Regional Operations

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$19.23 Biweekly)
Primary General Other (specify) ▼ 423.06

Transaction ID: 10000005501400023

Full Name (Last, First, Middle Initial)
B. Serafin F. Sandella

Date of Receipt
M M / D D / Y Y Y Y

Mailing Address
601 Office Center Drive

City State Zip Code
Ft Washington PA 19034

Amount of Each Receipt this Period
10.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
United Health Group, Inc. Director Compliance AARP

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$10.00 Biweekly)
Primary General Other (specify) ▼ 220.00

Transaction ID: 10000005487900024

Full Name (Last, First, Middle Initial)
C. Elise Anne Gemelhardt

Date of Receipt
M M / D D / Y Y Y Y

Mailing Address
1620 L St. NY #800 DC030-1000

City State Zip Code
Washington DC 20036

Amount of Each Receipt this Period
38.48

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. VP Federal Affairs

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$38.48 Biweekly)
Primary General Other (specify) ▼ 846.12

Transaction ID: 10000005490000025

SUBTOTAL of Receipts This Page (optional) ▶ **67.69**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 / 39	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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 Political Fund

Full Name (Last, First, Middle Initial)
A. Cheryl A. Popeck

Date of Receipt
M / D / Y Y Y Y

Mailing Address
800 N Magnolia Ave., S#800 FL028-1028
City State Zip Code
Orlando FL 32803

Amount of Each Receipt this Period
10.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. Director of Operations

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$10.00 Biweekly)
Primary General Other (specify) ▼ 220.00

Transaction ID: 10000005486400026

Full Name (Last, First, Middle Initial)
B. Eugene Cavanaugh

Date of Receipt
M / D / Y Y Y Y

Mailing Address
450 Columbus Blvd CTD30-12NB-BB
City State Zip Code
Hartford CT 06115

Amount of Each Receipt this Period
38.46

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. CFO Uniprise

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$38.46 Biweekly)
Primary General Other (specify) ▼ 846.12

Transaction ID: 10000005487400027

Full Name (Last, First, Middle Initial)
C. Carla M. Muggio

Date of Receipt
M / D / Y Y Y Y

Mailing Address
One South Wacker IL014-3805
City State Zip Code
Chicago IL 60606

Amount of Each Receipt this Period
19.23

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. VP Operations

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$19.23 Biweekly)
Primary General Other (specify) ▼ 423.06

Transaction ID: 10000005495100028

SUBTOTAL of Receipts This Page (optional) ▶ **67.69**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 / 39	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
				<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. Paul D. Kalmeyer

Date of Receipt
M / D / Y Y Y Y

Mailing Address
6D1 Office Center Drive PA02D-1011
City State Zip Code
Ft. Washington PA 19034

Amount of Each Receipt this Period
10.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
United HealthGroup Attorney

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$10.00 Biweekly)
Primary General Other (specify) ▼ 220.00

Transaction ID: 10000005481900029

Full Name (Last, First, Middle Initial)
B. David S. Wichmann

Date of Receipt
M / D / Y Y Y Y

Mailing Address
8900 Bren Road East MN00B-W/304
City State Zip Code
Minnetonka MN 55343

Amount of Each Receipt this Period
120.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. SVP - Corporate Development

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$120.00 Biweekly)
Primary General Other (specify) ▼ 2840.00

Transaction ID: 100000055D1300030

Full Name (Last, First, Middle Initial)
C. L. Robert Depper

Date of Receipt
M / D / Y Y Y Y

Mailing Address
9900 Bren Road East MN00B-T902
City State Zip Code
Minnetonka MN 55343

Amount of Each Receipt this Period
78.92

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group Senior Vice President Human Capital

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$78.92 Biweekly)
Primary General Other (specify) ▼ 1692.24

Transaction ID: 10000005485300031

SUBTOTAL of Receipts This Page (optional) ▶ **206.92**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 / 39	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
				<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. William Young

Mailing Address
800 N. Magnolia Ave Ste 600
City: Orlando State: FL Zip Code: 32803

Date of Receipt
M / D / Y Y Y Y

Amount of Each Receipt this Period
9.81

FEC ID number of contributing federal political committee.

Name of Employer: UnitedHealth Group, Inc. Occupation: Sr. Medical Director

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 211.42 Payroll Deduction (\$9.81 Biweekly)

Transaction ID: 1000005501600032

Full Name (Last, First, Middle Initial)
B. Barbara Ellen Washington

Mailing Address
1225 New York Avenue, NW S475
City: Washington State: DC Zip Code: 20005

Date of Receipt
M / D / Y Y Y Y

Amount of Each Receipt this Period
38.46

FEC ID number of contributing federal political committee.

