Image# 201707199066798592			PAGE 1 / 191
FEC FORM 3X	REPORT OF F AND DISBURS	SEMENTS	Office Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
UnitedHealth Group I	ncorporated PAC (Unite	dHealth Group PAC)	
ADDRESS (number and street)	701 Pennsylvania Ave, NW		
Check if different	Suite 200		
than previously reported. (ACC)	Washington		DC 20004 – – – – – – – – – – – – – – – – – –
2. FEC IDENTIFICATION N		▲ 5	STATE ▲ ZIP CODE ▲
C C00274431	3. IS RE	PORT NEW (N) OR	AMENDED (A)
 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report July 15 Quarterly Report October 15 Quarterly Report January 31 Year-End Report July 31 Mid-Year Report (Non-elect Year Only) (MY) Termination Repo (TER) 	(Q2) (C) 12-Day PRE-Election Report for the: (Q3) (YE) (d) 30-Day POST-Election Report for the: Election	0 (M3) Jun 20 (M6) 0 (M4) Jul 20 (M7) Primary (12P) Convention (12C) on M General (30G) on	Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only) Sep 20 (M9) Dec 20 (M12) Oct 20 (M10) Jan 31 (YE) General (12G) Runoff (12R) Special (12S) Special (12S) Y Y Runoff (30R) Special (30S) Y in the State of
5. Covering Period	this Report and to the best of m Sherwood, Susan, , ,	through 06	e, correct and complete.
	erwood, Susan, , ,	[Electronically Filed]	ate 07 / 19 / 2017
NOTE: Submission of false, errc	neous, or incomplete information	nay subject the person signing thi	is Report to the penalties of 52 U.S.C. § 3010
Office Use Only			FEC FORM 3X Rev. 05/2016

07/19/2017 14 : 03

x

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name

FEC Form 3X (Rev. 05/2016)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

R	Report Covering the Period: From: 06	M / D D / Y Y Y Y 01 / 2017 To	06 / Y Y Y Y 2017
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2017		242591.24
	(b) Cash on Hand at Beginning of Reporting Period	448979.78	
	(c) Total Receipts (from Line 19)	181900.31	757897.18
	(d) Subtotal (add Lines 6(b) and6(c) for Column A and Lines6(a) and 6(c) for Column B)	630880.09	1000488.42
7.	Total Disbursements (from Line 31)	119950.00	489558.33
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	510930.09	510930.09
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Report Covering the Period: From:	/ D D / Y Y Y Y 01 / 2017 To:	06 / D D / Y Y Y Y 2017
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
I. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	161523.10	616734.69
Γ	00077.04	424002 40
(ii) Unitemized	20377.21	134962.49
(iii) TOTAL (add	181900.31	751697.18
Lines 11(a)(i) and (ii)	181900.31	101007.10
(b) Political Party Committees	0.00	0.00
(b) Political Party Committees(c) Other Political Committees		
	0.00	0.00
(such as PACs) (d) Total Contributions (add Lines	-7575	4
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	181900.31	751697.18
2. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
4. Loan Repayments Received	0.00	0.00
5. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
6. Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	0.00	5000.00
7. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	1200.00
3. Transfers from Non-Federal and Levin Funds		492 492
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
	47. 47. 47.	
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
9. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))	181900.31	757897.18
		4
0. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	181900.31	757897.18

Page 3

I

DETAILED SUMMARY PAGE

of Disbursements

	FEC Form 3X (Rev. 05/2016)	of Disbursements	Page 4
	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	perating Expenditures: Allocated Federal/Non-Federal Activity (from Schedule H4)		
	(i) Federal Share	0.00	0.00
(1	(ii) Non-Federal Share	0.00	0.00
(t	 Other Federal Operating Expenditures 	0.00	0.00
(c	 Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) 	0.00	0.00
	ransfers to Affiliated/Other Party ommittees	0.00	0.00
F	ontributions to ederal Candidates/Committees nd Other Political Committees	97500.00	466000.00
In (i	dependent Expenditures	0.00	0.00
Č (5	oordinated Party Expenditures 2 U.S.C. § 30116(d)) ise Schedule F)	0.00	
			0.00
L	pan Repayments Made	0.00	0.00
R	pans Made efunds of Contributions To:	0.00	0.00
(6	 Individuals/Persons Other Than Political Committees 	0.00	208.33
(t	· · · · · · · · · · · · · · · · · · ·	0.00	0.00
(C	(such as PACs)	0.00	0.00
(c	 I) Total Contribution Refunds (add Lines 28(a), (b), and (c)) 	0.00	208.33
	ther Disbursements (Including on-Federal Donations)	22450.00	23350.00
F (a	ederal Election Activity (52 U.S.C. § 30101) Allocated Federal Election Activity (from Schedule H6)	(20))	
	(i) Federal Share	0.00	0.00
(Ł	(ii) "Levin" Share) Federal Election Activity Paid	0.00	0.00
Ì	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
	otal Disbursements (add Lines 21(c), 22, 3, 24, 25, 26, 27, 28(d), 29 and 30(c))	119950.00	489558.33
To	otal Federal Disbursements		
	ubtract Line 21(a)(ii) and Line 30(a)(ii) om Line 31)▶	119950.00	489558.33

DETAILED SUMMARY PAGE

of Disbursements

COLUMN A

Total This Period

FEC Form 3X (Rev. 05/2016)

III. Net Contributions/ Operating Expenditures

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

(subtract Line 37 from Line 36)

	7			-	181900.31
	-			-	0.00
_	7	_		-	0.00
	,			,	181900.31
					0.00
	7	_	-	7	0.00
					0.00
	7	_	-	7	
					0.00
-	7	_	-	-7-	

1					751697.18
		-7-		 7	751097.10
					208.33
		-	1	7	200.33
					751488.85
	1	7	1	-7	101400.00
100					0.00
		7		7	
100					0.00
		7		 -7	0.00
					0.00

COLUMN B

Calendar Year-to-Date

Page 5

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

PAGE 6 OF

			Detailed Summary Page	×	11a 13	\vdash	11		11c	12		17	
	y information copied from such Reports and Stat for commercial purposes, other than using the n				or the		rpos	se of s	soliciting	g contr	ibutio	ons	
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	AC)									
A.	Full Name of Individual (Last, First, Middle Initia Brotten, ERIC, , ,	l) or Full O	rganization Name	1	Date of	Re	ecei	ipt					
	Mailing Address 5845 YORK AVENUE SOUTH				м м 06	/		08	/ Y	Y 201			
	City EDINA	State MN						106520		iod			
	FEC ID number of contributing federal political committee.	С					- -		- 45-	3	65.0)	
	Name of Employer (for Individual) Optum Services, Inc		ipation (for Individual) Compli		M	emo	o Ite	em					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 365.00]									
в.	Full Name of Individual (Last, First, Middle Initia FARRELL, STEPHEN J, , ,	l) or Full O	rganization Name	(Date of Receipt								
	Mailing Address 50 MAJOR DOANE RD				M M / D D / Y Y Y Y Y 06 08 2017								
	City WELLFLEET	State MA	Zip Code 02667-7836						106520	-	iod		
	FEC ID number of contributing federal political committee.	С			2000.00								
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Hlth		Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 2384.60]									
с.	Full Name of Individual (Last, First, Middle Initia MOURAS, DENNIS, , ,	l) or Full O	rganization Name		Date of	Re	ecei	ipt					
	Mailing Address 6376 MARSH ROAD	1			^M 06	1		23	/ Y	2017			
	City COTTRELLVILLE	State MI	Zip Code 48039-1314						106521 ceipt th		iod		
	FEC ID number of contributing federal political committee.	С					y		. y	2	50.00)	
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Hlth		Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00]									
s	UBTOTAL of Receipts This Page (optional)						,			26	15.00)	
т	OTAL This Period (last page this line number on	ly)					-		-		-		

FOR LINE NUMBER:

PAGE

7 OF

	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
			13 14 15 16 17 verson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)	-								
VinitedHealth Group Incorpo	orated PAC (I	JnitedHealth Group P/	4C)						
Full Name of Individual (Last, First, Midd MCGUIRE, MICHAEL, , ,	lle Initial) or Full C	Prganization Name	Date of Receipt						
Mailing Address 437 DRURY LANE			06 28 2017						
City WYCKOFF	State NJ	Zip Code 07481-2204	Transaction ID : 41065211 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		2500.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) I Plan CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2500.00]						
Full Name of Individual (Last, First, Midd B. KORINKO, ANNA, , ,	lle Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 5504 12TH AVENUE SC		Zie Oode	06 / D D / Y Y Y Y 2017						
City MINNEAPOLIS	State MN	Zip Code 55417-2519	Transaction ID : 41065214 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) buty Gen Counsel Mgr	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]						
Full Name of Individual (Last, First, Midd c. WATSON III, JAMES S, , ,	lle Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 6520 SHENANDOAH DI	R		06 / D D / Y Y Y Y 06 30 2017						
City LINCOLN	State NE	Zip Code 68510-5159	Transaction ID : PR1159806046270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		75.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Gen Counsel	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 325.00	P/R Deduction (\$25.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional	al)		3575.00						
TOTAL This Period (last page this line nur	mber only)								

SCHEDULE A (FEC Form 3X) -

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 8 OF

			Use separate schedule(s)	(ch	(check only one)						
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12		
	y information copied from such Reports and Sta for commercial purposes, other than using the n										
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	C)							
A.	Full Name of Individual (Last, First, Middle Initia GAUDIO, JOSEPH G, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt				
	Mailing Address 4842 E MOUNTAIN VIEW RD				^M 06	/	D D 30	/ Y	ү ү 2017	Y	
	City PARADISE VALLEY	State AZ	Zip Code 85253-1539						3 1184627 is Period		
	FEC ID number of contributing federal political committee.	С					7	-	136.	35	
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Plan CEO		Me	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 363.60	F	P/R Dedu	uctio	on (\$45.	45 Bi-We	eekly)		
в.	Full Name of Individual (Last, First, Middle Initia WICHMANN, DAVID S, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt				
	Mailing Address 7000 ANTRIM ROAD		Zip Code		M M / D D / Y Y Y Y 06 30 2017						
	City EDINA	State MN		Transaction ID : PR1159814746270 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С			576.90						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) s UHG		P/R Deduction (\$192.30 Bi-Weekly)						
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ , 2499.90	P							
с.	Full Name of Individual (Last, First, Middle Initia MEAD, BRUCE E, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt				
	Mailing Address 1232 GRAY BRANCH RD	1 -			^M 06	/	D D D 30		y y 2017		
	City MCKINNEY	State TX	Zip Code 75071-6495						31614627 is Period		
	FEC ID number of contributing federal political committee.	С					<u>y</u>	. <u>,</u>	830.	16	
Name of Employer (for Individual) Optum Services, Inc			ipation (for Individual) SIs		Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate Y	Year-to-Date ▼ 1402.56	P/R Deduction (\$276.72 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)		•				y	,	1543.	41	
т	OTAL This Period (last page this line number or	ıly)	•	-			,	-			

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 9 OF

	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	▲ 11a 11b 11c 12 13 14 15 16 11						
			13 14 15 16 1 erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Midd A. PENSHORN, JOHN S, , ,	le Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 120 BLACK OAKS LANE	E		06 / D D / Y Y Y Y 06 30 2017						
City WAYZATA	State MN	Zip Code 55391-1363	Transaction ID : PR1159816946270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		576.90						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ? UnitedHIth Group	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Midd B. KALLMEYER, PAUL D, , ,	le Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 468 HERALD DR			06 / D D / Y Y Y Y 2017						
City AMBLER	State PA	Zip Code 19002-1530	Transaction ID : PR1159817446270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		150.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) buty Gen Counsel Mgr	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date	P/R Deduction (\$50.00 Bi-Weekly)						
Full Name of Individual (Last, First, Midd C. QUIRK, THOMAS J, , ,	le Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 6458 ORCHID LANE			06 / D D / Y Y Y Y Y Y 2017						
City DALLAS	State TX	Zip Code 75230-4121	Transaction ID : PR1159819146270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		288.45						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Care Initiv	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1249.95	P/R Deduction (\$96.15 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional	al)		1015.35						
TOTAL This Period (last page this line nur	nber only)	······							

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 10 OF

T			Use separate schedule(s)	(check only one)								
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	>	1 1a		11b	11c	12			
	y information copied from such Reports and Sta											
or	for commercial purposes, other than using the n	ame and a	address of any political committee	to so	Dicit con	itrid	utions t	rom sucr	1 committ	ee.		
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	UnitedHealth Group PA	C)								
A.	Full Name of Individual (Last, First, Middle Initia MIGLIORI, RICHARD J, , ,	l) or Full O	Organization Name		Date of	Re	ceipt					
	Mailing Address PO BOX 72				м м 06	/	30	/ Y	y y 2017	Y		
	City WAYZATA	State MN	Zip Code 55391-0072						32744627 is Period	0		
	FEC ID number of contributing federal political committee.	С					.		576.9	90		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Consumr HIth Med Care		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	F	P/R Dedu	uctio	on (\$192	2.30 Bi-W	/eekly)			
в.	Full Name of Individual (Last, First, Middle Initia RIVET, JEANNINE M, , ,	l) or Full O	Organization Name		Date of	Re	ceipt					
	Mailing Address 4305 TRILLIUM WAY	1		M M / D D / Y Y Y Y 06 30 2017								
		State MN	Zip Code 55364-7708	-	Transaction ID : PR1159830046270							
	MINNETRISTA		Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		576.90								
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) EVP UnitedHIth Grp			Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 2499.90	P/R Deduction (\$192.30 Bi-Weekly)								
C.	Full Name of Individual (Last, First, Middle Initia BRESOLIN, MICHAEL J, , ,	l) or Full O	Organization Name		Date of	Re	ceipt					
	Mailing Address 121 W VIEW STREET				^M 06	/	30		2017 ^Y			
	City LOMBARD	State IL	Zip Code 60148-1659	-					00574627 is Period	0		
	FEC ID number of contributing federal political committee.	С					,	,	40.0	00		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Care Advo		Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 240.00	P/R Deduction (\$20.00 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)								1193.8	30		
т	OTAL This Period (last page this line number or	ly)	· · · · · · · · · · · · · · · · · · ·		<u> </u>		,					

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 11 OF

IT.			Use separate schedule(s)	(ch	eck only	y or	ne)						
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		1 1a		11b	11c	12				
	y information copied from such Reports and S												
	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and a					utions i	TOTTI SUCI	Commu	ee.			
	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)									
Α.	Full Name of Individual (Last, First, Middle Ini MATTEO, MICHAEL C, , ,	tial) or Full O	rganization Name		Date of	Re	ceipt						
	Mailing Address 25 JEREMIAHS WAY				^M 06	1	D D 30	/ Y	2017	Y			
	City SOUTH GLASTONBURY	State CT	Zip Code 06073-3621	_					3344627 is Period	D			
	FEC ID number of contributing federal political committee.	С			<u> </u>			-	346. <i>*</i>	4			
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ef Growth Off		Me	emc	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1499.94	P/R Deduction (\$115.38 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Ini CARR, ANTHONY R, , ,	tial) or Full O	rganization Name	Date of Receipt									
	Mailing Address 5201 THOROUGHBRED LN	1-			M M 06	/	D D D 30	/ Y	2017	Y			
	City	State FL	Zip Code						2344627)			
	SOUTHWEST RANCHES	112	33330-2406	_	Amount	: of	Each R	eceipt th	is Period	_			
	FEC ID number of contributing federal political committee.	C			Ľ.	_	-	-	714.2	27			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP PEOs Trusts		Me	emc	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1904.72]	P/R Dedu	uctio	on (\$238	3.09 Bi-W	'eekly)				
с.	Full Name of Individual (Last, First, Middle Ini MILLER, KATHERINE V, , ,	tial) or Full O	rganization Name		Date of	Re	ceipt						
	Mailing Address 2321 HARBOR LAKE DRIVE				^M 06	/	30		2017	Y			
	ORANGE PARK	State FL	Zip Code 32003-7799						32434627 is Period	0			
	FEC ID number of contributing federal political committee.	С			<u> </u>		,	5	115.3	38			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Pres Ntwk Mgmt		M	emo	tem						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 499.98]	P/R Ded	ucti	on (\$38.	.46 Bi-We	ekly)				
s	UBTOTAL of Receipts This Page (optional)			•			, .	,	1175.7	9			
т	OTAL This Period (last page this line number	only)		•			-	-					

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 12 OF

IT.	EMIZED RECEIPTS		Use separate schedule(s)	(cł	heck onl	у ог	ne)					
11			for each category of the Detailed Summary Page		X 11a		11b	11c	12			
	y information copied from such Reports and S											
or	for commercial purposes, other than using the	e name and a	ddress of any political committee	e to s	solicit co	ntrib	outions 1	from such	n committ	ee.		
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)								
Α.	Full Name of Individual (Last, First, Middle Ini ANDERSON, CRAIG C, , ,	tial) or Full C	organization Name		Date of Receipt							
	Mailing Address 47 AMATO CIRCLE				06 / D / Y Y Y Y 06 30 2017							
	City WETHERSFIELD	State CT	Zip Code 06109-3971	_					95734627 iis Period	0		
	FEC ID number of contributing federal political committee.	С			79							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In Pres Ntwk Mgmt		Μ	emo	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2023.74]	P/R Ded	lucti	on (\$22	8.93 Bi-W	/eekly)			
в.	Full Name of Individual (Last, First, Middle Ini ERICKSON, KAREN L, , ,	tial) or Full C	organization Name		Date of	f Re	eceipt					
	Mailing Address 15348 RED OAKS ROAD SE			06 / 06 / Y Y Y Y 06 / 06 / 00 / 00 / 00 / 00 / 00 / 00 /								
	City PRIOR LAKE	State MN	Zip Code 55372-1834	-					95764627	0		
	FEC ID number of contributing federal political committee.	С			Amoun				iis Period 576.	90		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) um Exec		M	emo	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90]	P/R Ded	uctio	on (\$192	2.30 Bi-W	/eekly)			
с.	Full Name of Individual (Last, First, Middle Ini MONFILETTO, ERNEST, , ,	tial) or Full C	organization Name		Date of	f Re	eceipt					
	Mailing Address 3062 COMFORT ROAD				06		30		y y 2017			
	City NEW HOPE	State PA	Zip Code 18938-5622						95814627 iis Period	0		
	FEC ID number of contributing federal political committee.	С			Ē		,	. ,	230.	76		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Prgms		M	emo	o Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 999.96]	P/R Ded	lucti	on (\$76	.92 Bi-We	eekly)			
s	UBTOTAL of Receipts This Page (optional)		••••••	•			, .	. ,	1494.4	45		
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
			erson for the purpose of soliciting contributions
	the name and a	ddress of any political committe	e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group P	AC)
Full Name of Individual (Last, First, Middle VALENTA, LEE D, , ,	e Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 5033 PARK TERRACE			06 / Y Y Y Y Y 06 30 2017
City EDINA	State MN	Zip Code 55436-1098	Transaction ID : PR1575958546270 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		576.90
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ? Gen Mgmt	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle B. KELLY, JOHN W, , ,	e Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 568 HAWTHORNE WOOI			06 / D D / Y Y Y Y 06 30 2017
City	State MN	Zip Code	Transaction ID : PR1575959746270
EAGAN		55123-3059	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		614.55
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Tax	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2336.95	P/R Deduction (\$204.85 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. WEBB, ROBERT THOMAS, , ,	e Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 4516 DREXEL AVENUE			06 / ^y y y y 2017
City EDINA	State MN	Zip Code 55424-1130	Transaction ID : PR1580865346270 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		576.90
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 UnitedHIth Grp	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)		1768.35
TOTAL This Period (last page this line num	ber only)	······	