Name of Employer: UnitedHealth Group Occupation: Vice President Public Policy Ovatio

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 269.22 Payroll Deduction (\$38.46 Biweekly)

Transaction ID: 1000005500500033

Full Name (Last, First, Middle Initial)
C. Reed V. Tuckson, M.D.

Mailing Address
9900 Bren Road East
City: Minnetonka State: MN Zip Code: 55345

Date of Receipt
M / D / Y Y Y Y

Amount of Each Receipt this Period
115.38

FEC ID number of contributing federal political committee.

Name of Employer: UnitedHealth Group Occupation: Sr. V.P. Consumer Health & Medical

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 923.04 Payroll Deduction (\$115.38 Biweekly)

Transaction ID: 1000005499800034

SUBTOTAL of Receipts This Page (optional) ▶ **163.45**

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

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

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

FOR LINE NUMBER: PAGE 16 / 39

(check only one)

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

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated Political Fund

A. Full Name (Last, First, Middle Initial)
Dolph Maricci

Date of Receipt
M / D / Y Y Y Y

Mailing Address
1401 N. Westshore Blvd Suite 500

City State Zip Code
Tampa FL 33607

Amount of Each Receipt this Period
10.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. Director of Operations

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$10.00 Biweekly)
Primary General Other (specify) ▼ 220.00

Transaction ID: 10000005483700035

B. Full Name (Last, First, Middle Initial)
Charles C Pitts

Date of Receipt
M / D / Y Y Y Y

Mailing Address
3700 Colonnade Parkway AL001-0607

City State Zip Code
Birmingham AL 35243

Amount of Each Receipt this Period
19.23

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group CEO, UnitedHealthCare of AL, LA & M

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$19.23 Biweekly)
Primary General Other (specify) ▼ 423.06

Transaction ID: 10000005486300038

C. Full Name (Last, First, Middle Initial)
Susan L. Roberts

Date of Receipt
M / D / Y Y Y Y

Mailing Address
9900 Bren Road East MN008-W130

City State Zip Code
Minnetonka MN 55343

Amount of Each Receipt this Period
38.48

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group Senior VP, Business Develop - Everc

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$38.48 Biweekly)
Primary General Other (specify) ▼ 846.12

Transaction ID: 10000005497200037

SUBTOTAL of Receipts This Page (optional) ▶ **67.69**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 / 39	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
				<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. Lawrence J. Kissner

Mailing Address
13621 NW 12Th Street
City Sunrise State FL Zip Code 33323

Date of Receipt
M / D / Y Y Y Y

Amount of Each Receipt this Period
19.23

FEC ID number of contributing federal political committee.

Name of Employer: UnitedHealth Group, Inc. Occupation: Vice President Sales & Marketing

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 423.06

Payroll Deduction (\$19.23 Biweekly)

Transaction ID: 10000005482400038

Full Name (Last, First, Middle Initial)
B. Allan J. Weiss

Mailing Address
5901 Lincoln Drive
City Edina State MN Zip Code 55436

Date of Receipt
M / D / Y Y Y Y

Amount of Each Receipt this Period
15.00

FEC ID number of contributing federal political committee.

Name of Employer: UnitedHealth Group, Inc. Occupation: Treasurer

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 330.00

Payroll Deduction (\$15.00 Biweekly)

Transaction ID: 10000005500900039

Full Name (Last, First, Middle Initial)
C. William P. Whitsy

Mailing Address
One South Wacker
City Chicago State IL Zip Code 60606

Date of Receipt
M / D / Y Y Y Y

Amount of Each Receipt this Period
78.92

FEC ID number of contributing federal political committee.

Name of Employer: UnitedHealth Group, Inc. Occupation: CEO, United HealthCare of Illinois

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1692.24

Payroll Deduction (\$78.92 Biweekly)

Transaction ID: 10000005501200040

SUBTOTAL of Receipts This Page (optional) ▶ **111.15**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 / 39	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
				<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. Brett L. Baby

Date of Receipt
M M / D D / Y Y Y Y

Mailing Address
3650 Olentangy River Rd. OH020-3010
City State Zip Code
Columbus OH 43214-1138

Amount of Each Receipt this Period
11.54

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. Director, Provider Relations/Contra

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$11.54 Biweekly)
Primary General Other (specify) ▼ 253.88

Transaction ID: 10000005485300041

Full Name (Last, First, Middle Initial)
B. Mollie Chapman

Date of Receipt
M M / D D / Y Y Y Y

Mailing Address
4501 Erskine Road OH035-3035
City State Zip Code
Cincinnati OH 45242

Amount of Each Receipt this Period
10.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. Manager, Provider Relations

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$10.00 Biweekly)
Primary General Other (specify) ▼ 220.00