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

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11		11b	11c	12			
Any information copied from such Reports and				the pu						
or for commercial purposes, other than using t	he name and a	ddress of any political committee	e to solicit	contr	ibutions	from such	n committe	ee.		
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle A. HUGHES, RICHARD J, , ,	Initial) or Full C	rganization Name	Dat	e of F	Receipt					
Mailing Address 3905 COUNTY ROAD 44			06 30 2017							
City MINNETRISTA	State MN	Zip Code 55364-9572				: PR1596: Receipt th		0		
FEC ID number of contributing federal political committee.	С				-		300.0	00		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 2 COO of Human Capital		Men	no Item					
Receipt For: Primary General Other (specify) $ earrow$	Year-to-Date ▼ 1300.00	P/R I	Deduc	tion (\$1	00.00 Bi-W	Veekly)				
Full Name of Individual (Last, First, Middle JOHNSON, THAD C, , ,	Initial) or Full C	rganization Name	Dat	e of F	Receipt					
Mailing Address 9741 GLACIER BAY	01-1-	7. 0.4		D6	/ D 30		2017	Y		
City EDEN PRAIRIE	State MN	Zip Code 55347-2615				: PR15963 Receipt th)		
FEC ID number of contributing federal political committee.	С						576.9	90		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Group Gen Counsel		Men	no Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	 P/R [Deduc	tion (\$19	92.30 Bi-W	/eekly)			
Full Name of Individual (Last, First, Middle C. SCHUMACHER, DANIEL J, , ,	Initial) or Full C	rganization Name	Dat	e of F	Receipt					
Mailing Address 5401 LARADA LANE				06	/ D 30		2017	Y		
City EDINA	State MN	Zip Code 55436-1024				: PR1596 Receipt th		0		
FEC ID number of contributing federal political committee.	С			_	y	9	576.9	90		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Grp Pres & COO		Men	no Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R	Deduc	ction (\$1	92.30 Bi-V	Veekly)			
SUBTOTAL of Receipts This Page (optional).			. [_	, .	,	1453.8	30		
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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12			
	y information copied from such Reports and Sta for commercial purposes, other than using the r											
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	J PAC (L	JnitedHealth Group PA	AC)								
A.	Full Name of Individual (Last, First, Middle Initia THEISEN, SCOTT E, , ,	al) or Full Or	rganization Name		Date of	Re	ceipt					
	Mailing Address 1950 MEADOWWOODS TRAIL				06 30 2017							
	City LONG LAKE	State MN	Zip Code 55356-9312						0564627 is Period	0		
	FEC ID number of contributing federal political committee.	С					,	-	557.	69		
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus Ops		Me	emo	ltem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1249.99	F	P/R Dedu	uctic	on (\$19.:	23 Bi-We	ekly)			
в.	Full Name of Individual (Last, First, Middle Initia OBERRENDER, ROBERT W, , ,	al) or Full Or	rganization Name		Date of	Re	ceipt					
	Mailing Address 4505 MOORLAND AVENUE				м м 06	/	D D D 30	/ Y	2017	Y		
	City EDINA	State MN	Zip Code 55424-1158						0704627 is Period	0		
	FEC ID number of contributing federal political committee.	С				U			576.9	90		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ? Treasurer		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P	9/R Dedu	ıctio	ın (\$192	30 Bi-W	eekly)			
C.	Full Name of Individual (Last, First, Middle Initia ANDERSON, KENNETH J, , ,	al) or Full Or	rganization Name		Date of	Re	ceipt					
	Mailing Address 12700 NE 245TH AVE				^M 06	/	^D 30		2017 [°]			
	City BRUSH PRAIRIE	State WA	Zip Code 98606-7761						30924627 is Period	0		
	FEC ID number of contributing federal political committee.	С			<u> </u>		y 1	. ,	59.	73		
	Name of Employer (for Individual) Optum Services, Inc		ipation (for Individual) Business Development Exe		Me	emo	Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 241.22]	P/R Ded	uctio	on (\$19.	91 Bi-We	ekly)			
s	UBTOTAL of Receipts This Page (optional)		••••••	•			, .	. ,	1194.:	32		
т	OTAL This Period (last page this line number or	וy)	•••••	•			,					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page		X 11a	11b	11c	12	
	y information copied from such Reports and Sta for commercial purposes, other than using the r								
$\overline{)}$	NAME OF COMMITTEE (In Full)								
/	UnitedHealth Group Incorporated	a PAC (l	UnitedHealth Group	PAC)					
A.	Full Name of Individual (Last, First, Middle Initia FLYNN, DIANE BEDNAR, , ,	al) or Full O	Organization Name		Date of	Receipt			
	Mailing Address 3318 FOXRIDGE CIRCLE				м м 06	/ D 30		2017	Y
	City TAMPA	State FL	Zip Code 33618-2149			action ID :)
			53010-2149		Amount	of Each F	Receipt th	nis Period	
	FEC ID number of contributing federal political committee.	С			<u> </u>			117.0	00
	Name of Employer (for Individual)		upation (for Individual)		Me	emo Item			
	Optum Services, Inc Receipt For:	Reg	gn Exec Dir						
	Primary General	Aggregate	Year-to-Date ▼		P/P Dod	uction (\$39			
	Other (specify) V		507.00		F/K Deut	uction (\$58	.00 BI-VV	SERIY)	
_	Full Name of Individual (Last, First, Middle Initia	al) or Full O	Organization Name						
В.	DAVIDSON, TRACY L, , , Mailing Address 6058 HARBOUR TOWN CIR					Receipt		N N	X
	Maining Address 6058 HARBOUR TOWN CIR				06	30		2017	Y
	City	State	Zip Code		Trans	action ID :	PR1596:	311646270)
	WESTERVILLE	OH	43082-8144		Amount	of Each F	Receipt th	nis Period	
	FEC ID number of contributing federal political committee.	С						576.9	90
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Plan CEO		Me	emo Item			
	Receipt For:	Aggregate	Year-to-Date V						
	Primary General Other (specify) ▼		, 2499.90		P/R Dedu	uction (\$19	2.30 Bi-W	/eekly)	
	Full Name of Individual (Last, First, Middle Initia GARCIA, STEVAN D, , ,	al) or Full O	Organization Name		Date of	Receipt			
	Mailing Address 1375 GRAYHAWK PLACE				M = M	/ D	D / Y	- Y - Y -	Y
					06	30		2017	
	City LARKSPUR	State CO	Zip Code 80118-8623	-		of Each F			0
	FEC ID number of contributing				Amount	OI Eacil r	heceipt ti	lis Fellou	_
	federal political committee.	C			<u> </u>	<u> </u>	y	0.0	00
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 Ops		Me	emo Item			
	Receipt For:	I	Year-to-Date ▼						
	Primary General			-	P/R Ded	uction (\$0.	00 Bi-We	ekly)	
	Other (specify)	L	4999.90	-					
s	UBTOTAL of Receipts This Page (optional)			🕨		. , .	9	693.9	0
т	OTAL This Period (last page this line number or	וy)		►		-			

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			Use separate schedule(s)	(ch	eck only	/ or	ne)			
			for each category of the Detailed Summary Page	×	11a 13		11b 14	11c	12	17
Any infor c	ormation copied from such Reports and S commercial purposes, other than using the	tatements ma name and a	y not be sold or used by any p ddress of any political committed	erson e to so	for the	purp ntrib	oose of	15 soliciting from suc	g contribut	ions ee.
	IE OF COMMITTEE (In Full)									
∕ Un	itedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)						
A. HE	Name of Individual (Last, First, Middle Ini UMANN, KURT A, , ,	tial) or Full O	rganization Name		Date of	Re	ceipt			
	ing Address 9825 GERALD DR				м м 06	/	30		2017	Y
City SAI	NT LOUIS	State MO	Zip Code 63128-1767						31374627 nis Period	0
	ID number of contributing ral political committee.	С						-	60.0	00
	e of Employer (for Individual) ed HealthCare Services Inc		ipation (for Individual) Plan CEO		Me	emo	ltem			
	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 260.00] F	P/R Dedu	uctio	on (\$20	.00 Bi-We	eekly)	
в. <u>М</u> А	Name of Individual (Last, First, Middle Ini ALLATT, KATHLEEN A, , ,	tial) or Full O	rganization Name		Date of	Re	ceipt			
	ing Address 4304 SOUTH 167 AVENUE	State	Zin Code		06	/	30		2017	Y
City OM	АНА	State NE	Zip Code 68135-1353						315446270 nis Period)
FEC	ID number of contributing ral political committee.	С				. OI	-		115.3	38
	ne of Employer (for Individual) ad HealthCare Services Inc		upation (for Individual) Plan CEO		Me	emo	tem			
	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98] P	9/R Dedu	uctio	on (\$38.	.46 Bi-We	eekly)	
	Name of Individual (Last, First, Middle Ini DSENTHAL, DANIEL I, , ,	tial) or Full O	rganization Name		Date of	Re	ceipt			
	ing Address 8 VIA HERMOSA				^M 06	1	30		2017	
City OR	NDA	State CA	Zip Code 94563-1828						31734627 nis Period	0
	ID number of contributing ral political committee.	С			<u> </u>		,	9	576.9	90
Unit	e of Employer (for Individual) ed HealthCare Services Inc		ipation (for Individual) Ntwk		Me	emc	tem			
	eipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90] [P/R Ded	ucti	on (\$19	2.30 Bi-V	Veekly)	
	OTAL of Receipts This Page (optional)			• -			,	,	752.2	28

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11b	11c	12		
Any information copied from such Reports and or for commercial purposes, other than using									
NAME OF COMMITTEE (In Full)	,								
> UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle A. RUTH, KEVIN J, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 16621 ALEXANDER MAN			06		D D 30	/ Y	2017	Y	
City SILVER SPRING	State MD	Zip Code 20905-5028					31744627 is Period	0	
FEC ID number of contributing federal political committee.	C				-yr- 1		576.9	90	
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9, HIth Advancement		Memo	o Item				
Receipt For: Primary General Other (specify) ▼	Year-to-Date ▼ 2499.90	P/R D	educti	ion (\$192	2.30 Bi-W	/eekly)			
Full Name of Individual (Last, First, Middle B. STURKEY, DAVID C, , ,	e Initial) or Full O	rganization Name	Date	of Re	eceipt				
Mailing Address 1941 MARINA ROAD			06		^D 30	/ Y	2017	Y	
City IRMO	State SC	Zip Code 29063-8579					18446270 is Period)	
FEC ID number of contributing federal political committee.	С						117.0	00	
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP Acct Mgmt		Memo	o Item				
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		507.00	P/R De	educti	on (\$39.0	00 Bi-We	ekly)		
Full Name of Individual (Last, First, Middle TODD , JEFFREY ALAN, , ,		rganization Name	Date	of Re	eceipt				
Mailing Address 467 PRAIRIE WAY SOUT	ГН State	Zin Code	00	6	30		2017		
City BAYPORT	MN	Zip Code 55003-1607					31904627 is Period	U	
FEC ID number of contributing federal political committee.	С				y 1	9	75.0	00	
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Jnderwriting		Memo	o Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 325.00	P/R D	educti	ion (\$25.	.00 Bi-We	ekly)		
SUBTOTAL of Receipts This Page (optiona	l)				, .	,	768.9	90	
TOTAL This Period (last page this line num	ber only)								

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	-	Use separate schedule(s)	(check only one)	
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 11c 113 14 15	12 16 17
Any information copied from such Reports a or for commercial purposes, other than using			erson for the purpose of soliciting c	contributions
NAME OF COMMITTEE (In Full)	-			
UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P/	.C)	
Full Name of Individual (Last, First, Middl A. TURNAU, CHRIS B, , ,	le Initial) or Full O	rganization Name	Date of Receipt	
Mailing Address PO BOX 43216				Y Y Y
3741 DUNBAR KNOLL City	State	Zip Code		2017
BROOKLYN PARK	MN	55443-0216	Transaction ID : PR159631 Amount of Each Receipt this	
FEC ID number of contributing federal political committee.	С			115.38
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) Tax	Memo Item	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weel	kly)
Full Name of Individual (Last, First, Middl B. WASSERSTEIN, M LAURIE, , ,	le Initial) or Full O	rganization Name	Date of Receipt	
Mailing Address 92 GOODWIN CIRCLE				2017
City HARTFORD	State CT	Zip Code 06105-5205	Transaction ID : PR1596319 Amount of Each Receipt this	
FEC ID number of contributing federal political committee.	С			57.69
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Prgms	Memo Item	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 249.99	P/R Deduction (\$19.23 Bi-Weel	dy)
Full Name of Individual (Last, First, Middl C. DODDY, JOHN P, , ,	le Initial) or Full O	rganization Name	Date of Receipt	
Mailing Address 1 ROXITICUS VIEW			 	2017
City CHESTER	State NJ	Zip Code 07930-3020	Transaction ID : PR160059	
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this	117.00
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) nfo Tech	Memo Item	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 507.00	P/R Deduction (\$39.00 Bi-Wee	kly)
SUBTOTAL of Receipts This Page (optiona	al)		· · · · · · · · · · · · · · · · · · ·	290.07
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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)
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Any information copied from such Reports an or for commercial purposes, other than using	d Statements ma the name and a	l ay not be sold or used by any p address of any political committe	13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	UnitedHealth Group P	AC)
Full Name of Individual (Last, First, Middle A. ILE, MICHAEL L, , ,	Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 14924 PONDVIEW CIRCL	E		06 30 2017
City WAYZATA	State MN	Zip Code 55391-2249	Transaction ID : PR1600597646270 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		576.90
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Prod	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle MICHAUX, MICHAEL D, , ,	Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 742 GOODRICH AVE	01-1-	7.0.1	06 / 0 0 / Y Y Y Y Y 06 30 2017
City SAINT PAUL	State MN	Zip Code 55105-3343	Transaction ID : PR1600598546270 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		300.00
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) GM PCM	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1300.00	P/R Deduction (\$100.00 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. SANDY, LEWIS G, , ,	Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 4800 SUNNYSLOPE ROA			06 / D D / Y Y Y Y Y 06 2017
City EDINA	State MN	Zip Code 55424-1163	Transaction ID : PR1600598746270 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		300.00
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ? Clin Advancement	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1300.00	P/R Deduction (\$100.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional))		1176.90
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11			for each category of the Detailed Summary Page		1 1a		11b	11c	12	
	y information copied from such Reports and Sta for commercial purposes, other than using the r									
	NAME OF COMMITTEE (In Full)									
\rangle	UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	YC)						
A.	Full Name of Individual (Last, First, Middle Initia PETERSON, MATTHEW W, , ,	ll) or Full Or	rganization Name		Date of	Re	ceipt			
	Mailing Address 2260 FOX STREET				2017	Y				
	ORONO	State MN	Zip Code 55356-8316	_					6994627 is Period	0
	FEC ID number of contributing federal political committee.	С						-	576.	90
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ancillary & Ind/Sgt CAO		Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90]	P/R Dedu	uctio	on (\$192	2.30 Bi-W	/eekly)	
в.	Full Name of Individual (Last, First, Middle Initia MALONEY, JEFFREY W, , ,	ll) or Full Or	rganization Name		Date of	Re	ceipt			
	Mailing Address 6327 PASADENA POINT BLVD				06	1	30	/ Y	2017	Y
	City GULFPORT	State FL	Zip Code 33707-3867				-		4354627 is Period	0
	FEC ID number of contributing federal political committee.	С				U			288.4	45
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1249.95] F	P/R Dedu	uctic	on (\$96.	15 Bi-We	ekly)	
С.	Full Name of Individual (Last, First, Middle Initia	ll) or Full Or	rganization Name		Date of	Re	ceipt			
	Mailing Address 1210 COUNTRY CLUB DR	1-			^M 06	/	30		2017	
	City CUTCHOGUE	State NY	Zip Code 11935-1728						24374627 is Period	0
	FEC ID number of contributing federal political committee.	С			<u> </u>	_	y .	9	397.	95
	Name of Employer (for Individual) United HealthCare Services Inc		ıpation (for Individual) Plan CEO		Me	emo	ltem			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 775.57] '	P/R Ded	uctio	on (\$13	2.65 Bi-W	/eekly)	
s	UBTOTAL of Receipts This Page (optional)			<u> </u>			, ,		1263.3	30
т	OTAL This Period (last page this line number or	וy)	••••••	- ►			,			

Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	≭ 11a ☐ 11b ☐ 11c ☐ 12							
			13 14 15 16 17 person for the purpose of soliciting contributions							
· · · ·	g the name and a	ddress of any political committe	e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middl A. KENNEDY, WILLIAM F, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 14 MYRA LN			06 / D D / Y Y Y Y Y 06 30 2017							
City BURLINGTON	State CT	Zip Code 06013-1327	Transaction ID : PR1653443146270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		60.00							
Name of Employer (for Individual) Optum Services, Inc	Occi VP	upation (for Individual) IT	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 260.00	P/R Deduction (\$20.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middl B. BELLAMY, THOMAS J, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 2743 THOMAS AVENUE	SOUTH		06 30 2017							
City MINNEAPOLIS	State MN	Zip Code 55416-4346	Transaction ID : PR1653444346270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		673.05							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) SIs Ops	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2083.30	P/R Deduction (\$224.35 Bi-Weekly)							
Full Name of Individual (Last, First, Middl C. SULLIVAN, DANIEL T, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 57 QUORN HUNT ROAD			06 / ^D 0 / ^Y ^Y ^Y ^Y ^Y ^Y ^Y							
City WEST SIMSBURY	State CT	Zip Code 06092-2524	Transaction ID : PR1653445846270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		115.38							
Name of Employer (for Individual) United HealthCare Services Inc	Occi VP I	upation (for Individual) T	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optiona	l)		848.43							
TOTAL This Period (last page this line num	ber only)									

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
or for commercial purposes, other than using			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle EMERSON, PAUL M, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 18855 MEADOW VIEW BL			06 / D D / Y Y Y Y Y 2017							
City PRIOR LAKE	State MN	Zip Code 55372-3133	Transaction ID : PR1806750346270							
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 576.90							
Name of Employer (for Individual) Optum360 Services Inc	Occ CO	upation (for Individual) O	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle ANDERSON, CATHERINE K, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 57 SIMMONS LANE			06 30 / Y Y Y Y Y 06 30 2017							
City SEVERNA PARK	State MD	Zip Code 21146-1921	Transaction ID : PR1903550746270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		755.61							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Strat Initiv	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1725.61	P/R Deduction (\$251.87 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. BISHOP-HEROUX, KATHLEEN		organization Name	Date of Receipt							
Mailing Address 145 COTTAGE RD	1		06 / D D / Y Y Y Y 2017							
City ENFIELD	State CT	Zip Code 06082-2208	Transaction ID : PR1903560846270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		60.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 260.00	P/R Deduction (\$20.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			1392.51							
TOTAL This Period (last page this line numb	er only)	••••••								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12							
Any information copied from such Reports or for commercial purposes, other than usir				butions						
NAME OF COMMITTEE (In Full)										
> UnitedHealth Group Incorpo	orated PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Mido A. DUFEK, ROBERT J, , ,	lle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 816 PROMONTORY PL	ACE		06 30 2017							
City EAGAN	State MN	Zip Code 55123-2297	Transaction ID : PR1903577146 Amount of Each Receipt this Peri							
FEC ID number of contributing federal political committee.	С			5.00						
Name of Employer (for Individual) Optum Services, Inc	Occu Dir I	upation (for Individual) T	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	P/R Deduction (\$25.00 Bi-Weekly)							
Full Name of Individual (Last, First, Mide B. JOHNSON, CHRISTOPHER T,		rganization Name	Date of Receipt							
Mailing Address 12880 53RD STREET N			06 / D / Y Y Y Y 06 2017							
City STILLWATER	State MN	Zip Code 55082-1063	Transaction ID : PR1903591146270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		117.00							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 507.00	P/R Deduction (\$39.00 Bi-Weekly)							
Full Name of Individual (Last, First, Mide C. SANTELLI, JOHN C, , ,	lle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 25510 BIRCH BLUFF R	1		06 / D D / Y Y 2017							
City EXCELSIOR	State MN	Zip Code 55331-8520	Transaction ID : PR1903622046 Amount of Each Receipt this Peri							
FEC ID number of contributing federal political committee.	С			6.90						
Name of Employer (for Individual) Optum Services, Inc	Occu SVP	upation (for Individual) CIO	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (option	al)		76	8.90						
TOTAL This Period (last page this line nu	mber only)			40.						