Transaction ID: 10000005487600042

Full Name (Last, First, Middle Initial)
C. David Sandkuhl

Date of Receipt
M M / D D / Y Y Y Y

Mailing Address
3650 Olentangy River Road OH020-0260
City State Zip Code
Columbus OH 43214

Amount of Each Receipt this Period
20.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. Director, Medical Sales & Marketing

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$20.00 Biweekly)
Primary General Other (specify) ▼ 440.00

Transaction ID: 10000005496000043

SUBTOTAL of Receipts This Page (optional) ▶ **41.54**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 / 39	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. Mark F. Lindsay

Date of Receipt
M M / D D / Y Y Y Y

Mailing Address
1225 New York Ave DC030-1000

City State Zip Code
Washington DC 20005

Amount of Each Receipt this Period
38.48

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group Director Business Development

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$38.48 Biweekly)
Primary General Other (specify) ▼ 848.12

Transaction ID: 10000005483200044

Full Name (Last, First, Middle Initial)
B. Robert G Adams

Date of Receipt
M M / D D / Y Y Y Y

Mailing Address
7910 South 3500 East UTD10-3500

City State Zip Code
Salt Lake City UT 84121

Amount of Each Receipt this Period
10.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. Western Ops - Sr Mgmt

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$10.00 Biweekly)
Primary General Other (specify) ▼ 220.00

Transaction ID: 10000005484500045

Full Name (Last, First, Middle Initial)
C. Ken L. Hoveman

Date of Receipt
M M / D D / Y Y Y Y

Mailing Address
3650 Olentangy River Rd OH020-3010

City State Zip Code
Columbus OH 43214-1138

Amount of Each Receipt this Period
30.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. COO UHC Ohio

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$30.00 Biweekly)
Primary General Other (specify) ▼ 660.00

Transaction ID: 10000005491200046

SUBTOTAL of Receipts This Page (optional) ▶ **78.48**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 / 39	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
				<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. Russell M. Hosteler

Date of Receipt
M / D / Y

Mailing Address
1401 N. WestShore Blvd, 8th fl FL067-0800

City State Zip Code
Tampa FL 33607

Amount of Each Receipt this Period
15.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. Medical Director

Receipt For: Aggregate Year-to-Date Payroll Deduction (\$15.00 Biweekly)
Primary General Other (specify) 330.00

Transaction ID: 10000005481100047

Full Name (Last, First, Middle Initial)
B. Ronald B. Colby

Date of Receipt
M / D / Y

Mailing Address
8900 Bren Rd East MN008-E211

City State Zip Code
Minnetonka MN 55343

Amount of Each Receipt this Period
175.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. Senior VP, Insurance & Product Mgmt

Receipt For: Aggregate Year-to-Date Payroll Deduction (\$175.00 Biweekly)
Primary General Other (specify) 3850.00

Transaction ID: 10000005487900048

Full Name (Last, First, Middle Initial)
C. Keith Noblit

Date of Receipt
M / D / Y

Mailing Address
2970 Clairmont Rd #850

City State Zip Code
Atlanta GA 30329-1834

Amount of Each Receipt this Period
20.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. Strategic Account Executive

Receipt For: Aggregate Year-to-Date Payroll Deduction (\$20.00 Biweekly)
Primary General Other (specify) 440.00

Transaction ID: 10000005495400049

SUBTOTAL of Receipts This Page (optional) ▶ **210.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 / 39	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. Robert G. Harman, MD

Date of Receipt
M / D / Y Y Y Y

Mailing Address
1D487 White Granite Dr. Suite 300, VA31-1000
City State Zip Code
Oakton VA 22124-0450

Amount of Each Receipt this Period
20.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. National Medical Director

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$20.00 Biweekly)
Primary General Other (specify) ▼ 440.00

Transaction ID: 10000005480600050

Full Name (Last, First, Middle Initial)
B. Thomas Taylor

Date of Receipt
M / D / Y Y Y Y

Mailing Address
425 Market St, 13th Floor CA035-1000
City State Zip Code
San Francisco CA 94105

Amount of Each Receipt this Period
20.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. Senior VP, UHC Key Accounts

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$20.00 Biweekly)
Primary General Other (specify) ▼ 440.00

Transaction ID: 10000005489800051

Full Name (Last, First, Middle Initial)
C. Karl Kendall

Date of Receipt
M / D / Y Y Y Y

Mailing Address
6900 Olson Memorial Hwy MN010-W126
City State Zip Code
Golden Valley MN 55427

Amount of Each Receipt this Period
9.61

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. VP, Computer Operations & Services

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$9.61 Biweekly)
Primary General Other (specify) ▼ 211.42

Transaction ID: 10000005482300052

SUBTOTAL of Receipts This Page (optional) ▶ **49.61**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 / 39	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. William E. Moeller

Mailing Address
233 North Michigan Ave IL014-0300
City State Zip Code
Chicago IL 60601

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period
38.48

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group CEO UnitedHealthcare Illinois

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$38.48 Biweekly)
Primary General Other (specify) ▼ 489.98

Transaction ID: 10000005484900053

Full Name (Last, First, Middle Initial)
B. Tina Chilton

Mailing Address
5901 Lincoln Dr. MN012-N221
City State Zip Code
Edina MN 55436

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period
15.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. Director, Treasury

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$15.00 Biweekly)
Primary General Other (specify) ▼ 330.00

Transaction ID: 10000005487800054

Full Name (Last, First, Middle Initial)
C. Sheila Letscher

Mailing Address
9900 Bren Road East MN008-T203
City State Zip Code
Minnetonka MN 55345

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period
19.23

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. Attorney

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$19.23 Biweekly)
Primary General Other (specify) ▼ 423.06

Transaction ID: 10000005483000055

SUBTOTAL of Receipts This Page (optional) ▶ **72.69**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 / 39	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. Steven Baker, MD

Date of Receipt
M / D / Y Y Y Y

Mailing Address
10701 W. Research Dr P.O. Box 28649 (WI030-5360)
City State Zip Code
Milwaukee WI 53226-0649

Amount of Each Receipt this Period
19.23

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. Senior Medical Director

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$19.23 Biweekly)
Primary General Other (specify) ▼ 423.06

Transaction ID: 10000005485700056

Full Name (Last, First, Middle Initial)
B. Robert J. Sheehy

Date of Receipt
M / D / Y Y Y Y

Mailing Address
8900 Bren Road East MN008-W/301
City State Zip Code
Minnetonka MN 55343

Amount of Each Receipt this Period
180.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. Executive Management

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$180.00 Biweekly)
Primary General Other (specify) ▼ 4180.00

Transaction ID: 10000005488700057

Full Name (Last, First, Middle Initial)
C. Timothy Ryan

Date of Receipt
M / D / Y Y Y Y

Mailing Address
9900 Bren Rd East MN008-T400
City State Zip Code
Minnetonka MN 55343

Amount of Each Receipt this Period
19.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group Segment General Counsel

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$19.00 Biweekly)
Primary General Other (specify) ▼ 418.00

Transaction ID: 10000005497700058

SUBTOTAL of Receipts This Page (optional) ▶ **228.23**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 / 39	
	<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 Political Fund

Full Name (Last, First, Middle Initial)
A. Michael J. Koehler

Date of Receipt
M M / D D / Y Y Y Y

Mailing Address
106 Farmers Alley, Suite 400 MID12-3200

City State Zip Code
Kalamazoo MI 49005-0271

Amount of Each Receipt this Period
40.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. CEO PHP Southwest Michigan

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$40.00 Biweekly)

Primary General Other (specify) ▼ 880.00

Transaction ID: 10000005482600059

Full Name (Last, First, Middle Initial)
B. William D. Felsing

Date of Receipt
M M / D D / Y Y Y Y

Mailing Address
10701 W. Research Drive WI130-H420

City State Zip Code
Milwaukee WI 53226-0649

Amount of Each Receipt this Period
19.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. VP&COO PrimeCare HealthPlan Inc.

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$19.00 Biweekly)

Primary General Other (specify) ▼ 418.00

Transaction ID: 10000005489400060

Full Name (Last, First, Middle Initial)
C. Glenn J. Reinhardt

Date of Receipt
M M / D D / Y Y Y Y

Mailing Address
10701 W. Research Drive WI030-S420

City State Zip Code
Milwaukee WI 53226

Amount of Each Receipt this Period
10.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. Vice President, Finance and Medicar

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$10.00 Biweekly)

Primary General Other (specify) ▼ 220.00

Transaction ID: 10000005497000061

SUBTOTAL of Receipts This Page (optional) ▶ **69.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 / 39	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
				<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. John S. Persham

Date of Receipt
M / D / Y

Mailing Address
9900 Bren Road East MN008-8082
City State Zip Code
Minnetonka MN 55343

Amount of Each Receipt this Period
40.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. VP Investor Relations

Receipt For: Aggregate Year-to-Date
Primary General Other (specify) 880.00

Payroll Deduction (\$40.00 Biweekly)

Transaction ID: 10000005486200062

Full Name (Last, First, Middle Initial)
B. Kelly DeKeyser

Date of Receipt
M / D / Y

Mailing Address
450 Columbus Blvd CTD30-15NB
City State Zip Code
Hartford CT 06103

Amount of Each Receipt this Period
19.23

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group Senior VP, Business Process Outsour

Receipt For: Aggregate Year-to-Date
Primary General Other (specify) 423.06

Payroll Deduction (\$19.23 Biweekly)