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
or for commercial purposes, other than using			erson for the purpose of soliciting contributions to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle A . WEYMOUTH, PAUL D, , ,	e Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 317 WRIGHTS MILL RD			06 / D D / Y Y Y Y 2017								
City COVENTRY	State CT	Zip Code 06238-1559	Transaction ID : PR1903636946270								
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period								
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) IT	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 249.99	P/R Deduction (\$19.23 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. BENNETT, RUSSELL A, , ,	e Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 4 HALSEY AVE			06 30 Y Y Y Y 2017								
City LAGUNA NIGUEL	State CA	Zip Code 92677-5327	Transaction ID : PR2119468046270 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		60.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Bus Dvlp	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 258.87	P/R Deduction (\$20.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. BRYAN, KATHIE L, , ,	e Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 912 JOSHUA PLACE			06 / D D / Y Y Y Y 2017								
City SAN DIEGO	State CA	Zip Code 92154-2537	Transaction ID : PR2119469446270 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		75.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) g Cnslt	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 325.00	P/R Deduction (\$25.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)		192.69								
TOTAL This Period (last page this line num	ber only)	••••••									

SCHEDULE A (FEC Form 3X) DEOEIDTO

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
> UnitedHealth Group Incorpora	ted PAC (I	UnitedHealth Group P/	4C)							
Full Name of Individual (Last, First, Middle I CROSS, RICHARD A, , ,	nitial) or Full C	Organization Name	Date of Receipt							
Mailing Address 11361 DONOVAN ROAD			06 30 2017							
City ROSSMOOR	State CA	Zip Code 90720-2931	Transaction ID : PR2119471846270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		75.00							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) outy Gen Counsel Mgr	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	P/R Deduction (\$25.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I B. GILDERNICK, AMY J, , ,	nitial) or Full C	Organization Name	Date of Receipt							
Mailing Address 2709 WILLIAMS GRANT			06 / D D / Y Y Y Y 06 2017							
City DE PERE	State WI	Zip Code 54115-9456	Transaction ID : PR2119475246270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		60.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) sc Dir Clms	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 260.00	P/R Deduction (\$20.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I C. HANSEN, DAVID M, , ,	nitial) or Full C	Organization Name	Date of Receipt							
Mailing Address 33 VIA CONOCIDO			06 / D D / Y Y Y Y 06 30 2017							
City SAN CLEMENTE	State CA	Zip Code 92673-7044	Transaction ID : PR2119476746270 Amount of Each Receipt this Period							
United HealthCare Services Inc			405.00							
		upation (for Individual) n Pres Ntwk Mgmt	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1755.00	P/R Deduction (\$135.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			540.00							
TOTAL This Period (last page this line numbe	r only)									

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

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
VinitedHealth Group Incorporat	ed PAC (l	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle Ir A. HO, SAMUEL W, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 4220 OCEAN DR			06 30 Y Y Y Y Y 2017							
City	State	Zip Code	Transaction ID : PR2119477946270							
MANHATTAN BEACH	CA	90266-3059	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		576.90							
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item							
United HealthCare Services Inc	Mkt	Grp Chief Clin Off								
Receipt For:	Aggregate	Year-to-Date 🔻								
Primary General		2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
Other (specify) ▼		2499.90	1							
Full Name of Individual (Last, First, Middle Ir B. JEFFREY, BRIAN, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 9 RIMROCK			06 30 2017							
City	State	Zip Code	Transaction ID : PR2119479146270							
IRVINE	CA	92603-3604	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		75.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Ntwk	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼	1							
Primary General Other (specify) ▼		325.00	P/R Deduction (\$25.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle Ir c. MACE-MEADOR, HEATHER M,		rganization Name	Date of Receipt							
Mailing Address 13531 CARLTON OAKS			06 30 / Y Y Y Y Y 06 30 2017							
	State TX	Zip Code	Transaction ID : PR2119482546270							
SAN ANTONIO		78232-4902	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		60.00							
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item							
United HealthCare Services Inc	Dir N	Med Clin Ops								
Receipt For:	Aggregate	Year-to-Date 🔻								
Other (specify)		260.00	P/R Deduction (\$20.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			711.90							
TOTAL This Period (last page this line number	r only)	······								

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using			person for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	4C)							
Full Name of Individual (Last, First, Middle A. NEURURER, SCOTT A, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 23822 VIA MONTE			M M / D D / Y Y Y Y Y 06 30 2017							
City COTO DE CAZA	State CA	Zip Code 92679-4001	Transaction ID : PR2119484946270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		349.56							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Ops	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 985.29	P/R Deduction (\$116.52 Bi-Weekly)							
Full Name of Individual (Last, First, Middle NYGARD, KEITH E, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 1139 E OCEAN BOULEVA #106 City	RD	Zip Code	06 / D D / Y Y Y Y 2017							
	CA	90802-6521	Transaction ID : PR2119485046270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		60.00							
Name of Employer (for Individual) UNITED HEALTHCARE SVS INC		upation (for Individual) npli Cnslt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 260.00	P/R Deduction (\$20.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle PAXSON, LYNDA A, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 3924 E GARNET PL	01-1-	7. 0.4	M M / D D / Y Y Y Y 06 30 2017							
City HIGHLANDS RANCH	State CO	Zip Code 80126-5044	Transaction ID : PR2119485846270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		75.00							
Name of Employer (for Individual) UNITED HEALTHCARE SVS INC	Sr F	upation (for Individual) ield Acct Mgr	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 325.00	P/R Deduction (\$25.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			484.56							
TOTAL This Period (last page this line numb	er only)									

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ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)						
			for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 1						
	y information copied from such Reports and St for commercial purposes, other than using the									
	NAME OF COMMITTEE (In Full)									
$\langle \rangle$	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	.C)						
	Full Name of Individual (Last, First, Middle Init PITTMAN, AUSTIN T, , ,	ial) or Full O	rganization Name	Data of Dessist						
Α.	Mailing Address 4621 EDINA BLVD			Date of Receipt						
				06 30 2017						
	City	State	Zip Code	Transaction ID : PR2119486746270						
	EDINA	MN	55424-1154	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		576.90						
	Name of Employer (for Individual)		upation (for Individual)	Memo Item						
	United HealthCare Services Inc	Bus	Segment CEO							
	Receipt For:	Aggregate	Year-to-Date 🔻							
	Other (specify) V		2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
	Full Name of Individual (Last, First, Middle Init	ial) or Full O	rganization Name							
Β.	TUCKER, STEVEN M, , ,			Date of Receipt						
	Mailing Address 3784 8TH AVENUE			06 / 0 / Y Y Y Y 2017						
	City	State CA	Zip Code	Transaction ID : PR2119492046270						
	SAN DIEGO	CA	92103-4305	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		288.00						
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Regl Affs	Memo Item						
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General			P/R Deduction (\$96.00 Bi-Weekly)						
	Other (specify) v	L	1248.00							
C.	Full Name of Individual (Last, First, Middle Init VANASTEN, SUSAN, , ,	ial) or Full O	rganization Name	Date of Receipt						
	Mailing Address N2249 NICOLE COURT			M M / D D / Y Y Y Y Y 06 30 2017						
	City	State	Zip Code	Transaction ID : PR2119492646270						
	KAUKAUNA	WI	54130-9462	Amount of Each Receipt this Period						
	FEC ID number of contributing									
	federal political committee.	С		120.00						
	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item						
	United HealthCare Services Inc		R Telesls Dir	_						
	Receipt For:	Aggregate	Year-to-Date 🔻							
	Primary General		520.00	P/R Deduction (\$40.00 Bi-Weekly)						
	Other (specify)		520.00							
Γ				984.90						
L_s	UBTOTAL of Receipts This Page (optional)			-						
т	OTAL This Period (last page this line number of	only)	••••••							

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
Any information conied from such Departs a	nd Statomanta m		erson for the purpose of soliciting contributions						
or for commercial purposes, other than using			e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middl A. DAUGHERTY, LINDA D, , ,	e Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 15442 NORTH 19TH WA	Y		06 / Y Y Y Y 2017						
City PHOENIX	State AZ	Zip Code 85022-3329	Transaction ID : PR2119493546270						
	7.2	03022-3329	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		60.00						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
United HealthCare Services Inc	Ass	c Gen Counsel							
Receipt For:	Aggregate	Year-to-Date V							
Primary General Other (specify) ▼		260.00	P/R Deduction (\$20.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middl B. WRIGHT, GREGORY, , ,	e Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 10471 STRAND TERRAC	Æ		06 30 2017						
City	State	Zip Code	Transaction ID : PR2119494146270						
SANTA ANA	CA	92705-1495	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		75.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Ntwk	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	P/R Deduction (\$25.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middl C. MASON, JOHN TYLER, J, ,	e Initial) or Full C	Prganization Name	Date of Receipt						
Mailing Address PO BOX 2083			06 30 2017						
City	State	Zip Code	Transaction ID : PR2126373846270						
CYPRESS	CA	90630-1583	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		576.90						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
United HealthCare Services Inc		Comm	_						
Receipt For:	Aggregate	Year-to-Date ▼	7						
Primary General		0007.00	P/R Deduction (\$192.30 Bi-Weekly)						
Other (specify)		2307.60	1						
SUBTOTAL of Receipts This Page (optional			711.90						
TOTAL This Period (last page this line num	ber only)	••••••							

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	Use separate schedule(s)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 1 ¹							
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements ma g the name and a	l ay not be sold or used by any p ddress of any political committe	13 14 15 16 1 erson for the purpose of soliciting contributions to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middl BURKE, FORREST G, , ,	e Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 380 LEAF STREET			06 30 / Y Y Y Y Y 2017							
City ORONO	State MN	Zip Code 55356-9733	Transaction ID : PR2133132446270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		576.90							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) s PS Labor Trust	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middl HULTGREN, BROR O, , ,	e Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 408 22ND ST			06 / D D / Y Y Y Y Y Y 2017							
City GOLDEN	State CO	Zip Code 80401-2452	Transaction ID : PR2133133246270							
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 576.90							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In CEO	Memo Item							
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middl c. MORISATO, SUSAN C, , ,	e Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 238 ARDMORE ROAD			06 / 0 / Y Y Y Y Y 06 / 30 / 2017							
City DES PLAINES	State IL	Zip Code 60016-2119	Transaction ID : PR2133133846270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		576.90							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Insurance Sols	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optiona	I)		1730.70							
TOTAL This Period (last page this line num	ber only)									

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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	EMIZED RECEIPTS			Detailed Summary Page	×			-	1b	11c		12	<u> </u>		
	y information copied from such Reports and Stat for commercial purposes, other than using the na								se of						
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated														
A.	Full Name of Individual (Last, First, Middle Initial PUTNAM, T JEFFREY, , ,) or Full O	rgan	nization Name		Date o	f Re	ece	eipt						
	Mailing Address 303 ELMWOOD PLACE WEST					Model Job Job <td< td=""></td<>									
	City MINNEAPOLIS	State MN		Zip Code 55419-1349											
	FEC ID number of contributing federal political committee.	С			576.90										
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) up CFO		М	emc	o It	em						
	Receipt For:	Receipt For: Aggregate Year-to-Date ▼ Primary General						on	(\$192	.30 Bi-\	Neek	dy)			
B.	Full Name of Individual (Last, First, Middle Initial SCHIMMELBUSCH, DIANE M, , ,) or Full O	rgan	ization Name		Date o	f Re	ece	eipt						
	Mailing Address 2203 LAKE GARDENS DRIVE					06 / 0 / Y Y Y Y 2017									
	City KINGWOOD	State TX		Zip Code 77339-3629		Trans Amoun		-		PR2133 eceipt t)		
FEC ID number of contributing federal political committee.						75.00									
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) Mgmt		M	emc	o It	em						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 325.00	P	P/R Deduction (\$25.00 Bi-Weekly)									
C.	Full Name of Individual (Last, First, Middle Initial FALKENBERG, ROBERT C, , ,) or Full O	rgan	ization Name		Date o	f Re	ece	eipt						
	Mailing Address 6 LANTANA	1 -				M M 06		L	30	L	20	017 [°]			
	City NEWPORT COAST	State CA		Zip Code 92657-1646		Trans Amoun				PR214			0		
	FEC ID number of contributing federal political committee.	С				<u> </u>		,		,		245.8	2		
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) n CEO		Memo Item									
	Receipt For:	Aggregate	Yea	r-to-Date ▼ 934.78	F	P/R Dec	lucti	ion	(\$81.9	94 Bi-W	/eekl	у)			
s	UBTOTAL of Receipts This Page (optional)							,		9		897.7	2		
т	OTAL This Period (last page this line number onl	y)			-			7		-					

Use separate schedule(s)

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			Use separate schedule(s)	(ch	(check only one)								
			for each category of the Detailed Summary Page		1 1a		11b	11c	12	□			
	on copied from such Reports and Stater prcial purposes, other than using the n												
\	COMMITTEE (In Full)		duress of any political committee	10 30				Ioni Suci					
	Health Group Incorporated	PAC (L	InitedHealth Group PA	C)									
	e of Individual (Last, First, Middle Initia DANNETTE L, , ,) or Full Or	ganization Name		Date of	Ree	ceipt						
	ddress 4200 ALDEN DRIVE				м м 06	/	D D 30	/ Y	2017	Y			
City EDINA		State MN	Zip Code 55416-5010						2994627 is Period	0			
	umber of contributing litical committee.	С					y		576.9	90			
United He	Employer (for Individual) althCare Services Inc		pation (for Individual) eputy Gen Counsel		Me	emo	Item						
Receipt For: Aggre Primary General Other (specify) ▼			Year-to-Date ▼ 2499.90	F	P/R Dedu	uctic	on (\$192	2.30 Bi-W	/eekly)				
Full Name B. <u>GIBSO</u>	e of Individual (Last, First, Middle Initia N, CHRISTINE W, , ,) or Full Or	ganization Name		Date of	Ree	ceipt						
	ldress 8516 29TH AVE N	01-1-	Zin Onde		06	/	30	/ Y	2017	Y			
City NEW HO	PF	State MN	Zip Code 55427-2622		Transaction ID : PR2225166746270 Amount of Each Receipt this Period								
FEC ID n	umber of contributing litical committee.	С		115.38									
Name of Optum Se	Employer (for Individual) rvices, Inc		ipation (for Individual) Strat Initiv		Me	emo	Item						
Receipt Fo		Aggregate	Year-to-Date ▼ , 499.98	F	P/R Dedu	ıctio	ın (\$38.4	46 Bi-We	ekly)				
	of Individual (Last, First, Middle Initia _E, JEAN-FRANCOIS, , ,) or Full Or	ganization Name		Date of	Ree	ceipt						
	dress 7 STRATFORD RD	1			06 ^M	/	30	/ Y	2017	Y			
City FARMINO	GTON	State CT	Zip Code 06032-1444						31364627 is Period	0			
FEC ID number of contributing federal political committee.		С	346.14										
United He	Employer (for Individual) althCare Services Inc	Occu SVP		Me	emo	ltem							
Receipt For: Agg Primary General Other (specify)			Year-to-Date ▼ 1499.94	F	P/R Dedu	uctic	on (\$118	5.38 Bi-W	/eekly)				
SUBTOTAL	of Receipts This Page (optional)						,	,	1038.4	2			
TOTAL This	Period (last page this line number on	ly)	•	-			,	1. ap.					

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FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)							
ILEIVILLED RECEIPIO		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle A. RYAN, JOHN D, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 45 WESTMORELAND LN			06 30 / Y Y Y Y Y							
City NAPERVILLE	State IL	Zip Code 60540-5817	Transaction ID : PR2225819646270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		173.07							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P CInt Mgmt Svc	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 749.97	P/R Deduction (\$57.69 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. SAILOR, ROY THOMAS, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 276 COYOTE WILLOW DR	IVE		M M / D D / Y Y Y Y 06 30 2017							
City COLORADO SPRINGS	State CO	Zip Code 80921-7631	Transaction ID : PR2225819746270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		230.76							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus Dvlp	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 999.96	P/R Deduction (\$76.92 Bi-Weekly)							
Full Name of Individual (Last, First, Middle CONNLY, MICHAEL R, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 570 MONTCALM PL	State	Zin Oode	06 / D D / Y Y Y Y 2017							
City SAINT PAUL	MN	Zip Code 55116-1730	Transaction ID : PR2247625846270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		627.27							
Optum Services, Inc C		upation (for Individual) of Tech Off	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2281.81	P/R Deduction (\$209.09 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			1031.10							
TOTAL This Period (last page this line numb	er only)									

SCHEDULE A (FEC Form 3X) _ _ _ _ _ _ _ _ _ - - - - -

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
UnitedHealth Group Incorporat	ed PAC (I	JnitedHealth Group PA	AC)
Full Name of Individual (Last, First, Middle Ir A. CARCIONE JR, JOSEPH R, , ,	nitial) or Full C	rganization Name	Date of Receipt
Mailing Address 11 CARRIAGE WAY			M M / D D / Y Y Y Y 06 30 2017
City WHITE PLAINS	State NY	Zip Code 10605-5424	Transaction ID : PR2247626846270 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		173.10
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) I Dir	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.10		P/R Deduction (\$57.70 Bi-Weekly)
Full Name of Individual (Last, First, Middle Ir B. KANTOLA, KEVIN DAVID, , ,	nitial) or Full C	rganization Name	Date of Receipt
Mailing Address 7031 HALSTEAD DRIVE			06 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MINNETRISTA	State MN	Zip Code 55364-3201	Transaction ID : PR2247627046270
FEC ID number of contributing	C		Amount of Each Receipt this Period
federal political committee.			
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) IT	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	507.00		P/R Deduction (\$39.00 Bi-Weekly)
Full Name of Individual (Last, First, Middle Ir C. O'BRIEN, DENNIS P, , ,	nitial) or Full C	rganization Name	Date of Receipt
Mailing Address 61 LOUGHLIN AVE	06 / D D / Y Y Y Y 06 30 2017		
City COS COB	State CT	Zip Code 06807-2621	Transaction ID : PR2247627346270 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		576.90
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n CEO	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)			867.00
TOTAL This Period (last page this line number	r only)		

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

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TEMIZED RECEIPTS		for each category of the	✗ 11a │ 11b │ 11c │ 12	
		Detailed Summary Page		
Any information copied from such Reports and S or for commercial purposes, other than using the			rson for the purpose of soliciting contributions	
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	UnitedHealth Group PA	C)	
Full Name of Individual (Last, First, Middle Init A. VERNEY, JEFFERY RICHARD, , ,	Date of Receipt			
Mailing Address 266 WESTLEDGE ROAD	06 30 Y Y Y Y Y 06 30 2017			
City	State	Zip Code	Transaction ID : PR2247627446270	
WEST SIMSBURY	СТ	06092-2017	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		729.63	
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item	
Receipt For:	Aggregate	Year-to-Date ▼	-	
Primary General Other (specify) ▼	ry General General		P/R Deduction (\$243.21 Bi-Weekly)	
Full Name of Individual (Last, First, Middle Init B. GARODIA, SANJAY, , ,	Date of Receipt			
Mailing Address 110 COVINGTON COURT	06 30 Y Y Y Y Y 07 30 2017			
City	State	Zip Code	Transaction ID : PR2247627846270	
OAK BROOK	IL	60523-2574	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		115.38	
Name of Employer (for Individual) Optum Services, Inc	Occ CO	upation (for Individual) O	Memo Item	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98		P/R Deduction (\$38.46 Bi-Weekly)	
Full Name of Individual (Last, First, Middle Init C. OHMAN, DANIEL L, , ,	tial) or Full C	Organization Name	Date of Receipt	
Mailing Address 8970 MOOR PARK RUN	06 / Y Y Y Y 06 30 2017			
City	State	Zip Code	Transaction ID : PR2247628046270	
DULUTH	GA	30097-6621	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		288.45	
Name of Employer (for Individual) United HealthCare Services Inc	re Services Inc Regn CEO General Aggregate Year-to-Date ▼		Memo Item	
Receipt For:			P/R Deduction (\$96.15 Bi-Weekly)	
Primary General Other (specify)				
SUBTOTAL of Receipts This Page (optional)			1133.46	
TOTAL This Period (last page this line number of	only)	· · · · · · · · · · · · · · · · · · ·		

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		Use separate schedule(s)	(check o	nly or	ne)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11b	11c	12	47					
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the										
NAME OF COMMITTEE (In Full)		·····											
UnitedHealth Group Incorporat	ed PAC (I	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle Ir A. PRINCE, JOHN M, , ,	nitial) or Full C	rganization Name	Date	of Re	eceipt								
Mailing Address 546 HARRINGTON ROAD				06 30 2017									
City WAYZATA	State MN	Zip Code 55391-1550					73844627 is Period	D					
FEC ID number of contributing federal political committee.	С						576.9	90					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CEO		Memo	o Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R De	ducti	on (\$192	2.30 Bi-W	/eekly)						
Full Name of Individual (Last, First, Middle Ir B. CRONN, CHRISTOPHER L, , ,	nitial) or Full C	rganization Name	Date	of Re	eceipt								
Mailing Address 1122 COLORADO STREET SUITE 2399	Stata	Zin Code	06		30	/ Y	2017	Y					
City AUSTIN	State TX	Zip Code 78701-2132					22946270)					
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ⁄t Affs Dir		Memo	o Item								
Receipt For:	Aggregate	Year-to-Date ▼											
Primary General Other (specify) ▼		674.98	P/R De	ductio	on (\$63. [,]	46 Bi-We	ekly)						
Full Name of Individual (Last, First, Middle Ir . KEPLEY CARRIER, ANGELA D		rganization Name	Date	of Re	eceipt								
Mailing Address 3219 PENINSULA DRIVE			M 06	;	D D D 30		2017						
City JAMESTOWN	State NC	Zip Code 27282-8717					31774627 is Period	0					
FEC ID number of contributing federal political committee.	С			_	y	9	60.0	00					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops		Memo	o Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 260.00	P/R De	∍ducti	ion (\$20.	.00 Bi-We	ekly)						
SUBTOTAL of Receipts This Page (optional)					,	9	827.2	28					
TOTAL This Period (last page this line number	r only)												

SCHEDULE A (FEC Form 3X) __ _ _ _ _ _ _ _ - - - - -

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12										
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full)													
UnitedHealth Group Incorport	ated PAC (JnitedHealth Group P/	AC)										
Full Name of Individual (Last, First, Middle LEVI-BAUMGARTEN, MARILYN, , ,	Initial) or Full C	organization Name	Date of Receipt										
Mailing Address 4800 W 27TH ST			06 30 2017										
City SAINT LOUIS PARK	State MN	Zip Code 55416-1933	Transaction ID : PR2402317946270										
FEC ID number of contributing			Amount of Each Receipt this Period										
federal political committee.	C		60.00										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 260.00	P/R Deduction (\$20.00 Bi-Weekly)										
Full Name of Individual (Last, First, Middle B. LOGAN, JAKE, , ,	Initial) or Full C	organization Name	Date of Receipt										
Mailing Address 4826 EAST CALLE REDO	NDA		06 30 2017										
City PHOENIX	State AZ	Zip Code 85018-2931	Transaction ID : PR2402318246270										
FEC ID number of contributing	_	03010-2931	Amount of Each Receipt this Period										
federal political committee.	ů l												
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ⁄t Affs Dir	Memo Item										
Receipt For:	Aggregate	Year-to-Date ▼											
Other (specify) V		, 2499.90	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle MCGRATH, STACY S, , ,	Initial) or Full C	organization Name	Date of Receipt										
Mailing Address 5801 CHOWEN AVE S			M M / D D / Y Y Y Y 06 30 2017										
City EDINA	State MN	Zip Code 55410-2759	Transaction ID : PR2402318546270										
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Proj Mgmt	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 222.56	P/R Deduction (\$17.12 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional))		688.26										
TOTAL This Period (last page this line numb	per only)												

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	-	Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12										
			13 14 15 16 17 verson for the purpose of soliciting contributions 10 10 17										
	the name and a	ddress of any political committe	e to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)										
Full Name of Individual (Last, First, Middle CRANLEY, SHELLEY WIKE, , ,	Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 3801 MAURICE COURT			06 / D D / Y Y Y Y Y 2017										
City LAS VEGAS	State NV	Zip Code 89108-5245	Transaction ID : PR2402444446270 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C												
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	P/R Deduction (\$25.00 Bi-Weekly)										
Full Name of Individual (Last, First, Middle B. ANLIKER, JAY M, , ,	Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 4306 MOUNTAIN LANE			06 / Y Y Y Y 06 30 2017										
City	State WI	Zip Code	Transaction ID : PR2402445046270										
	VVI	54401-8543	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		60.00										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) D TPA	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 260.00	P/R Deduction (\$20.00 Bi-Weekly)										
Full Name of Individual (Last, First, Middle BECKER, JAMES H, , ,	Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 378 FERNDALE ROAD W			06 / Y Y Y Y 2017										
City WAYZATA	State MN	Zip Code 55391-1559	Transaction ID : PR2402445146270 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		576.90										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ops	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional))		711.90										
TOTAL This Period (last page this line numb	per only)												

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TEMIZED RECEIPTS		for each category of the Detailed Summary Page	४ 11a ☐ 11b ☐ 11c ☐ 12										
Any information copied from such P	enorts and Statements m	av not be sold or used by any or	13 14 15 16 17 erson for the purpose of soliciting contributions										
or for commercial purposes, other th			to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full) UnitedHealth Group In	corporated PAC (I	JnitedHealth Group PA	NC)										
Full Name of Individual (Last, Fir COLEMAN, JAMES C, , ,	st, Middle Initial) or Full C	organization Name	Date of Receipt										
Mailing Address 4720 WEST 66T			06 / D D / Y Y Y Y 2017										
City EDINA	State MN	Zip Code 55435-1506	Transaction ID : PR2402445246270										
			Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		642.84										
Name of Employer (for Individual) Occ	upation (for Individual)	Memo Item										
United HealthCare Services Inc	Mkt	Grp SVP, Human Capital											
Receipt For:	Aggregate	Year-to-Date V											
Other (specify) ▼		2214.24	P/R Deduction (\$214.28 Bi-Weekly)										
Full Name of Individual (Last, Fir LARSEN, JOHN L, , ,	st, Middle Initial) or Full C	organization Name	Date of Receipt										
Mailing Address 11688 TANGLEV	Mailing Address 11688 TANGLEWOOD DRIVE												
City	State	Zip Code	Transaction ID : PR2402445646270										
EDEN PRAIRIE	MN	55347-4726	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C	576.90											
Name of Employer (for Individual Optum Services, Inc	,	upation (for Individual) Segment CEO	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, Fir C. HIGA, JOY O, , ,	st, Middle Initial) or Full C	Organization Name	Date of Receipt										
Mailing Address 2208 ELM AVEN	1		06 30 / Y Y Y Y 2017										
City	State	Zip Code	Transaction ID : PR2402446246270										
MANHATTAN BEACH	CA	90266-2809	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		90.00										
Name of Employer (for Individual) Occ	upation (for Individual)	Memo Item										
United HealthCare Services Inc		Regl Affs											
Receipt For:	Aggregate	Year-to-Date V											
Other (specify)		390.00	P/R Deduction (\$30.00 Bi-Weekly)										
SUBTOTAL of Receipts This Page	(optional)	•	1309.74										
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b 14		11c 15	12	17				
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	JnitedHealth Group PA	C)											
Full Name of Individual (Last, First, Middle In ALEXANDER, CORY, , ,	itial) or Full C	organization Name	Date of Receipt											
Mailing Address 4203 BRADLEY LANE			06 30 2017 Transaction ID : PR2405428846270											
City CHEVY CHASE	State MD	Zip Code 20815-5234				-				0				
CHEVICHASE		20815-5234	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		576.90											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P External Affairs	Memo Item											
Receipt For:	Anareaste	Year-to-Date ▼	\neg											
Primary General Other (specify) ▼		2499.90	P/I	R Dedu	uctic	on (\$1	92.:	30 Bi-W	/eekly)					
Full Name of Individual (Last, First, Middle In B. SAELENS, KAREN ANN, , ,	itial) or Full C	organization Name	D	ate of	Re	ceipt								
Mailing Address 105 N FLORENCE AVE			06 / 0 / Y Y Y Y Y 06 2017											
City	State Zip Code								64484627	0				
LITCHFIELD PARK	AZ	85340-4424							is Period					
FEC ID number of contributing federal political committee.						-9-	60.	00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		Me	emo	Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 260.00	P/R Deduction (\$20.00 Bi-Weekly)											
Full Name of Individual (Last, First, Middle In C. WEE, KATHLYN G, , ,	itial) or Full C	organization Name	D	ate of	Re	ceipt								
Mailing Address 2225 46TH ST NW				^M 06	/	D 3		/ Y	y y 2017	Y				
City	State	Zip Code		Trans	acti	ion ID	: P	R2408	54504627	0				
WASHINGTON	DC	20007-1032	A	mount	of	Each	Red	ceipt th	is Period					
FEC ID number of contributing federal political committee.	С					,		y	576.	90				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) State SIs OptumI	Memo Item											
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)											
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12										
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	rated PAC (l	JnitedHealth Group P/	AC)										
Full Name of Individual (Last, First, Middl A. CORZINE, JEFFREY SEAN, , ,	e Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 9350 TRACEYTON DRIV	1												
City DUBLIN	State OH	Zip Code 43017-9689	Transaction ID : PR2437119746270 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		60.00										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 260.00	P/R Deduction (\$20.00 Bi-Weekly)										
Full Name of Individual (Last, First, Middl B. FUENTEVILLA, ANA T, , ,	e Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 4815 N CAMINO ESCUE	LA		06 30 2017										
City TUCSON	State AZ	Zip Code 85718-5913	Transaction ID : PR2437119846270 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		707.13										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Seg Chief Med Off	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1935.68	P/R Deduction (\$235.71 Bi-Weekly)										
Full Name of Individual (Last, First, Middl . HAGAN, WILLIAM A, , ,	e Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 6536 E GREYTHORN DR			06 / D D / Y Y Y Y Y 2017										
City SCOTTSDALE	State AZ	Zip Code 85266-6761	Transaction ID : PR2437120046270 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		115.38										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9, Hlth Advancement	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optiona	l)		882.51										
TOTAL This Period (last page this line num	ber only)		1 1 7 1 1 7 1 1 T										

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	11b	11c	12								
Any information copied from such Reports a	nd Statements ma	av not be sold or used by any p	erson for the	purpose of	15 soliciting	16 contribut	17 ions							
or for commercial purposes, other than usin														
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P/	AC)											
Full Name of Individual (Last, First, Midd JOHNSON-MILLS, RITA FAYE, , ,	le Initial) or Full O	rganization Name	Date o	f Receipt										
Mailing Address 235 GOVERNORS WAY			м м 06	06 30 / Y Y Y Y 2017										
City BRENTWOOD	State TN	Zip Code 37027-8931		Transaction ID : PR2437120146270 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		637.11											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	M	emo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2239.08	P/R Ded	luction (\$21	2.37 Bi-W	/eekly)								
Full Name of Individual (Last, First, Midd B. WEISS, JACK S, , ,	le Initial) or Full O	rganization Name	Date o	f Receipt										
Mailing Address 6245 NORTH 75 STREE			M M 06	/ D D 30	/ Y	y y 2017	Ŷ							
City SCOTTSDALE	State AZ	Zip Code 85250-4621		action ID :)							
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ired Svs Regn CMO	Memo Item											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	P/R Deduction (\$25.00 Bi-Weekly)											
Full Name of Individual (Last, First, Midd C. BALTHAZOR, PAUL JOSEPH		rganization Name	Date o	f Receipt										
Mailing Address 9013 FARNSWORTH A	/ENUE NORTH		M M 06	/ D D 30		2017 ^Y	Y							
City BROOKLYN PARK	State MN	Zip Code 55443-1754		saction ID : t of Each R)							
FEC ID number of contributing federal political committee.	С				9	576.9	0							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment COO	M	emo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)											
SUBTOTAL of Receipts This Page (optional	al)			. , .	,	1289.0)1							
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17										
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P	AC)										
Full Name of Individual (Last, First, Middle A. NESS, LAURA L, , ,	Initial) or Full C	organization Name	Date of Receipt										
Mailing Address 10550 PINNACLE WAY			06 30 / Y Y Y Y Y										
City WOODBURY	State MN	Zip Code 55129-4282	Transaction ID : PR2437121546270 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 686.40										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2025.40	P/R Deduction (\$228.80 Bi-Weekly)										
Full Name of Individual (Last, First, Middle COSGRIFF, JOHN W, , ,	Initial) or Full C	organization Name	Date of Receipt										
Mailing Address 1837 SUMMIT LANE			06 / 0 0 / Y Y Y Y 2017										
City MENDOTA HEIGHTS	State MN	Zip Code 55118-4137	Transaction ID : PR2437121646270 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		576.90										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Strategy	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle C. RAINEY, PETER W, , ,	Initial) or Full C	organization Name	Date of Receipt										
Mailing Address 3115 WEST 47 STREET	State	Zip Code	06 / 0 D D / Y Y Y Y Y 06 30 2017										
City MINNEAPOLIS	MN	55410-1857	Transaction ID : PR2437127546270 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		576.90										
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	SVF	upation (for Individual) ? Fin Plng Anlys	Memo Item										
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)										
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$\left \right\rangle$	NAME OF COMMITTEE (In Full)		United Health Crown D											
/	UnitedHealth Group Incorporate			ч с)										
<u>K</u>	Full Name of Individual (Last, First, Middle Init	ial) or Full C	Drganization Name											
Α.	LIPPERT, ROBIN E, , ,			D	Date of Receipt									
	Mailing Address 3643 JENIFER STREET NW				06 30 2017									
	City	State	Zip Code		Transaction ID : PR2439928046270									
	WASHINGTON	DC	20015-1751	A	mount	t of	Each F	Receipt th	nis Per	riod				
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	federal political committee.	U		15		-	-	-9-	_	-				
	Name of Employer (for Individual)	Occ	cupation (for Individual)	1 [M	emc	ltem							
	United HealthCare Services Inc	VP	External Affs											
	Receipt For:	Aggregate	Year-to-Date V											
	Primary General		2499.90	P/F	R Ded	ucti	on (\$19	2.30 Bi-V	Veekly)				
	Other (specify) v		2495.50	4										
	Full Name of Individual (Last, First, Middle Initi	ial) or Full ()	Organization Name	_										
В.	HEYMAN, STEPHEN M, , ,			D	ate of	Re	eceipt							
	Mailing Address 5300 SHERRILL AVENUE				м м 06	1	D 30		2017					
	City	State	Zip Code					PR24442						
	CHEVY CHASE	MD	20815-3720	A	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C					576.90							
	Name of Employer (for Individual) United HealthCare Services Inc	Occ SVI		M	emc	tem								
	Receipt For:	Aggregate	Year-to-Date V	_										
	Primary General	, iggi oguto		P/F	R Ded	uctio	on (\$19	2.30 Bi-W	/eekly))				
	Other (specify) v	L	2499.90											
<u>с</u> .	Full Name of Individual (Last, First, Middle Initi LANGER, DONALD S, , ,	ial) or Full C	Organization Name	D	ate of	Re	eceipt							
2.	Mailing Address 5110 OAK RAMBLING DRIVE			_	M – M	_	D 1	D / Y	Y	Y Y				
					06	L.	30		201	7				
	City	State TX	Zip Code					PR2445						
	КАТҮ		77494-1971	A	mount	t of	Each F	Receipt th	nis Per	riod				
	FEC ID number of contributing federal political committee.	С			_		,	9	3	45.72	2			
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Plan CEO		M	emo	o Item							
	Receipt For:	Aggregate	Year-to-Date V			uoti	on (¢11		Vookhv	•				
	Other (specify)		P/R Deduction (\$115.24 Bi-Weekly)											
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\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Uni	tedHealth Group PA	C)													
A.	Full Name of Individual (Last, First, Middle Initial ADLINGTON SHKABERIN, AMY R, , ,) or Full O	rgar	nization Name		Date of Receipt												
	Mailing Address 4329 EWING AVE S		_			06 30 2017												
	City	State		Zip Code		Transaction ID : PR2445016446270												
	MINNEAPOLIS	MN		55410-1342	Amount of Each Receipt this Period 618.12													
	FEC ID number of contributing federal political committee.	С																
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) nan Capital	Memo Item													
	Receipt For:	Aggregate	Yea	r-to-Date ▼														
	Primary General Other (specify) ▼		-	2321.42	P	/R Ded	uctio	on	(\$206	6.04	4 Bi-We	eekly)						
В.	Full Name of Individual (Last, First, Middle Initial KRAJNOVICH, DANIEL, , ,) or Full O	rgar	nization Name		Date of	Re	ece	ipt									
	Mailing Address 9958 BUTTONDOWN LANE		State Zip Code						06 / D D / Y Y Y Y 06 30 2017									
	City	State		Transaction ID : PR2460167346270														
	ZIONSVILLE	IN	Amount of Each Receipt this Period															
	FEC ID number of contributing federal political committee.	С	60.00															
	Name of Employer (for Individual) United HealthCare Services Inc	Occ Hith		Memo Item														
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 260.00	P/R Deduction (\$20.00 Bi-Weekly)													
с.	Full Name of Individual (Last, First, Middle Initial RENFRO, LARRY C, , ,) or Full O	rgar	nization Name		Date of	Re	ece	ipt									
	Mailing Address 5 DOVE LANE	1				^M 06	1	Ľ	D D 30]	/ Y	2017	Y					
	City	State		Zip Code								68146						
	ANDOVER	MA		01810-2845	- /	Amount	t of	Ea	ach R	ece	eipt this	s Perio	bd					
	FEC ID number of contributing federal political committee.	С						y			9	57	6.90					
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual)		М	emo	o It	em									
	Poppint For:			AIRMAN & CEO Optum	-													
	Primary General Other (specify)	Aggregate	rea	r-to-Date ▼ 2499.90	P	/R Ded	uctio	on	(\$192	2.3() Bi-W	eekly)						
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	NAME OF COMMITTEE (In Full)														
\rangle	UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	AC)											
Α.	Full Name of Individual (Last, First, Middle Initia ORBUCH, DAVID B, , ,	al) or Full O	rganization Name		Date of	Re	ceipt								
	Mailing Address 2220 CEDAR LAKE PKWY				06 / D D / Y Y Y Y Y 2017										
	City MINNEAPOLIS	State MN	Zip Code 55416-3644		Transaction ID : PR2460168246270 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.								-	288	3.45					
	Name of Employer (for Individual) UHC International Services Inc		upation (for Individual) um Exec		Me	emo	Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1249.95	F	P/R Ded	uctio	on (\$96.	15 Bi-We	ekly)						
в.	Full Name of Individual (Last, First, Middle Initia WEXLER, ERIC J, , ,	al) or Full O	rganization Name		Date of	Re	ceipt								
	Mailing Address 7220 WILLOW OAK DR				^M 06	1	D D D 30	/ Y	2017	Y					
		State MI	Zip Code					PR24637		-					
	WEST BLOOMFIELD		48324-3081		Amount	: of	Each R	eceipt th	is Perio	d	_				
	FEC ID number of contributing federal political committee.	С		721.20											
	Name of Employer (for Individual) United HealthCare Services Inc	Occi Bus		Memo Item											
	Receipt For:	Aggregate	Year-to-Date ▼												
	Other (specify) ▼		1874.80		/R Dedu	uctio	on (\$240).40 Bi-W	eekly)						
C.	Full Name of Individual (Last, First, Middle Initia GILL, PETER M, , ,	al) or Full O	rganization Name		Date of	Re	ceipt								
	Mailing Address 8673 SHERWOOD BLUFF				06 ^M	/	30	L	2017 [°]						
	City EDEN PRAIRIE	State MN	Zip Code 55347-3433				-	PR24637 eceipt th							
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .	,		0.00					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Corp Dev		M	emc	tem								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4999.90	P/R Deduction (\$0.00 Bi-Weekly)											
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12										
Any information copied from such Reports and or for commercial purposes, other than using t			13 14 15 16 17 berson for the purpose of soliciting contributions to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (JnitedHealth Group P	AC)										
Full Name of Individual (Last, First, Middle SCHICK, SUE, , ,	Initial) or Full C	organization Name	Date of Receipt										
Mailing Address 1220 DENBIGH LANE			06 30 2017										
City WAYNE	State PA	Zip Code 19087-4644	Transaction ID : PR2480620546270 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		576.90										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef Growth Off	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle B. ABBOTT, CHRISTOPHER MARK		organization Name	Date of Receipt										
Mailing Address 12700 MUNDOMAR DR			06 / D D / Y Y Y Y 2017										
City AUSTIN	State TX	Zip Code 78739-1542	Transaction ID : PR2484541546270 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С												
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Plan CEO	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 473.50	P/R Deduction (\$40.50 Bi-Weekly)										
Full Name of Individual (Last, First, Middle C. BURNS, MATTHEW A, , ,	Initial) or Full C	organization Name	Date of Receipt										
Mailing Address 2724 BISON DRIVE	1		06 / D D / Y Y Y Y 2017										
City EDMOND	State OK	Zip Code 73034-3475	Transaction ID : PR2484541746270 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		375.00										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1625.00	P/R Deduction (\$125.00 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional).			1073.40										
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
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or for commercial purposes, other than using	ine name and a	duress of any political committee	e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle A. PHILLIPS, MARK A, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1760 LUCY RIDGE CT			06 30 / Y Y Y Y 2017						
City CHANHASSEN	State MN	Zip Code 55317-7661	Transaction ID : PR2484542646270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		576.90						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 SIs	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1923.00	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle MANDERFELD, THOMAS B, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 3760 WEST CALHOUN PA			06 / D / Y Y Y Y Y 2017						
City MINNEAPOLIS	State MN	Zip Code 55410-1118	Transaction ID : PR2486697946270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Capital Mkt Comm	Memo Item						
Receipt For:		Year-to-Date ▼							
Other (specify) ▼		520.00	P/R Deduction (\$40.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle MCMAHON, DIRK C, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 60 WILDHURST ROAD	04-1	Zin Onde	M M / D D / Y Y Y Y Y 30 2017						
City EXCELSIOR	State MN	Zip Code 55331-8461	Transaction ID : PR2491457046270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		576.90						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Grp Pres & COO	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			1273.80						
TOTAL This Period (last page this line numb	er only)								