Transaction ID: 10000005488800063

Full Name (Last, First, Middle Initial)
C. Leonard A. Fair

Date of Receipt
M / D / Y

Mailing Address
9900 Bren Road East MN008-8310
City State Zip Code
Minnetonka MN 55343

Amount of Each Receipt this Period
60.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. Corporate Vice President

Receipt For: Aggregate Year-to-Date
Primary General Other (specify) 1320.00

Payroll Deduction (\$60.00 Biweekly)

Transaction ID: 10000005489200064

SUBTOTAL of Receipts This Page (optional) **119.23**

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 / 39	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
				<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. David Falk

Date of Receipt
M / D / Y Y Y Y

Mailing Address
2 Penn Plaza Ste 700 NY036-1000
City State Zip Code
New York NY 10121

Amount of Each Receipt this Period
12.50

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. Medical Director

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$12.50 Biweekly)
Primary General Other (specify) ▼ 275.00

Transaction ID: 10000005489100065

Full Name (Last, First, Middle Initial)
B. Michael Hawkins

Date of Receipt
M / D / Y Y Y Y

Mailing Address
1250 Capital of Tx Hwy S. Bldg I, Ste 400
City State Zip Code
Austin TX 78746

Amount of Each Receipt this Period
10.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. Medical Director

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$10.00 Biweekly)
Primary General Other (specify) ▼ 220.00

Transaction ID: 10000005489100066

Full Name (Last, First, Middle Initial)
C. Joe Berry

Date of Receipt
M / D / Y Y Y Y

Mailing Address
5901 Lincoln Drive MN012-S249
City State Zip Code
Edina MN 55436

Amount of Each Receipt this Period
20.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. National Medical Director

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$20.00 Biweekly)
Primary General Other (specify) ▼ 440.00

Transaction ID: 10000005486400067

SUBTOTAL of Receipts This Page (optional) ▶ **42.50**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 / 39	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
				<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. Lois Guem

Date of Receipt
M / D / Y

Mailing Address
9900 Bren Road East MN008-T3D0
City State Zip Code
Minnetonka MN 55343

Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. 155.00

Name of Employer Occupation
UnitedHealth Group, Inc. CEO, Ovations

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$155.00 Biweekly)
Primary General Other (specify) ▼ 3410.00

Transaction ID: 10000005486500068

Full Name (Last, First, Middle Initial)
B. Charles Weber

Date of Receipt
M / D / Y

Mailing Address
9705 Data Park Drive MN008-0252
City State Zip Code
Minnetonka MN 55343

Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. 10.00

Name of Employer Occupation
UnitedHealth Group, Inc. Information Systems

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$10.00 Biweekly)
Primary General Other (specify) ▼ 220.00

Transaction ID: 10000005500700069

Full Name (Last, First, Middle Initial)
C. Kevin Casey

Date of Receipt
M / D / Y

Mailing Address
9900 Bren Road E. Suite 305 MN008-T302
City State Zip Code
Minnetonka MN 55343

Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. 10.00

Name of Employer Occupation
UnitedHealth Group, Inc. Senior VP, Uniprise Health Plan Ops

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$10.00 Biweekly)
Primary General Other (specify) ▼ 220.00

Transaction ID: 10000005487300070

SUBTOTAL of Receipts This Page (optional) ▶ **175.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 / 39	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
				<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. Patrick Erlanson

Date of Receipt
M / D / Y

Mailing Address
8800 Bren Road E MN00B-8315
City State Zip Code
Minnetonka MN 55343

Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. 100.00

Name of Employer Occupation
UnitedHealth Group, Inc. VP Corporate Controller

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$100.00 Biweekly)
Primary General Other (specify) ▼ 2200.00

Transaction ID: 10000005489000071

Full Name (Last, First, Middle Initial)
B. Christina R. Palme-Kizak

Date of Receipt
M / D / Y

Mailing Address
8800 Bren Road MN00B-T300
City State Zip Code
Minnetonka MN 55343

Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. 10.00

Name of Employer Occupation
UnitedHealth Group, Inc. Deputy General Counsel

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$10.00 Biweekly)
Primary General Other (specify) ▼ 220.00

Transaction ID: 10000005489000072

Full Name (Last, First, Middle Initial)
C. Michael Harrington

Date of Receipt
M / D / Y

Mailing Address
6900 Olson Memorial Hwy MN10-S203
City State Zip Code
Golden Valley MN 55427

Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. 25.00

Name of Employer Occupation
UnitedHealth Group, Inc. Optum-Sales

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$25.00 Biweekly)
Primary General Other (specify) ▼ 550.00

Transaction ID: 100000054890700073

SUBTOTAL of Receipts This Page (optional) ▶ **135.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 / 39	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. Carol Schneeweis

Mailing Address
6300 Olson Memorial Hwy MN01D-S201
City State Zip Code
Golden Valley MN 55427

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period
15.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. HealthCare

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$15.00 Biweekly)
Primary General Other (specify) ▼ 330.00

Transaction ID: 10000005488400074

Full Name (Last, First, Middle Initial)
B. Tracy L. Bahl

Mailing Address
450 Columbus Blvd Uniprise Towers, 12NB
City State Zip Code
Hartford CT 06115

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period
38.46

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. President, Strategic Services Group

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$38.46 Biweekly)
Primary General Other (specify) ▼ 846.12

Transaction ID: 10000005485800075

Full Name (Last, First, Middle Initial)
C. John Mash

Mailing Address
9900 Bren Road East MN008-W130
City State Zip Code
Minnetonka MN 55345

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period
10.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. Chief Medical Officer, Evercare

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$10.00 Biweekly)
Primary General Other (specify) ▼ 220.00

Transaction ID: 10000005483500076

SUBTOTAL of Receipts This Page (optional) ▶ **63.46**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 / 39	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
				<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. Robert J. Backes

Date of Receipt
N M / D E / Y Y Y Y

Mailing Address
9800 Bren Road E MN00B-8317

City State Zip Code
Minnetonka MN 55343

Amount of Each Receipt this Period
100.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. Vice President - Human Resources

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$100.00 Biweekly)
Primary General Other (specify) ▼ 2200.00

Transaction ID: 10000005485400077

Full Name (Last, First, Middle Initial)
B. Pamela A. Tukalo

Date of Receipt
N M / D E / Y Y Y Y

Mailing Address
1849 E. Sunshine, Suite 300 MO015-1000

City State Zip Code
Springfield MO 65804

Amount of Each Receipt this Period
10.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. Director, Group Services Admin

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$10.00 Biweekly)
Primary General Other (specify) ▼ 220.00

Transaction ID: 10000005500000078

Full Name (Last, First, Middle Initial)
C. Matlyn Nevin

Date of Receipt
N M / D E / Y Y Y Y

Mailing Address
5901 Lincoln Drive MN012-N220

City State Zip Code
Edina MN 55436

Amount of Each Receipt this Period
10.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. Director of Risk Management

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$10.00 Biweekly)
Primary General Other (specify) ▼ 220.00

Transaction ID: 10000005495300079

SUBTOTAL of Receipts This Page (optional) ▶ **120.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 / 39	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
				<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. Terry Cameron

Date of Receipt
M / D / Y Y Y Y

Mailing Address
5225 Wiley Post Way, Suite 500 UTD15-D500

City State Zip Code
Salt Lake City UT 84116

Amount of Each Receipt this Period
11.54

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group Senior VP Business Development Inge

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$11.54 Biweekly)
Primary General Other (specify) ▼ 253.88

Transaction ID: 10000005487100080

Full Name (Last, First, Middle Initial)
B. William A. Munsell

Date of Receipt
M / D / Y Y Y Y

Mailing Address
8900 Bren Road E MN008-W/301

City State Zip Code
Minnetonka MN 55343

Amount of Each Receipt this Period
100.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. Chief Operating Officer

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$100.00 Biweekly)
Primary General Other (specify) ▼ 2200.00

Transaction ID: 10000005485200081

Full Name (Last, First, Middle Initial)
C. David Lubben

Date of Receipt
M / D / Y Y Y Y

Mailing Address
9900 Bren Rd East

City State Zip Code
Minnetonka MN 55343

Amount of Each Receipt this Period
192.31

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. General Counsel

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$192.31 Biweekly)
Primary General Other (specify) ▼ 4230.76

Transaction ID: 10000005483300082

SUBTOTAL of Receipts This Page (optional) ▶ **303.85**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 / 39	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. Barbara C. Bueneemann

Date of Receipt
M / D / Y Y Y Y

Mailing Address
13655 Riverport Trail MO050-1000

City State Zip Code
Maryland Heights MO 63043

Amount of Each Receipt this Period
11.54

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. COO UHC of the Midwest, Inc.