Use separate schedule(s)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12							
			13 14 15 16 17							
or for commercial purposes, other than usin			erson for the purpose of soliciting contributions to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (L	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Mide NATHAN, DONALD H, , ,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 275 GREENWICH STR	1		06 / D D / Y Y Y Y 06 30 2017							
	State NY	Zip Code	Transaction ID : PR2491457346270							
NEW YORK		10007-2150	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		576.90							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 Chief Comm Off	Memo Item							
Receipt For:	Aggregate	Year-to-Date 🔻								
Other (specify) ▼		2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Mide B. SULLIVAN, KATHRYN M, , ,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 530 N LAKE SHORE DR	R # 2309		06 30 2017							
City CHICAGO	State IL	Zip Code 60611-7435	Transaction ID : PR2491457546270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	ů l									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) D E&I Regions	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1844.04	P/R Deduction (\$242.76 Bi-Weekly)							
Full Name of Individual (Last, First, Mide C. SMITH, KARA V, , ,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 610 CRESTWOOD DRI	VE		06 30 / Y Y Y Y 2017							
City ALEXANDRIA	State VA	Zip Code 22302-2533	Transaction ID : PR2540175346270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		576.90							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (option	ial)	••••••	1882.08							
TOTAL This Period (last page this line nu	mber only)	••••••								

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	≭ 11a 11b 11c 12							
Any information copied from such Reports an or for commercial purposes, other than using	d Statements ma	ay not be sold or used by any p	13 14 15 16 17 erson for the purpose of soliciting contributions to collicit contributions from such committee							
NAME OF COMMITTEE (In Full)	the name and a	doress of any political committee								
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group PA	AC)							
Full Name of Individual (Last, First, Middle PURDY, PATRICIA A, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 7417 LYNNHURST STRE	ET		06 / Y Y Y Y Y 06 30 2017							
City CHEVY CHASE	State MD	Zip Code 20815-3101	Transaction ID : PR2541300646270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		576.90							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P External Affs	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. TIERNEY, JOELLE M, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 5710 TAYCHOPERA RD			06 / 0 2017							
City MADISON	State WI	Zip Code 53705-1020	Transaction ID : PR2541300746270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		329.67							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1071.42	P/R Deduction (\$109.89 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. VERSAGGI, JOHN, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 800 ALBANY AVENUE			06 / D D / Y Y Y Y 06 30 2017							
City ALEXANDRIA	State VA	Zip Code 22302-3501	Transaction ID : PR2541300846270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		288.48							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1250.08	P/R Deduction (\$96.16 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			1195.05							
TOTAL This Period (last page this line numb	per only)									

SCHEDULE A (FEC Form 3X) -

Use separate schedule(s)

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)						
ILEIVIIZED KEGEIPIS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle HOSTETLER, BRENDAN, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2309 W WINNEMAC AVE	1		06 30 / Y Y Y Y Y						
City CHICAGO	State IL	Zip Code 60625-1817	Transaction ID : PR2542541946270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		190.38						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) t Affs Dir	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 674.98	P/R Deduction (\$63.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. RAMSAY, RICHARD E, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 543 E LURAY AVE			M M / D D / Y Y Y Y Y 06 30 2017						
City ALEXANDRIA	State VA	Zip Code 22301-1605	Transaction ID : PR2542542246270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		150.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00	P/R Deduction (\$50.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. SPENCER, IPYANA, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 4226 40TH STREET NOP	1		06 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
City ARLINGTON	State VA	Zip Code 22207-4610	Transaction ID : PR2542542346270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		90.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) /ktg Bus Dev	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 390.00	P/R Deduction (\$30.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)		430.38						
TOTAL This Period (last page this line num	ber only)								

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	-		(check only one)							
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
	Information copied from such Reports and Statements may not be sold or used by any promoved of any political committee commercial purposes, other than using the name and address of any political committee MME OF COMMITTEE (In Full) InitedHealth Group Incorporated PAC (UnitedHealth Group PAC (UnitedHealth Group PAC AU, ANNE, , , , aliling Address 9905 WOODLAND DRIVE by ILVER SPRING									
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)							
	Initial) or Full C	organization Name								
			Date of Receipt							
Mailing Address 9905 WOODLAND DRIVE			06 30 2017							
City			Transaction ID : PR2543582546270							
SILVER SPRING	MD	20902-4047	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		186.81							
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item							
United HealthCare Services Inc	Exte	ernal Affs Dir								
	Aggregate	Year-to-Date ▼								
		690.46	P/R Deduction (\$62.27 Bi-Weekly)							
			-							
B. ALTER, JEFFREY D, , ,	Initial) or Full C	organization Name	Date of Receipt							
			06 / 06 / Y Y Y Y Y 06 30 / 2017							
			Transaction ID : PR2552960246270							
	_		Amount of Each Receipt this Period							
federal political committee.	C		576.90							
Name of Employer (for Individual) United HealthCare Services Inc			Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼	1							
		2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
		Organization Name	Date of Receipt							
Mailing Address 4534 MYSTIQUE WAY			06 30 2017							
City		Zip Code	Transaction ID : PR2552961346270							
ROSWELL	GA	30075-2087	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		105.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clnt Mgmt NA Accts	Memo Item							
Receipt For:		Year-to-Date ▼	—							
Other (specify)		455.00	P/R Deduction (\$35.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			868.71							
TOTAL This Period (last page this line numb	er only)	······								

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using t									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	(C)						
Full Name of Individual (Last, First, Middle FLANNERY, SCOTT F , , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 8508 TRELADY CT			06 / D D / Y Y Y Y 2017						
City PLANO	State TX	Zip Code 75024-6827	Transaction ID : PR2552962346270						
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) I Plan CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 507.00	P/R Deduction (\$39.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle HANNAN, CLAIRE L, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 25932 PORTAFINO DRIVE			06 / D D / Y Y Y Y 2017						
City MISSION VIEJO	State CA	Zip Code 92691-5716	Transaction ID : PR2552962746270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		117.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 507.00	P/R Deduction (\$39.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle KIDAMBI, NARASIMHAN, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 18477 85TH AVE N			06 / D D / Y Y Y Y 2017						
City MAPLE GROVE	State MN	Zip Code 55311-1663	Transaction ID : PR2552963846270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Bus Anlys	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 260.00	P/R Deduction (\$20.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			. 294.00						
TOTAL This Period (last page this line number	er only)	••••••							

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116				or each category of the Detailed Summary Page	×	11a 13] 11k 14	-	11c 15	12	17				
or	y information copied from such Reports and State for commercial purposes, other than using the na					or the		pose	e of s	oliciting	contribu	tions				
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Jni	tedHealth Group PA	C)											
Α.	Full Name of Individual (Last, First, Middle Initial) LOVELADY, JOHN H, , ,	0	Date of	Re	eceip	ot										
	Mailing Address 6268 ORCHARD PARK				06 30 2017											
	City	Zip Code	Transaction ID : PR2552964246270													
	FRISCO	ТХ		75034-5126	_ A	mount	of	Eac	ch Re	ceipt th	is Period					
	FEC ID number of contributing federal political committee.					576.90										
	Name of Employer (for Individual) United HealthCare Services Inc	Occi Reg	•	ion (for Individual) EO		Me	emo	b Ite	m							
	Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 2499.90							on (\$	\$192.3	30 Bi-W	/eekly)					
	Full Name of Individual (Last, First, Middle Initial) STREIT, BARRY R, , ,	or Full O	rgar	nization Name		Date of	Re	eceip	ot							
	Mailing Address 5421 KELLOGG AVENUE					06 30 / Y Y Y Y 2017										
	City EDINA	State MN		Transaction ID : PR2552966746270 Amount of Each Receipt this Period												
	FEC ID number of contributing federal political committee.	C					173.07									
	Name of Employer (for Individual) United HealthCare Services Inc	Occ M&		Memo Item												
	Receipt For: A Primary General Other (specify) ▼	ggregate	Yea	r-to-Date ▼ 749.97	P/	R Dedu	uctic	on (S	\$57.69	9 Bi-We	ekly)					
с.	Full Name of Individual (Last, First, Middle Initial) NAASZ, SCOTT A, , ,	or Full O	rgar	nization Name		Date of	Re	eceip	ot							
	Mailing Address 3311 WILDS RIDGE NW					м м 06	1	D	30 ^D	/ Y	2017 [°]	Y				
		State		Zip Code							47474627					
	PRIOR LAKE	MN		55372-4540	A	mount	of	Eac	ch Re	ceipt th	is Period					
	FEC ID number of contributing federal political committee.	С				132.87										
	Name of Employer (for Individual) United HealthCare Services Inc	Occi VP (ion (for Individual) Svs		Me	emo	o Ite	em							
	Receipt For: A Primary General Other (specify)	ogregate	Yea	r-to-Date ▼ 424.32	P/	'R Ded	uctio	on (\$44.2	9 Bi-We	eekly)					
S	UBTOTAL of Receipts This Page (optional)										882.	84				
т	OTAL This Period (last page this line number only	/)			j			- -		,						

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			Detailed Summary Page	×			11b		11c	12	<u> </u>			
An	y information copied from such Reports and State	ements ma	y not be sold or used by any p	erson f	13 for the	purr	14 pose	e of s	15 oliciting	16 contribu	ions			
	for commercial purposes, other than using the na													
\backslash	NAME OF COMMITTEE (In Full)													
/	UnitedHealth Group Incorporated	`	•	4C)										
۹.	Full Name of Individual (Last, First, Middle Initial) RAYBURN, MONICA L, , ,) or Full O	rganization Name		Date of	Re	ceip	ot						
	Mailing Address 5127 JACKSON PONDS CT			M M / D D / Y Y Y Y 06 30 2017										
	City	State	Zip Code	Transaction ID : PR2553475146270										
	SUGAR LAND	ТХ	77479-4656		Amount	of	Eac	h Re	ceipt th	is Period				
	FEC ID number of contributing federal political committee.	С					-		-9	117.	00			
	Name of Employer (for Individual) Optum Services, Inc						o Itei	m						
	Peopint For:		Year-to-Date ▼											
	Primary General Other (specify) ▼	General							0 Bi-We	eekly)				
	Full Name of Individual (Last, First, Middle Initial) THOMAS, RICHARD D, , ,) or Full O	rganization Name		Date of	Re	ceip	ot						
	Mailing Address 5121 DUPONT AVENUE SOUTH				06 / ^Y Y Y Y Y 2017									
	City	State	Zip Code		Transaction ID : PR2553475446270									
-	MINNEAPOLIS	MN	55419-1151	/	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			291.00 Memo Item									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt											
	Primary General	Aggregate	Year-to-Date ▼	P/	′R Dedu	JCtic	on (\$	\$97.0	0 Bi-We	ekly)				
	Other (specify) v		1261.00											
	Full Name of Individual (Last, First, Middle Initial) VOJTA, DENEEN, , ,) or Full O	rganization Name		Date of	Re	ceip	ot						
	Mailing Address 5201 KELLOGG AVENUE				^M 06	1	D	30 ^D	/ Y	ү ү 2017	Y			
	City EDINA	State MN	Zip Code 55424-1304							47554627	0			
-			00424-1004	/	Amount	t of	Eac	h Re	ceipt th	is Period				
	FEC ID number of contributing federal political committee.	С				_	y		y	576.	90			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Bus Initiv Clin Aff		M	emo	o Ite	m						
	Poppint For:	-	Year-to-Date ▼	\neg										
	Primary General Other (specify)		2499.90] ^{P,}	/R Ded	uctio	ion (\$192.	30 Bi-W	/eekly)				
s	UBTOTAL of Receipts This Page (optional)			 ▶			7		9	984.9	90			
тс	OTAL This Period (last page this line number onl	y)	·····				-		-					

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12						
Any information copied from such Reports and or for commercial purposes, other than using th									
NAME OF COMMITTEE (In Full)	io name dhù a	aarooo or arry political committee	to solicit contributions from such confinittee.						
UnitedHealth Group Incorporat	ted PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle In ECKERT, CHRISTINE A, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 33 BRIGHTVIEW DRIVE			06 / D D / Y Y Y Y 06 2017						
City WEST HARTFORD	State CT	Zip Code 06117-2002	Transaction ID : PR2553783246270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		23.07						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) rchitecture Cnslt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 299.97	P/R Deduction (\$7.69 Bi-Weekly)						
Full Name of Individual (Last, First, Middle II FLAGSTAD, KARSTEN S, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 13420 JAY ST NW			06 / D D / Y Y Y Y Y 2017						
City ANDOVER	State MN	Zip Code 55304-4015	Transaction ID : PR2554013046270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		576.90						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Info Tech	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle In REIDY, GREGORY D, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 4836 W SUNSET BLVD	01-1		06 / Y Y Y Y Y 30 / 2017						
City TAMPA	State FL	Zip Code 33629-6448	Transaction ID : PR2554013346270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		142.41						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 382.82	P/R Deduction (\$47.47 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			742.38						
TOTAL This Period (last page this line numbe	r only)								