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$11.54 Biweekly)
Primary General Other (specify) ▼ 253.88

Transaction ID: 10000005486800083

Full Name (Last, First, Middle Initial)
B. William Tracy

Date of Receipt
M / D / Y Y Y Y

Mailing Address
8300 W. 110th Ste 350

City State Zip Code
Overland KS 66210

Amount of Each Receipt this Period
25.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. VP Sales

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$25.00 Biweekly)
Primary General Other (specify) ▼ 550.00

Transaction ID: 10000005489800084

Full Name (Last, First, Middle Initial)
C. Bruce Mead

Date of Receipt
M / D / Y Y Y Y

Mailing Address
1600 W Plano Pkwy, Ste 100 TX032-1000

City State Zip Code
Dallas TX 75075

Amount of Each Receipt this Period
10.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. Director Strategic SVCS Sales

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$10.00 Biweekly)
Primary General Other (specify) ▼ 220.00

Transaction ID: 10000005494800085

SUBTOTAL of Receipts This Page (optional) ▶ **46.54**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 / 39	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
				<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. Herbert L. Whetstone

Date of Receipt
M M / D D / Y Y Y Y

Mailing Address
513 Eaton St. MN003-1000

City State Zip Code
St. Paul MN 55107

Amount of Each Receipt this Period
9.81

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. Aviation Department Manager

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$9.81 Biweekly)
Primary General Other (specify) ▼ 211.42

Transaction ID: 10000005501100086

Full Name (Last, First, Middle Initial)
B. Mary A. Wame

Date of Receipt
M M / D D / Y Y Y Y

Mailing Address
2550 University Ave W, S#401S MN040-2500

City State Zip Code
St. Paul MN 55114-1904

Amount of Each Receipt this Period
10.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. Clinical Team Leader

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$10.00 Biweekly)
Primary General Other (specify) ▼ 220.00

Transaction ID: 10000005500400087

Full Name (Last, First, Middle Initial)
C. Daniel J. Meathie

Date of Receipt
M M / D D / Y Y Y Y

Mailing Address
9900 Bren Road E. MN008-W318

City State Zip Code
Minnetonka MN 55345

Amount of Each Receipt this Period
100.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. Senior VP Finance & HealthCare Econ

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$100.00 Biweekly)
Primary General Other (specify) ▼ 2200.00

Transaction ID: 10000005494100088

SUBTOTAL of Receipts This Page (optional) ▶ **119.61**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 / 39	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. James Watson

Date of Receipt
M / D / Y Y Y Y

Mailing Address
2717 N. 118th Lucile

City State Zip Code
Omaha NE 68164

Amount of Each Receipt this Period
19.23

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. V.P. Govt Relations, UHC Midlands

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$19.23 Biweekly)
Primary General Other (specify) ▼ 423.06

Transaction ID: 10000005500600089

Full Name (Last, First, Middle Initial)
B. Meg Stenberg

Date of Receipt
M / D / Y Y Y Y

Mailing Address
2307 W. Cone Blvd NC10-3750

City State Zip Code
Greensboro NC 27408

Amount of Each Receipt this Period
20.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. VP Corp Affairs & Gov't Programs

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$20.00 Biweekly)
Primary General Other (specify) ▼ 440.00

Transaction ID: 10000005489300090

Full Name (Last, First, Middle Initial)
C. Kevin Marum

Date of Receipt
M / D / Y Y Y Y

Mailing Address
5225 Wiley Post Way #500 UT015-0500

City State Zip Code
Salt Lake City UT 84116

Amount of Each Receipt this Period
10.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. Senior VP - Manager Utah

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$10.00 Biweekly)
Primary General Other (specify) ▼ 220.00

Transaction ID: 10000005489300091

SUBTOTAL of Receipts This Page (optional) ▶ **49.23**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 / 39	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
				<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. Lynne Montague-Clouse

Date of Receipt
M M / D D / Y Y Y Y

Mailing Address
12125 Technology Drive MN002-0161
City State Zip Code
Eden Prairie MN 55344

Amount of Each Receipt this Period
20.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. International HealthCare Consultant

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$20.00 Biweekly)
Primary General Other (specify) ▼ 440.00

Transaction ID: 10000005485000092

Full Name (Last, First, Middle Initial)
B. Kevin Pearson

Date of Receipt
M M / D D / Y Y Y Y

Mailing Address
5225 Wiley Post Way, Suite 500 UTD15-D500
City State Zip Code
Salt Lake City UT 84116

Amount of Each Receipt this Period
75.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. CEO Ingenix Health Intelligence

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$75.00 Biweekly)
Primary General Other (specify) ▼ 1650.00

Transaction ID: 10000005486000093

Full Name (Last, First, Middle Initial)
C. Amy K. Knapp

Date of Receipt
M M / D D / Y Y Y Y

Mailing Address
Two Penn Plaza, 7th Floor NY036-1000
City State Zip Code
New York NY 10121

Amount of Each Receipt this Period
115.38

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group Regional President, Eastern Region,

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$115.38 Biweekly)
Primary General Other (specify) ▼ 2538.36

Transaction ID: 10000005482500094

SUBTOTAL of Receipts This Page (optional) ▶ **210.38**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 / 39	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. Richard J. Reskin, MD

Mailing Address
1375 E 9th St., Suite 1100
City Cleveland State OH Zip Code 44114

Date of Receipt
M / D / Y Y Y Y

Amount of Each Receipt this Period
19.23

FEC ID number of contributing federal political committee.