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 1	H	11b	11c	12	<u> </u>		
Any information copied from such Reports ar or for commercial purposes, other than using				the p						
NAME OF COMMITTEE (In Full)				5511						
UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle CLUTE, DANIEL J, , ,	e Initial) or Full O	rganization Name	Dat	e of F	Receipt					
Mailing Address 7756 N 85TH STREET	1			06	/ D 3		у у 2017	Y		
City OMAHA	State NE	Zip Code 68122-1281				: PR2560 Receipt th		0		
FEC ID number of contributing federal political committee.	С				-gr. 1		115.3	38		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) d Dir		Mer	no Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 499.98	P/R	Deduc	tion (\$3	8.46 Bi-W	eekly)			
Full Name of Individual (Last, First, Middle GIANCURSIO, DONALD J, , ,	e Initial) or Full O	rganization Name	Dat	e of F	Receipt					
Mailing Address 72 MIDNIGHT RIDGE DR		Zin Onde		06	/ D 3		2017	Y		
City LAS VEGAS	State NV	Zip Code 89135-1680		Transaction ID : PR2560064946270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		576.90							
Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) Plan CEO		Mer	no Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R I	Deduc	tion (\$1	92.30 Bi-V	Veekly)			
Full Name of Individual (Last, First, Middle C. JONES, JERI L, , ,	e Initial) or Full O	rganization Name	Dat	e of F	Receipt					
Mailing Address 2932 E MADISON VISTA	1		_ L	06		0	ү ү 2017			
City PHOENIX	State AZ	Zip Code 85016-4981				Receipt th		0		
FEC ID number of contributing federal political committee.	С			_	y .	, , , , , , , , , , , , , , , , , , ,	288.4	45		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n CEO		Mer	no Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 865.35	P/R	Deduo	ction (\$9	96.15 Bi-W	eekly)			
SUBTOTAL of Receipts This Page (optional)				,	. ,	980.	73		
TOTAL This Period (last page this line num	ber only)									

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	MIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12	17		
	information copied from such Reports and Sta or commercial purposes, other than using the n											
	IAME OF COMMITTEE (In Full) JnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	AC)								
	ull Name of Individual (Last, First, Middle Initia KUNEMUND, GREGG J, , ,	l) or Full Or	rganization Name		Date of	Red	ceipt					
N	Aailing Address 9040 RIVERBEND MANOR				м м 06	/	D D D 30	/ Y	ү ү 2017	Y		
	Sity ALPHARETTA	State GA	Zip Code 30022-1813						6534627 is Period	0		
	EC ID number of contributing ederal political committee.	С					7	-	309.	06		
ι	lame of Employer (for Individual) Jnited HealthCare Services Inc		ipation (for Individual) Plan CEO		Me	emo	ltem					
F	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1160.71		P/R Dedu	uctic	on (\$103	3.02 Bi-W	/eekly)			
	ull Name of Individual (Last, First, Middle Initia LIPPMAN, SHELDON, , ,	l) or Full Or	rganization Name		Date of	Ree	ceipt					
_	Aailing Address 55 CLIFFIELD ROAD				^M 06	/	D D 30	/ Y	2017	Y		
	Dity BEDFORD	State NY	Zip Code 10506-1210				-		6544627	0		
F	EC ID number of contributing ederal political committee.	С	Amount of Each Receipt this Period									
۔ ۲ ا	Name of Employer (for Individual) Inited HealthCare Services Inc	Occu Med	upation (for Individual) I Dir		Me	emo	Item					
F	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 1261.00	P	/R Dedu	ıctio	on (\$97.0	00 Bi-We	ekly)			
	ull Name of Individual (Last, First, Middle Initia	l) or Full Or	rganization Name		Date of	Ree	ceipt					
_	Aailing Address 33 FOUR SEASONS DRIVE				^M 06	/	^D 30		2017 [°]			
	Sity ALTON	State NH	Zip Code 03809-4872						06564627 is Period	0		
	EC ID number of contributing ederal political committee.	С					7	. ,	291.	00		
ι	lame of Employer (for Individual) Jnited HealthCare Services Inc	Occupation (for Individual) SVP Act Underwriting				emo	Item					
F	Receipt For: Primary General Other (specify)	Aggregate Y	Year-to-Date ▼ 1261.00		P/R Dedu	uctic	on (\$97.	00 Bi-We	ekly)			
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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)						
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle A. MILICH, DAVID, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2702 BIRCHMERE COUR	Т		M M / D D / Y Y Y Y 06 30 2017						
City KATY	State TX	Zip Code 77450-1303	Transaction ID : PR2560066046270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		319.65						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1114.95	P/R Deduction (\$106.55 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. NOEL, TIMOTHY J, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 4316 FREMONT AVENUE			06 / D D / Y Y Y Y Y 2017						
City MINNEAPOLIS	State MN	Zip Code 55409-1721	Transaction ID : PR2560398846270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		576.90						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Prd	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle CRONIN, JAMES, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 241 WALLACE RD			06 / D D / Y Y Y Y 06 30 2017						
City BEDFORD	State NH	Zip Code 03110-5144	Transaction ID : PR2560821146270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		729.63						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ops	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1838.19	P/R Deduction (\$243.21 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional))		1626.18						
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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		× 11a		11b	11c	12	<u> </u>			
	y information copied from such Reports and S for commercial purposes, other than using the												
	NAME OF COMMITTEE (In Full)	name anu a	duress of any political committee	5 10 5			Julions	nom suci	T COMMIN	lee.			
	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)									
Α.	Full Name of Individual (Last, First, Middle Init LUND, BRIAN W, , ,	tial) or Full O	rganization Name		Date of Receipt								
	Mailing Address 464 EAST NORTH AVE				06 / D D / Y Y Y Y 06 30 2017								
	City GRANTSBURG	State WI	Zip Code 54840-7423	_					45764627 iis Period				
	FEC ID number of contributing federal political committee.	С					-y		117.	00			
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Dir T	upation (for Individual) Tax		М	emo	o Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 507.00	ו	P/R Ded	lucti	ion (\$39	.00 Bi-We	eekly)				
в.	Full Name of Individual (Last, First, Middle Init CAVANAUGH, LARRY W, , ,	tial) or Full O	organization Name		Date of	f Re	eceipt						
	Mailing Address 520 NE 20TH ST # 1010			06 / 30 / 2017 Transaction ID : PR2563211046270									
	City WILTON MANORS	State FL	Zip Code 33305-2162							-			
	FEC ID number of contributing federal political committee.	C	33303-2102		Amoun	t of	Each F	Receipt th	iis Period 117.	_			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ben Govt Dntl SIs Mgr		М	emo	o Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 507.00	F	P/R Ded	ucti	on (\$39	.00 Bi-We	eekly)				
с.	Full Name of Individual (Last, First, Middle Init BARTON, JACQULYN M, , ,	tial) or Full O	organization Name		Date of	f Re	eceipt						
	Mailing Address 1587 112 TH COURT WEST	State	Zin Code		06 M	J.	30		2017				
	City INVER GROVE HEIGHTS	State MN	Zip Code 55077-5412	_					21124627 iis Period	-			
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .	, ,	300.	00			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Human Capital Partner	Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1300.00		P/R Dec	lucti	ion (\$10	0.00 Bi-V	Veekly)				
⊢	UBTOTAL of Receipts This Page (optional)			• -		-	, , , ,	, ,	534.	00			

SCHEDULE A (FEC Form 3X) _____

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)										
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17										
			person for the purpose of soliciting contributions te to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	rated PAC (l	JnitedHealth Group P	AC)										
Full Name of Individual (Last, First, Middl A. MACKENZIE, ANDREW C, , ,	e Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 1912 IRVING AVE S			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y										
City MINNEAPOLIS	State MN	Zip Code 55403-2823	Transaction ID : PR2564297146270 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		576.90										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CMO	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middl B. SWANSON, STEPHEN E, , ,		rganization Name	Date of Receipt										
Mailing Address 3001 HUNTINGTON COL			06 / ^y y y y y 2017										
City KATY	State TX	Zip Code 77493-1159	Transaction ID : PR2564297346270										
FEC ID number of contributing federal political committee.	С	11493-1139	Amount of Each Receipt this Period										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP Acct Mgmt	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 507.00	P/R Deduction (\$39.00 Bi-Weekly)										
Full Name of Individual (Last, First, Middl C. WILLSON, JOSH A, , ,	e Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 201 ADAMS CT			06 / D D / Y Y Y Y 2017										
City COLLEYVILLE	State TX	Zip Code 76034-6811	Transaction ID : PR2564802546270 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		137.40										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ben KA SB RVP SIs	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 404.60	P/R Deduction (\$45.80 Bi-Weekly)										
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	DMMITTEE (In Full)										
	alth Group Incorporated	I PAC (L	JnitedHealth Group PA	C)							
	Individual (Last, First, Middle Initia, CHRISTOPHER CHARLES, ,		rganization Name	Date of	Receipt						
Mailing Addre	ss 10618 WEST RIVER ROAD			06 30 2017							
City BROOKLYN	PARK	State MN	Zip Code 55443-1233		action ID : PR2564 of Each Receipt t						
FEC ID numb federal politica	per of contributing al committee.	С				576.9	0				
United Health	bloyer (for Individual) Care Services Inc		upation (for Individual) Cnsmr & Cust Experience	Me	mo Item						
Receipt For: Primary Other (s	General Specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Dedu	uction (\$192.30 Bi-\	Veekly)					
	Individual (Last, First, Middle Initia PAUL DANIEL, , ,	l) or Full O	rganization Name	Date of	Receipt						
Mailing Addre	ss 18430 62ND PLACE NORTH			06		2017	Ŷ				
City MAPLE GRO	VF	State MN	Zip Code 55311-4585		of Each Receipt t						
	per of contributing	С				291.00	0				
	oloyer (for Individual) Care Services Inc		upation (for Individual) troller Mkt Grp	Me	mo Item						
Receipt For: Primary Other (s	General General	Aggregate	Year-to-Date ▼ 1261.00	P/R Dedu	uction (\$97.00 Bi-W	eekly)					
	Individual (Last, First, Middle Initia KATHERINE L, , ,	ll) or Full O	rganization Name	Date of	Receipt						
	SS 22408 FITZGERALD DRIVE			06	30	2017					
City LAYTONSVII	LLE	State MD	Zip Code 20882-2301		of Each Receipt t						
FEC ID numb	per of contributing al committee.	С			, , ,	117.00	0				
United Health	bloyer (for Individual) Care Services Inc		upation (for Individual) /P of Acct Mgmt	Me	emo Item						
Receipt For: Primary Other (s		Aggregate	Year-to-Date ▼ 507.00	P/R Dedu	uction (\$39.00 Bi-W	eekly)					
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<u> </u>	or commercial purposes, other than using the na	ame and ad	doress of any politi	cal committee	to solicit co	ontrib	utions fr	om sucr	1 committ	ee.				
	IAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (L	JnitedHealth	Group PA	C)									
	ull Name of Individual (Last, First, Middle Initial MARDEN, PAUL O, , ,) or Full Or	rganization Name		Date of	of Re	ceipt							
N	lailing Address 718 HICKORY HILL RD				06 30 2017									
	Sity FRANKLIN LAKES	State NJ	Zip Code 07417-1707						30334627 is Period	0				
	EC ID number of contributing ederal political committee.	С					7		395.6	61				
ι	lame of Employer (for Individual) Inited HealthCare Services Inc	upation (for Individu Plan CEO	al)		Nemo	Item								
F	Receipt For: Primary General Other (specify) ▼	Year-to-Date ▼	785.61	P/R De	ductio	on (\$131	.87 Bi-W	/eekly)						
	ull Name of Individual (Last, First, Middle Initial MOQUIST, DARREN C, , ,) or Full Or	rganization Name		Date of	of Re	ceipt							
_	Aailing Address 5004 ARDEN AVE	1			06 / 30 / 2017 Transaction ID : PR2564803446270									
	Sity EDINA	State MN	Zip Code 55424-1314				-		0344627 is Period)				
	EC ID number of contributing ederal political committee.	С				-		645.6	60					
	lame of Employer (for Individual) Inited HealthCare Services Inc		upation (for Individu Segment CFO		Nemo	Item								
F		Aggregate	Year-to-Date 🔻		1									
	Other (specify) ▼		4 • • 4 •	2202.40	P/R Dee	ductio	on (\$215	.20 Bi-W	(eekly)					
	ull Name of Individual (Last, First, Middle Initial O'HARE, TAMMY A, , ,) or Full Or	rganization Name		Date of	of Re	ceipt							
_	Aailing Address 2420 SAINT GEORGE WAY	01-1-			06		30	L	2017 [°]					
	Sity BROOKEVILLE	State MD	Zip Code 20833-3265				-		80394627 is Period	U				
	EC ID number of contributing ederal political committee.	С					y	,	117.(00				
ι	lame of Employer (for Individual) Jnited HealthCare Services Inc		upation (for Individu /P SIs	al)	Memo Item									
F	Receipt For: Primary General Other (specify)	Year-to-Date V	507.00	P/R De	ducti	on (\$39.(00 Bi-We	ekly)						
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a]11b	11c	12	<u> </u>						
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorp	orated PAC (l	JnitedHealth Group P	AC)											
Full Name of Individual (Last, First, Mid A. BERNS, DEBRA J, , ,	ddle Initial) or Full O	rganization Name	Date	of Re	eceipt									
Mailing Address 3209 GALLERIA				06 30 2017										
City EDINA	State MN	Zip Code 55435-2556					30404627 is Period)						
FEC ID number of contributing federal political committee.	С					-	576.9	90						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) of CompInc/Ethics Off		Memo	o Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)											
Full Name of Individual (Last, First, Mid B. WICKS, TIMOTHY A, , ,	ddle Initial) or Full O	rganization Name	Date	of Re	eceipt									
Mailing Address 2600 WEST LAFAYET PO BOX 454			06 / 0 / Y Y Y Y 2017											
City EXCELSIOR	State MN	Zip Code 55331-9417		Transaction ID : PR2565448646270 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С						115.3	38						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Group CFO	Memo Item											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R De	ducti	on (\$38.4	46 Bi-We	ekly)							
Full Name of Individual (Last, First, Mic c. ZAMORE, DENISE V, , ,	ddle Initial) or Full O	rganization Name	Date	of Re	eceipt									
Mailing Address 180 FELT ROAD			M 06		30	/ Y	үүү 2017	Y						
City SOUTH WINDSOR	State CT	Zip Code 06074-3864					12954627 is Period	0						
FEC ID number of contributing federal political committee.	С			_	y .	, y	288.4	15						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ssc Gen Counsel	Memo Item											
Receipt For: Primary General Other (specify)	Year-to-Date ▼ 1249.95	P/R De	∍ducti	ion (\$96.	15 Bi-We	eekly)								
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		Detailed Summary Page		13	\square	14	-	15		16	17			
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$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (I	Uni	tedHealth Group PA	AC)									
<u>/</u>	Full Name of Individual (Last, First, Middle Initia	l) or Full C	Orgai	nization Name	Date of Receipt									
Α.	ARNONE, WENDY D, , ,				—		Ке							
	Mailing Address 5243 E DESERT PARK LANE					06	1		30	/ Y		017	Y	
	City	State		Zip Code			acti	ion		R2568	1.00	1.00)	
	PARADISE VALLEY	AZ		85253-3015		Amount							-	
	FEC ID number of contributing federal political committee.	С						- -			_	576.9	0	
	Name of Employer (for Individual) United HealthCare Services Inc	ion (for Individual) EO		Me	emo	o Ite	əm							
	Receipt For:	Aggregate	Yea	r-to-Date ▼										
	Primary General Other (specify) ▼		-	2499.90	P	/R Ded	uctio	on ((\$192.	30 Bi-V	Veek	dy)		
в.	Full Name of Individual (Last, First, Middle Initia PARRILLO, CHRISTOPHER A, , ,	l) or Full C	rgar	nization Name		Date of	Re	ecei	pt					
	Mailing Address 9501 WEXCROFT DRIVE			-		^M 06	/	ľ	30	/ Y)17	Y	
	City	State		Zip Code		Trans	acti	ion	ID : F	R2571	7782	246270		
	BRENTWOOD	TN		37027-3824		Amount	of	Ea	ch Re	ceipt th	nis P	Period		
	FEC ID number of contributing federal political committee.	С						,		-9-	_	115.3	8	
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) k Contrctng		Me	emo	o Ite	əm					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 499.98	P.	/R Dedi	uctic	on ((\$38.4	6 Bi-We	ekly	/)		
с.	Full Name of Individual (Last, First, Middle Initia MOYER, BRUCE E, , ,	l) or Full C)rgai	nization Name		Date of	Re	ecei	pt					
	Mailing Address 4242 BROADWAY STREET #802					^M 06	/	L	30	/ Y	20)17 [°]		
	City SAN ANTONIO	State TX		Zip Code 78209-6463						PR2571)	
			-	70203 0403		Amount	of	Ea	ch Re	ceipt th	IIS P	'eriod		
	FEC ID number of contributing federal political committee.	C					_	9		9	_	117.0	0	
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) Mgmt		M	emo	o Ite	əm					
	Receipt For:	Aggregate	Yea	r-to-Date ▼										
	Other (specify)		-	507.00		/R Ded	uctio	on	(\$39.0	00 Bi-W	eekly	y)		
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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	▲ 11a ↓ 11b ↓ 11c ↓ 12									
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements ma	ay not be sold or used by any p ddress of any political committee	13 14 15 16 17 erson for the purpose of soliciting contributions a to solicit contributions from such committee									
$\overline{\langle}$	NAME OF COMMITTEE (In Full)												
\rangle	UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	AC)									
A.	Full Name of Individual (Last, First, Middle Initia HINTON, DUSTIN, , ,	al) or Full O	rganization Name	Date of Receipt									
	Mailing Address W132N6475 MARACH RD			06 30 2017									
	City MENOMONEE FALLS	State WI	Zip Code 53051-6085	Transaction ID : PR2571978746270 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		643.32									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1143.32	P/R Deduction (\$296.66 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initia CARLSON, KEVIN JAMES, , ,	al) or Full O	rganization Name	Date of Receipt									
	Mailing Address 4511 BROWNDALE AVENUE	1		06 / D D / Y Y Y Y 06 30 / 2017									
	City EDINA	State MN	Zip Code 55424-1142	Transaction ID : PR2572590046270									
			55424-1142	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C		288.45									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1249.95	P/R Deduction (\$96.15 Bi-Weekly)									
С.	Full Name of Individual (Last, First, Middle Initia WIFFLER, THOMAS P, , ,	al) or Full O	rganization Name	Date of Receipt									
	Mailing Address 1421 SOMERFIELD DRIVE			06 / D D / Y Y Y Y Y 2017									
	City BOLINGBROOK	State IL	Zip Code 60490-3207	Transaction ID : PR2572992746270 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		576.90									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment COO	Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)			1508.67									
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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page									
			13 14 15 16 17 berson for the purpose of soliciting contributions be to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incor	porated PAC (I	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, M GOETZ, MERRITT D, David, ,	liddle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 901 CLEARVIEW DR			06 / Y Y Y Y 2017								
City NASHVILLE	State TN	Zip Code 37205-1915	Transaction ID : PR2573477346270 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		750.00								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) CInt Svc Acct Mgt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Bi-Weekly)								
Full Name of Individual (Last, First, M BUCCHIANERI, STEVEN, , ,	liddle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 118 GOVERNORS		The Octo	M M / D D / Y Y Y Y Y 06 30 2017								
City MEDFORD	State MA	Zip Code 02155-3018	Transaction ID : PR2574977146270 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		57.69								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 249.99	P/R Deduction (\$19.23 Bi-Weekly)								
Full Name of Individual (Last, First, M RICHARD, DARYL P, , ,	liddle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 24 WEST RIDGE DR	-	Zin Onde	M M / D D / Y Y Y Y Y 06 / 30 / 2017								
City WEST HARTFORD	State CT	Zip Code 06117-2065	Transaction ID : PR2574979046270 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		137.34								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 404.70	P/R Deduction (\$45.78 Bi-Weekly)								
SUBTOTAL of Receipts This Page (opt	ional)		945.03								
TOTAL This Period (last page this line	number only)										

SCHEDULE A (FEC Form 3X) _____ _

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12							
			13 14 15 16 17 Derson for the purpose of soliciting contributions Der to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)	ig the flame and a									
UnitedHealth Group Incorpo	orated PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Mide A. SIMPSON, TRENT L, , ,	lle Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 3111 NORCREST AVE	N		06 / Y Y Y Y Y 06 30 2017							
City STILLWATER	State MN	Zip Code 55082-1779	Transaction ID : PR2574985046270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		115.38							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Mido B. CIANFROCCO, HEATHER R, ,		organization Name	Date of Receipt							
Mailing Address 2799 WEST BARDONN	ER ROAD		06 30 / Y Y Y Y 2017							
City	State PA	Zip Code	Transaction ID : PR2574986246270							
GIBSONIA	FA	15044-8462	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		576.90							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Clin Ops	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Midd C. BURNETT, JAMIE, , ,	lle Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 4625 EWING AVENUE	1		M M / D D / Y Y Y Y 06 30 2017							
City MINNEAPOLIS	State MN	Zip Code 55410-1745	Transaction ID : PR2574988246270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		117.00							
Name of Employer (for Individual) Optum Services, Inc	Occ VP I	upation (for Individual) T	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 507.00	P/R Deduction (\$39.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (option	al)		809.28							
TOTAL This Period (last page this line nur	mber only)	······								

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	WIZED RECEIPTS		Detailed Summary Page			11a		11	b	11c	1	2		
						13		14		15	1		17	
or f	information copied from such Reports and Stat or commercial purposes, other than using the na													
	NAME OF COMMITTEE (In Full)													
/	UnitedHealth Group Incorporated			-	(C)									
	Full Name of Individual (Last, First, Middle Initial LANG JACOBSEN, HEATHER A, , ,) or Full C	Orgai	nization Name		Date of Receipt								
1	Mailing Address 11382 MOUNT CURVE RD					^M 06	1		30	/	, 201	7 7		
	City	State		Zip Code		Trans	acti	ion	ID : F	PR2574	99144	6270		
-	EDEN PRAIRIE	MN		55347-2918	A	Amount	of	Ead	ch Re	eceipt t	his Per	iod		
	EC ID number of contributing ederal political committee.	С						-		95	1	15.38	3	
	Name of Employer (for Individual) Jnited HealthCare Services Inc		•	tion (for Individual) Gen Counsel Mgr		Me	emo) Ite	em					
_	Poppint For:			ar-to-Date ▼										
	Primary General Other (specify) ▼			499.98	P/	/R Ded	uctio	on ((\$38.4	6 Bi-W	'eekly)			
	Full Name of Individual (Last, First, Middle Initial ALLAZETTA, DAVID W, , ,) or Full C	Orgai	nization Name		Date of	Re	ecei	pt					
ſ	Aailing Address 339 DARTMOUTH HILLS STREE	ET				м м 06	/		30	/ Y	201			
(Dity	State		Zip Code		Trans	acti	ion	ID : P	R2574	99544	6270		
-	LAS VEGAS	NV		89138-1544	A	Amount	of	Ead	ch Re	eceipt t	his Per	iod		
	EC ID number of contributing ederal political committee.	С						-			2	88.4	5	
i l	Name of Employer (for Individual) Inited HealthCare Services Inc		•	tion (for Individual) an CEO		Me	emo	b Ite	em					
Ī		Aggregate	Yea	ar-to-Date 🔻										
	Primary General Other (specify) ▼		,	1249.95	P/	ſR Dedu	uctic	on (\$96.1	5 Bi-W	eekly)			
	Full Name of Individual (Last, First, Middle Initial WILLIAMS, JOSEPH RANDY, , ,) or Full C	Orgai	nization Name		Date of	Re	ecei	pt					
-	Mailing Address 3221 FORSYTH DRIVE					^M 06	/		30		201			
		State		Zip Code		Trans	acti	ion	ID : F	PR2575	500884	6270		
_	GREENSBORO	NC		27407-7221	/	Amount	of	Ead	ch Re	eceipt t	his Per	iod		
	FEC ID number of contributing ederal political committee.	С						y		9	5	43.96	6	
	Name of Employer (for Individual) Jnited HealthCare Services Inc			tion (for Individual) eg VP of SIs		Me	emo	o Ite	əm					
	Poppint For:				_									
	Primary General	nggi egale	165	ar-to-Date 🔻	P.	/R Ded	uctio	on ((\$181	.32 Bi-\	Neeklv)		
	Other (specify)		-	1642.86					<u> </u>			,		
รเ	BTOTAL of Receipts This Page (optional)							7		. ,	9	47.79)	
тс	TAL This Period (last page this line number on	ly)		•				-		-		-		

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17			Use separate schedule(s)	(check only one)									
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12				
	y information copied from such Reports and Sta for commercial purposes, other than using the n												
\setminus	NAME OF COMMITTEE (In Full)		Inited Lealth Crown DA	\sim									
	UnitedHealth Group Incorporated	I PAC (L		(C)									
Α.	Full Name of Individual (Last, First, Middle Initia FRIDELL, CATHERINE MARIE, , ,	l) or Full O	rganization Name		Date of	Red	ceipt						
	Mailing Address 11 E STONEWALL DRIVE				06 30 2017								
	City MIDDLETOWN	State DE	Zip Code 19709-3810						02754627 iis Perioc				
	FEC ID number of contributing federal political committee.	С			Amount				124				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clms		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 458.26	F	/R Dedu	uctio	ın (\$41.6	66 Bi-We	eekly)				
в.	Full Name of Individual (Last, First, Middle Initia DUNCAN, MICHELE M, , ,	l) or Full O	rganization Name		Date of	Red	ceipt						
	Mailing Address 3038 FAIRWAY CIRCLE				м м 06	/	^D 30	/ Y	2017	Y			
	City CHASKA	State MN	Zip Code 55318-3408						02964627 iis Perioc	-			
	FEC ID number of contributing federal political committee.	С					1		576	_			
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Compli		Me	emo	Item						
		Aggregate	Year-to-Date ▼										
	Primary General Other (specify) ▼		2499.90	P	/R Dedu	uctio	n (\$192	.30 Bi-W	/eekly)				
C.	Full Name of Individual (Last, First, Middle Initia VAN HOLMES, LORI A, , ,	l) or Full O	rganization Name		Date of	Red	ceipt						
	Mailing Address 4117 BRYANT AVENUE SOUT	н			06	/	^D 30	/ Y	2017	Ŷ			
	City MINNEAPOLIS	State MN	Zip Code 55409-1423						0309462				
	FEC ID number of contributing federal political committee.	С					y	y	291	.00			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Human Capital Dev		Me	emo	ltem						
Receipt For: Aggregat Primary General Other (specify) Image: Constraint of the second sec			Year-to-Date ▼ 1261.00	F	P/R Dedu	uctic	on (\$97.0	00 Bi-W	eekly)				
s	UBTOTAL of Receipts This Page (optional)						, .		992.	.88			
т	OTAL This Period (last page this line number on	ıly)											

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	orated PAC (I	JnitedHealth Group PA	łC)
Full Name of Individual (Last, First, Mid O'BRIEN, JENNIFER M, , ,	dle Initial) or Full C	organization Name	Date of Receipt
Mailing Address 4371 BENT TREE LAN		Zin Code	06 / D D / Y Y Y Y 2017
City EAGAN	State	Zip Code 55123-3054	Transaction ID : PR2575034546270
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef Compli Off	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Mid ALLENBURG, THOMAS J, , ,	dle Initial) or Full C	organization Name	Date of Receipt
Mailing Address 6224 LOCH MOOR DR			06 30 / Y Y Y Y Y 2017
City EDINA	State MN	Zip Code 55439-1618	Transaction ID : PR2575039846270 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		166.65
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 277.75	P/R Deduction (\$55.55 Bi-Weekly)
Full Name of Individual (Last, First, Mid C. LINDSAY, VIVIAN M, , ,	dle Initial) or Full C	organization Name	Date of Receipt
Mailing Address 14930 SW 39 ST			M M / D D / Y Y Y Y 06 30 2017
City DAVIE	State FL	Zip Code 33331-2767	Transaction ID : PR2575054946270 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		288.45
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ? Ops	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1249.95	P/R Deduction (\$96.15 Bi-Weekly)
SUBTOTAL of Receipts This Page (option	' nal)		1032.00
TOTAL This Period (last page this line nu	Imber only)		

SCHEDULE A (FEC Form 3X) _____

Use separate schedule(s)

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			Use separate schedule(s)	(check only	y one)						
			for each category of the Detailed Summary Page	× 11a 13		11c 12 15 16	17				
	copied from such Reports and St al purposes, other than using the			erson for the	purpose of soli	iciting contribu	utions				
	OMMITTEE (In Full) ealth Group Incorporate	d PAC (l	JnitedHealth Group P/	AC)							
Full Name of CLACKO,	Individual (Last, First, Middle Initi MARY ANN GAVINSKI, , ,	al) or Full O	rganization Name	Date of	Receipt						
Mailing Addre	6358 COTEAU TRAIL			м м 06	/ D D /	2017	Y				
City EDEN PRAIF	RIE	State MN	Zip Code 55344-5205		action ID : PR						
	per of contributing al committee.	С				115	.38				
Optum Servic	bloyer (for Individual) es, Inc		ipation (for Individual) Compli	M	emo Item						
Receipt For: Primary Other (y General specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Ded	uction (\$38.46 I	3i-Weekly)					
B. MCCART	Individual (Last, First, Middle Initi Y, CARY J, , ,	al) or Full O	rganization Name	Date of	Receipt						
Mailing Addre	8800 RUMFIELD RD	State	Zip Code	M M 06	/ D D /	2017	Y				
-	HLAND HILLS	TX	76182-6131		action ID : PR2 t of Each Rece						
	per of contributing al committee.	С		117.00							
	ployer (for Individual) Care Services Inc		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For: Primary Other (general specify) ▼	Aggregate	Year-to-Date ▼ 507.00	P/R Ded	uction (\$39.00 E	3i-Weekly)					
Full Name of C. ALLEN, I	Individual (Last, First, Middle Initi MARK T, , ,	al) or Full O	rganization Name	Date of	Receipt						
	2SS 11359 ENTREVAUX DRIVE			06	30	2017	_				
City EDEN PRAII	RIE	State MN	Zip Code 55347-2862		action ID : PR						
	per of contributing al committee.	С			, , ,	115	.38				
United Health	oloyer (for Individual) Care Services Inc		upation (for Individual) Gen Mgmt	M	emo Item						
Receipt For: Primary Other (general specify)	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)							
SUBTOTAL of	Receipts This Page (optional)				· · · · ·	347	.76				
TOTAL This Pe	eriod (last page this line number o	only)		• L_		-					

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
or for commercial purposes, other than using			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (UnitedHealth Group PA	NC)								
Full Name of Individual (Last, First, Middle MCEVOY, AMY J, , , Mailing Address 10551 GREENBRIER RD /	,	Organization Name	Date of Receipt								
City	State	Zip Code	06 30 2017 Transaction ID : PR2575062246270								
MINNETONKA	MN	55305-3460	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		60.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$20.00 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. ZAETTA, CHRISTOPHER ROBE		Organization Name	Date of Receipt								
Mailing Address 5840 RIDGE ROAD			06 / 0 0 / 2017								
City EXCELSIOR	State MN	Zip Code 55331-8153	Transaction ID : PR2575068346270 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	681.81										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) s Segment Gen Counsel	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2045.43	P/R Deduction (\$227.27 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. NICHOLS, SANDRA B, , ,	Initial) or Full C	Organization Name	Date of Receipt								
Mailing Address 12706 YOUNG LANE			06 / D D / Y Y Y Y 2017								
City NORTH POTOMAC	State MD	Zip Code 20878-6112	Transaction ID : PR2575074546270 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		288.45								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) red Svs Regn CMO	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1249.95	P/R Deduction (\$96.15 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			1030.26								
TOTAL This Period (last page this line numb	er only)	••••••									

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page								
			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee							
or for commercial purposes, other than using t	ne name and a	lucress of any political committe								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle SHELLEY, MATTHEW M, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 13197 NW HELEN LANE			M M / D D / Y Y Y Y 06 30 2017							
City PORTLAND	State OR	Zip Code 97229-7045	Transaction ID : PR2575075246270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		57.69							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Natl Clin Cvrge Review	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 249.99	P/R Deduction (\$19.23 Bi-Weekly)							
Full Name of Individual (Last, First, Middle UPCHURCH, KAREN A, , ,										
Mailing Address 5023 OAKMONT PLACE			06 / D D / Y Y Y Y 2017							
City WESTERVILLE	State OH	Zip Code 43082-8781	Transaction ID : PR2575084446270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify) ▼		499.98	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle O'NEILL, AUDREY L, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 71 CHESTNUT RIDGE RD	01-1-	7. 0.4	06 / D D / Y Y Y Y 2017							
City QUEENSBURY	State NY	Zip Code 12804-7317	Transaction ID : PR2575089446270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		62.49							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus Process	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 229.13	P/R Deduction (\$20.83 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			235.56							
TOTAL This Period (last page this line number	er only)									

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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				ailed Summary Page	×	11a 13		11		11		12	- 47		
	y information copied from such Reports and State for commercial purposes, other than using the na					or the			se of s		iting				
<u> </u>	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated														
<u> </u>	Full Name of Individual (Last, First, Middle Initial HEROLD, STACI L, , , Mailing Address 15008 GREEN OAKS TR SE) or Full O	rganiza	tion Name		Date of Receipt									
		Ototo		Codo	_ [06 30 2017									
	City PRIOR LAKE	State MN		0 Code 55372-2159	A	Transaction ID : PR2575093046270 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			142.83										
	Name of Employer (for Individual) Optum Services, Inc	Occi VP I	•	(for Individual)		Me	emo	o Ite	em						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to	-Date ▼ 380.88	P/	R Dedi	uctic	on ((\$47.6	61 Bi	i-Wee	ekly)			
в.	Full Name of Individual (Last, First, Middle Initial JACOBY, CHARLES, , ,) or Full O	rganiza	tion Name	Date of Receipt										
	Mailing Address 3315 IRVING AVE	1.0.				06 / 0 / Y Y Y Y 06 30 / 2017									
	City MINNEAPOLIS	State MN	Zip 5				-				9924627 s Period	0			
	FEC ID number of contributing federal political committee.	C						-			7	48.	00		
	Name of Employer (for Individual) Optum Services, Inc	Occupation (for Individual) Dir IT					Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-	-Date ▼ 208.00	P/I	P/R Deduction (\$16.00 Bi-Weekly)									
C.	Full Name of Individual (Last, First, Middle Initial CHAMPION, PHEBE M, , ,) or Full O	Organiza	tion Name		ate of	Re	ecei	ipt						
	Mailing Address 34 REYBURN DRIVE					^M 06	1		30	/	Y	y y 2017	Y		
	City HENDERSON	State NV	· · ·	o Code 9074-2760	A							0834627 s Period	0		
	FEC ID number of contributing federal political committee.	С				_		,			9	75.	00		
	Name of Employer (for Individual) Health Plan of Nevada		upation Cust Ser	(for Individual) rvice		Me	emo	o Ite	em						
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 325.00							P/R Deduction (\$25.00 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)			••••••	[,			,	265.8	33		
Т	OTAL This Period (last page this line number onl	ly)		•••••	Ī			- -			,				

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorporate	ted PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle In WHEELER, TISA, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 6085 WATER ST APT 2453			06 30 2017							
City	State	Zip Code	Transaction ID : PR2575138546270							
PLANO	ТХ	75024-0084	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	ů (
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Clin Ops	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 578.05	P/R Deduction (\$47.85 Bi-Weekly)							
Full Name of Individual (Last, First, Middle II CARTER, JOCELYN CHISHOLM,		Organization Name	Date of Receipt							
Mailing Address 601 SILVERSTONE DRIVE			06 30 / Y Y Y Y Y 2017							
City MADISON	State MS	Zip Code 39110-7581	Transaction ID : PR2575141946270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		375.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) N Plan CEO	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify) ▼		, 1000.00	P/R Deduction (\$125.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle In DEWALL, PATRICK J, , ,	nitial) or Full C	Organization Name	Date of Receipt							
Mailing Address 7662 RIDGEVIEW WAY	Chata	Zin Oode	06 / D D / Y Y Y Y Y 06 30 2017							
City CHANHASSEN	State MN	Zip Code 55317-4507	Transaction ID : PR2575145346270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		288.45							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) uty Gen Counsel Mgr	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1249.95	P/R Deduction (\$96.15 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			807.00							
TOTAL This Period (last page this line numbe	r only)									

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

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TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
			erson for the purpose of soliciting contributions to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorp	orated PAC (I	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Mid JONES, RON, , ,	dle Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 10066 ESCAMBIA BAY	-		06 / D D / Y Y Y Y 2017									
City	State	Zip Code	Transaction ID : PR2575163546270									
NAPLES	FL	34120-4621	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		375.00									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P CInt Relationship	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼	—									
Primary General Other (specify) ▼		1625.00	P/R Deduction (\$125.00 Bi-Weekly)									
Full Name of Individual (Last, First, Mid B. HAMANN, CHAD A, , ,	dle Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 7638 RIDGEVIEW WA	(06 30 2017									
City	State	Zip Code	Transaction ID : PR2575170146270									
CHANHASSEN	MN	55317-4507	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	ů l											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Tax	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2023.74	P/R Deduction (\$228.93 Bi-Weekly)									
Full Name of Individual (Last, First, Mid c. COSTIN, ROBERT C, , ,	dle Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 3109 SHADY SPRING	S DRIVE		06 30 2017									
City	State	Zip Code	Transaction ID : PR2575180746270									
LOUISVILLE	KY	40299-4575	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		57.69									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Sr SIs Exe	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 249.99	P/R Deduction (\$19.23 Bi-Weekly)									
SUBTOTAL of Receipts This Page (option	nal)		. 1119.48									
TOTAL This Period (last page this line nu	imber only)											