Name of Employer UnitedHealth Group, Inc. Occupation Medical Director

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 423.06 Payroll Deduction (\$19.23 Biweekly)

Transaction ID: 10000005486800095

Full Name (Last, First, Middle Initial)
B. John McCreehy

Mailing Address
128 Sea Hammock Way
City Ponte Vedra Beach State FL Zip Code 32082

Date of Receipt
M / D / Y Y Y Y

Amount of Each Receipt this Period
10.00

FEC ID number of contributing federal political committee.

Name of Employer UnitedHealth Group, Inc. Occupation Director, Sales/Services

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00 Payroll Deduction (\$10.00 Biweekly)

Transaction ID: 10000005484300098

Full Name (Last, First, Middle Initial)
C. John Alexander

Mailing Address
425 Market St
City San Francisco State CA Zip Code 94105

Date of Receipt
M / D / Y Y Y Y

Amount of Each Receipt this Period
11.54

FEC ID number of contributing federal political committee.

Name of Employer UnitedHealth Group, Inc. Occupation Director of Intake/San Francisco

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 253.88 Payroll Deduction (\$11.54 Biweekly)

Transaction ID: 10000005484800097

SUBTOTAL of Receipts This Page (optional) ▶ **40.77**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 / 39	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
				<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. Ruth Kaplan

Date of Receipt
M M / D D / Y Y Y Y

Mailing Address
425 Market St 27th Floor CA035-2707

City State Zip Code
San Francisco CA 84105

Amount of Each Receipt this Period
11.54

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. UBH VP of Employer Svcs

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$11.54 Biweekly)
Primary General Other (specify) ▼ 253.88

Transaction ID: 1000000548200008

Full Name (Last, First, Middle Initial)
B. Eric Bergen

Date of Receipt
M M / D D / Y Y Y Y

Mailing Address
5901 Lincoln Drive MN012-S249

City State Zip Code
Edina MN 55436

Amount of Each Receipt this Period
40.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. HealthCare Svcs Dps Sr Mgmt

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$40.00 Biweekly)
Primary General Other (specify) ▼ 880.00

Transaction ID: 10000005486200009

Full Name (Last, First, Middle Initial)
C. R. Edward Bergmark

Date of Receipt
M M / D D / Y Y Y Y

Mailing Address
6900 Olson Memorial Hwy MN010-S203

City State Zip Code
Golden Valley MN 55427

Amount of Each Receipt this Period
38.47

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group, Inc. Vice President CEO IHR (OPTUM)

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (\$38.47 Biweekly)
Primary General Other (specify) ▼ 846.34

Transaction ID: 10000005486300100

SUBTOTAL of Receipts This Page (optional) ▶ **90.01**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 38 / 39	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. Michael H. Davis

Mailing Address
12125 Technology Drive MN002-0135
City State Zip Code
Eden Prairie MN 55344

Date of Receipt
M / D / Y Y Y Y

Amount of Each Receipt this Period
50.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UnitedHealth Group CIO Ingenix Information Technology

Receipt For: Aggregate Year-to-Date ▼ Payroll Deduction (50.00 Biweekly)
Primary General 1100.00
Other (specify) ▼

Transaction ID: 10000005488500101

B.

C.

SUBTOTAL of Receipts This Page (optional)	▶	50.00
TOTAL This Period (last page this line number only)	▶	3783.34

**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 39 / 39

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

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. Citizens For Harkin		Date of Disbursement 10 / 11 / 2002	
Mailing Address P O Box 811 City State Zip Code Des Moines IA 50304		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement YTD:\$1000.00 Tom Harkin, U.S. SENATE IA		24K Category/ Type	
Candidate Name Tom Harkin			
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: 2002 Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Transaction ID: 10000005484100002	
State: IA District:			

Full Name (Last, First, Middle Initial) B. Citizens For Rush		Date of Disbursement 10 / 11 / 2002	
Mailing Address 3 First Natl. Plaza, 70 W. Madison City State Zip Code Chicago IL 60618		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement YTD:\$1000.00 Bobby L. Rush, U.S. HOUSE 1		24K Category/ Type	
Candidate Name Bobby L. Rush			
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Transaction ID: 10000005484200003	
State: IL District: 1			

Full Name (Last, First, Middle Initial) C. Jean Camahan for Missouri Committee		Date of Disbursement 10 / 11 / 2002	
Mailing Address PO Box 23388 City State Zip Code St. Louis MO 63158		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement YTD:\$3000.00 Jean Camahan, U.S. SENATE		24K Category/ Type	
Candidate Name Jean Camahan			
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: 2002 Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Transaction ID: 10000005484300004	
State: MO District:			

SUBTOTAL of Disbursements This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	3000.00