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 79 OF

			Use separate schedule(s)	(check only one)						
11	EIVILLED RECEIPIS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
	y information copied from such Reports and Sta for commercial purposes, other than using the r									
$\overline{\langle}$	NAME OF COMMITTEE (In Full)									
\rangle	UnitedHealth Group Incorporated	I PAC (l	UnitedHealth Group PA	.C)						
Α.	Full Name of Individual (Last, First, Middle Initia MCGUIRE, THOMAS J, , ,	l) or Full O	Drganization Name	Date of Receipt						
	Mailing Address 41 CUMBERLAND ROAD			06 / Y Y Y Y Y 2017						
	City WEST HARTFORD	State CT	Zip Code 06119-1121	Transaction ID : PR2575185446270 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		576.90						
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Deputy Gen Counsel	Memo Item						
Receipt For: Age Primary General Other (specify) ▼			e Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
в.	Full Name of Individual (Last, First, Middle Initia DEMARIS, PETER JOHN, , ,	l) or Full O	Drganization Name	Date of Receipt						
	Mailing Address 2301 OLIVER AVE S			06 / Y Y Y Y 2017						
	City MINNEAPOLIS	State MN	Zip Code 55405-2448	Transaction ID : PR2575191846270						
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period						
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Mktg eComm	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)						
C.	Full Name of Individual (Last, First, Middle Initia STAMM, MICHAEL PATRICK, , ,	ll) or Full O	Drganization Name	Date of Receipt						
	Mailing Address 6721 MOSSY GLEN DR			06 / D / Y Y Y Y 06 2017						
	City FORT MYERS	State FL	Zip Code 33908-4771	Transaction ID : PR2575194646270 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		120.00						
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) P Ops	Memo Item						
Receipt For: Aggregate Primary General Other (specify)			P Year-to-Date ▼ 520.00	P/R Deduction (\$40.00 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)			812.28						
т	OTAL This Period (last page this line number or	וy)	•							

Use separate schedule(s)

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PAGE 80 OF

			Use separate schedule(s)	(ch	(check only one)									
11			for each category of the Detailed Summary Page		4 11a		11b	11c	12					
	y information copied from such Reports and Stat for commercial purposes, other than using the n													
$\overline{)}$	NAME OF COMMITTEE (In Full)													
	UnitedHealth Group Incorporated	PAC (L	InitedHealth Group PA	NC)										
 A.	Full Name of Individual (Last, First, Middle Initial GRANBERG, MITCHELL W, , ,) or Full Or	ganization Name		Date of	Re	eceipt							
	Mailing Address 6721 GALWAY DRIVE				06 30 2017									
	City EDINA	State MN	Zip Code 55439-1313						9614627 is Period	0				
	FEC ID number of contributing federal political committee.	С			[.				288.	45				
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) uty Gen Counsel Mgr		Me	emc	tem							
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 1249.95	I F	P/R Dedu	uctio	on (\$96.	.15 Bi-We	ekly)					
в.	Full Name of Individual (Last, First, Middle Initial FRANCIS, KEVIN B, , ,) or Full Or	ganization Name		Date of	Re	eceipt							
	Mailing Address 15815 MINNETONKA BLVD				м м 06	1	30		2017	Y				
	City MINNETONKA	State MN	Zip Code 55345-1410				-		0334627 is Period	0				
	FEC ID number of contributing federal political committee.							686.	79					
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP A	Memo Item											
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 2023.74	P/R Deduction (\$228.93 Bi-Weekly)										
С.	Full Name of Individual (Last, First, Middle Initia MEYERHOFER, JEFFREY P, , ,) or Full Or	ganization Name		Date of	Re	eceipt							
	Mailing Address 11842 DRIFTWOOD ROAD	1 -			M M 06	/	30		2017					
	City EDEN PRAIRIE	State MN	Zip Code 55344-3262						21464627 is Period	0				
	FEC ID number of contributing federal political committee.	С			<u> </u>		,		142.	83				
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Itwk Contrctng		Me	emo	tem							
	Receipt For: Primary General Other (specify)	Aggregate Y	Year-to-Date ▼ 380.88		P/R Ded	ucti	on (\$47	.61 Bi-We	ekly)					
s	UBTOTAL of Receipts This Page (optional)		•••••	•			, .	. ,	1118.)7				
т	OTAL This Period (last page this line number on	ly)		•	_		,							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

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	EMIZED RECEIPTS			Detailed Summary Page	×			-	1b	11c		12	1 7		
	y information copied from such Reports and Stat for commercial purposes, other than using the na								se of :						
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated														
A.	Full Name of Individual (Last, First, Middle Initial SHORS, MATTHEW MACKINNON, , ,) or Full O	rgar	nization Name		Date of Receipt									
	Mailing Address 4649 EWING AVENUE SOUTH					06 30 2017									
	City MINNEAPOLIS	State MN		Zip Code 55410-1745		Transaction ID : PR2575222346270 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			576.90										
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) ity Gen Counsel		М	emo	o Ite	em						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 2499.90	F	P/R Ded	luctio	on	(\$192	.30 Bi-	Wee	kly)			
B.	Full Name of Individual (Last, First, Middle Initial KRUTA, DARLENE DAWN, , ,) or Full O	rgar	nization Name		Date o	f Re	ecei	ipt						
	Mailing Address 9243 GREEN BRIAR RD					06 / D D / Y Y Y Y 2017									
	City BLOOMINGTON	State MN	Zip Code 55437-1939		Trans Amoun		-				54627(Period)			
	FEC ID number of contributing federal political committee.	C						-			_	142.8	33		
	Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) VP Gen Mgmt					emo	o Ite	em						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 380.88	P	P/R Deduction (\$47.61 Bi-Weekly)									
C.	Full Name of Individual (Last, First, Middle Initial KIRKPATRICK, SUSAN A, , ,) or Full O	rgar	nization Name		Date o	f Re	ecei	ipt						
	Mailing Address 417 STERLING STREET	1				^M 06	1	E	D D 30	/		017 017	Y		
	City LANCASTER	State MA		Zip Code 01523-1847		Trans Amoun						64627 Period	0		
	FEC ID number of contributing federal political committee.	С				<u> </u>		y		,	_	137.4	40		
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) n Mgmt		Memo Item									
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 404.6						P/R Deduction (\$45.80 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)				•							857.1	3		
т	OTAL This Period (last page this line number on	ly)			- •			-							

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

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			Use separate schedule(s)	(check only one)									
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12									
	y information copied from such Reports and Sta for commercial purposes, other than using the r												
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	.C)									
A.	Full Name of Individual (Last, First, Middle Initia CHOATE, THOMAS C, , ,	al) or Full O	rganization Name	Date of Receipt									
	Mailing Address 8222 STONE MASON CT			06 30 2017									
	City WINDERMERE	State FL	Zip Code 34786-5624	Transaction ID : PR2575247846270 Amount of Each Receipt this Period									
				115.38									
			upation (for Individual) In CEO	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initia DARRAH, JACQUELINE M, , ,	al) or Full O	rganization Name	Date of Receipt									
	Mailing Address 16942 HUBBARD TRAIL			06 / D D / Y Y Y Y 06 30 2017									
	City LAKEVILLE	State MN	Zip Code 55044-5846	Transaction ID : PR2575248546270 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		142.83									
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Assc Gen Counsel	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 380.88	P/R Deduction (\$47.61 Bi-Weekly)									
C.	Full Name of Individual (Last, First, Middle Initia BRANT, PAUL T, , ,	al) or Full O	rganization Name	Date of Receipt									
	Mailing Address 17 ROCKY BROOK ROAD			06 / D D / Y Y Y Y 06 2017									
	City WILTON	State CT	Zip Code 06897-1919	Transaction ID : PR2575250246270 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		150.00									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) KA VP SIs Acct Mgt	Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)		•	408.21									
т	OTAL This Period (last page this line number or	nly)	•	· · · · · · · · · · · · · · · · · · ·									

FOR LINE NUMBER:

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ידו			Use separate schedule(s)	(che	ck only	/ or	ne)	L				
11			for each category of the Detailed Summary Page	×	11a		11b	11c	12	_ 47		
	y information copied from such Reports and St for commercial purposes, other than using the											
	NAME OF COMMITTEE (In Full)			0 10 301								
\rangle	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group P/	AC)								
Α.	Full Name of Individual (Last, First, Middle Initi SHETTY, PRASANNA, , ,	al) or Full O	rganization Name	C	Date of	Re	eceipt					
	Mailing Address 41 HOYA ST				06 30 / Y Y Y Y Y 06 30 2017							
	City RANCHO MISSION VIEJO	State CA	Zip Code 92694-1283	A					25204627 nis Period	0		
	FEC ID number of contributing federal political committee.	С				-		115.:	38			
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) IT Sys Anlys		Me	emo	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/	′R Ded	ucti	on (\$38	8.46 Bi-We	eekly)			
B.	Full Name of Individual (Last, First, Middle Initi KORF, GRETCHEN R, , ,	al) or Full O	rganization Name		Date of	Re	eceipt					
	Mailing Address 2120 WESTON LANE N	Ctata	_ [м м 06	1	D 30		2017	Y			
	City PLYMOUTH	State MN	Zip Code 55447-2372				-		25224627 nis Period	0		
	FEC ID number of contributing federal political committee.	С		anoun	U			576.9	93			
	Name of Employer (for Individual) United HealthCare Services Inc	Occi VP		Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1807.71	P/	P/R Deduction (\$192.31 Bi-Weekly)							
C.	Full Name of Individual (Last, First, Middle Initi BROOMFIELD, ROBERT A, , ,	al) or Full O	rganization Name		Date of	Re	eceipt					
	Mailing Address 12501 WEST 156TH STREET	Otata	Zin Onda		м м 06	1	30)	2017			
	OVERLAND PARK	State KS	Zip Code 66221-2662	A			-		26044627 nis Period	0		
	FEC ID number of contributing federal political committee.	С					y	 J	57.	69		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		M	emo	o Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 249.99	P/	/R Ded	ucti	on (\$19	9.23 Bi-W	eekly)			
	UBTOTAL of Receipts This Page (optional)				-		, .		750.0	00		

SCHEDULE A (FEC Form 3X) _____ _

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
			person for the purpose of soliciting contributions see to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middle A. HAMBLIN, JILLIAN, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 3103 BEACON GROVE S	Τ		M M / D D / Y Y Y Y 06 30 2017								
City SPRING	State TX	Zip Code 77389-4348	Transaction ID : PR2575290346270 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		142.83								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 380.88	P/R Deduction (\$47.61 Bi-Weekly)								
Full Name of Individual (Last, First, Middl B. BEAUREGARD, THOMAS RAY	Date of Receipt										
Mailing Address 555 MILTON ROAD			06 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y								
City GOSHEN	State CT	Zip Code 06756-1613	Transaction ID : PR2575295146270 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		576.90								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Innovation	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. CORN, BARBARA, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 12931 SUNSET BLUFF C			M M / D D / Y Y Y Y Y 06 30 / 2017								
City SAINT LOUIS	State MO	Zip Code 63127-1303	Transaction ID : PR2575297346270 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		115.38								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optiona	l)		835.11								
TOTAL This Period (last page this line num	ber only)										

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
			13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)	The name and a	duress of any political commute							
UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle CUEVAS, BRANDON E, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 25 STRATHMORE			06 / Y Y Y Y 06 30 2017						
City LADERA RANCH	State CA	Zip Code 92694-0549	Transaction ID : PR2575305646270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		576.90						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. KRINN, DOUGLAS L, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3008 CYPRESS CIRCLE	NORTH		06 / D D / Y Y Y Y 06 30 2017						
City MEDINA	State MN	Zip Code 55340-8809	Transaction ID : PR2575310146270						
		55540-6809	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		142.83						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 380.88	P/R Deduction (\$47.61 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. HUNT, BRADLEY W, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 6636 W SHORE DR			06 / 0 / Y Y Y Y 2017						
City EDINA	State MN	Zip Code 55435-1529	Transaction ID : PR2575310446270						
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CMO	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1249.95	P/R Deduction (\$96.15 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)		1008.18						
TOTAL This Period (last page this line num	ber only)								

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		Use separate schedule(s)	(check only one)					
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12					
Any information copied from such Reports and or for commercial purposes, other than using t			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorpora	ted PAC (UnitedHealth Group PA	AC)					
Full Name of Individual (Last, First, Middle GOLDBERG, JEFFREY A, , ,	Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 3410 BRADLEY LANE			06 30 Y Y Y Y Y 2017					
City CHEVY CHASE	State MD	Zip Code 20815-3262	Transaction ID : PR2575326946270					
FEC ID number of contributing			Amount of Each Receipt this Period					
federal political committee.	C		117.00					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Business Development Exe	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 507.00	P/R Deduction (\$39.00 Bi-Weekly)					
			1					
Full Name of Individual (Last, First, Middle VAN HAM, COLLEEN HASTINGS		Organization Name	Date of Receipt					
Mailing Address 727 N EVERGREEN AVE			06 30 2017					
	State IL	Zip Code	Transaction ID : PR2575341946270					
		60004-5566	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		576.90					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Plan CEO	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼	-					
Primary General Other (specify) ▼		2499.90	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. TELESKY, MICHAEL J, , ,	Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 2602 PENNINGTON PLAC	E		06 30 2017					
City VALPARAISO	State IN	Zip Code 46383-9163	Transaction ID : PR2575350946270					
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP SIs Acct Mgmt	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 507.00	P/R Deduction (\$39.00 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional).			810.90					
TOTAL This Period (last page this line number	er only)	······						

FOR LINE NUMBER:

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			Use separate schedule(s)	(che	eck only	/ or	ie)					
			for each category of the Detailed Summary Page	×	11a 13		11b 14	11c	12	17		
Any infor or for co	mation copied from such Reports and S mmercial purposes, other than using the	tatements ma name and a	y not be sold or used by any p ddress of any political committed	erson f e to so	for the	purp ntrib	oose of	soliciting	g contribut	ions		
	E OF COMMITTEE (In Full)											
) Unit	tedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)								
A. DOL	lame of Individual (Last, First, Middle Init L, KATHLEEN A, , ,	ial) or Full O	rganization Name	Date of Receipt								
	g Address 3184 MULLIGAN LANE				06 / 0 / Y Y Y Y 06 / 30 / 2017							
City CHAS	SKA	State MN	Zip Code 55318-3226						38514627 nis Period	0		
	ID number of contributing al political committee.	С	C					-	128.6	6		
	of Employer (for Individual) n Services, Inc		ipation (for Individual) Clnt Svc Acct Mgt		Me	emo	Item					
	pt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 228.66	P	/R Dedi	uctio	on (\$59.	.33 Bi-W	eekly)			
							ceipt					
	g Address 1429 WEST WIGWAM TRAIL			06 / 30 / 2017 Transaction ID : PR2575390946270								
City	NT PROSPECT	State IL	Zip Code 60056-2940)		
FEC I	ID number of contributing al political committee.	C			Amount	OT	Each H	eceipt tr	nis Period 115.3	38		
	e of Employer (for Individual) I HealthCare Services Inc		upation (for Individual) n CEO		Me	emo	Item					
	pt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	Р	/R Dedu	uctic	on (\$38.	46 Bi-We	eekly)			
	lame of Individual (Last, First, Middle Init ATTEBO, CRAIG L, , ,	ial) or Full O	rganization Name		Date of	Re	ceipt					
	g Address 10202 HARMONY CIRCLE	01-1-			^M 06	1	30		2017			
City EDE	N PRAIRIE	State MN	Zip Code 55347-5019						39724627 his Period	0		
	ID number of contributing al political committee.	С					,		288.4	15		
Optur	of Employer (for Individual) n Services, Inc		ipation (for Individual) ity Gen Counsel Mgr		Memo Item							
	pt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1249.95] P	P/R Ded	uctio	on (\$96	.15 Bi-W	eekly)			
	TAL of Receipts This Page (optional) This Period (last page this line number o						, . , .	· ·	532.4	19		

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 88 OF

	Use separate schedule(s)	(check or	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11b	11c	12			
Any information copied from such Reports and										
or for commercial purposes, other than using t	ine name and a	duress of any political committee	e lo solicit c	Untrib	utions fi	IOM SUCP	i committe	ee.		
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle KING, STEVEN F, , ,	Initial) or Full C	rganization Name	Date	of Re	ceipt					
Mailing Address 33 PINEBROOK ROAD			M 06	M /	30	/ Y	2017	Y		
City NASHUA	State NH	Zip Code 03062-2240					0354627	D		
FEC ID number of contributing federal political committee.	С				-		132.8	34		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	י 🗖 🗌	Memo	Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 424.44	P/R De	ductio	on (\$44.)	28 Bi-We	ekly)			
Full Name of Individual (Last, First, Middle GOTHARD, CAROL, , ,	Initial) or Full C	rganization Name	Date	of Re	ceipt					
Mailing Address 16492 BROOKLANE BOUL		Zip Code	M 06		D D 30	/ Y	2017	Ŷ		
City NORTHVILLE	State MI			-		19146270 is Period)			
FEC ID number of contributing federal political committee.	С	48168-8417					136.3	35		
Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) Dir Fin			Item					
Receipt For:	Aggregate	Year-to-Date ▼		1						
Other (specify) ▼		363.60	P/R De	P/R Deduction (\$45.45 Bi-Weekly)						
Full Name of Individual (Last, First, Middle MCGAVICK, KEVIN M, , ,		rganization Name	Date	of Re	ceipt					
Mailing Address 705 NOTTINGHAM COUR		Zin Oode	06		30		2017			
City CRANBERRY TOWNSHIP	State PA	Zip Code 16066-6527					12194627 is Period	U		
FEC ID number of contributing federal political committee.	С				y a	. ,	115.3	38		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) SRVP Sales		Memo	tem					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 499.98	P/R De	eductio	on (\$38.	46 Bi-We	ekly)			
SUBTOTAL of Receipts This Page (optional).					,		384.5	57		
TOTAL This Period (last page this line number	er only)									

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	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 □						
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
> UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle I	nitial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1431 HENRY COURT			M M / D D / Y Y Y Y Y 06 30 2017						
City	State MN	Zip Code	Transaction ID : PR2575428746270						
CHANHASSEN	IVIIN	55317-2200	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		115.38						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
United HealthCare Services Inc	VP .	Acctng							
Receipt For:	Aggregate	Year-to-Date 🔻							
Other (specify) ▼		499.98	P/R Deduction (\$38.46 Bi-Weekly)						
Other (specify) V			1						
Full Name of Individual (Last, First, Middle I B. CASTILLO, EFREM, , ,	nitial) or Full O	rganization Name	Date of Receipt						
Mailing Address 307 JOLIET AVE			06 30 2017						
City	State	Zip Code	Transaction ID : PR2575441346270						
SAN ANTONIO	TX	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		576.90						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Seg Chief Med Off	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	1						
Primary General Other (specify) ▼		, 2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I	l nitial) or Full O	rganization Name	Date of Receipt						
Mailing Address 112 FOX TRAIL TER			06 30 2017						
City	State	Zip Code	Transaction ID : PR2575441646270						
GAITHERSBURG	MD	20878-2683	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		500.00						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Dir/CMO	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00	P/R Deduction (\$500.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			1192.28						
TOTAL This Period (last page this line numbe	r only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

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			Use separate schedule(s)	(ch	(check only one)							
111	EWIZED RECEIPTS		for each category of the Detailed Summary Page				11b	11c	12	<u> </u>		
	y information copied from such Reports and Sta for commercial purposes, other than using the n											
$\overline{\langle}$	NAME OF COMMITTEE (In Full)											
\rangle	UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	(C)								
Α.	Full Name of Individual (Last, First, Middle Initia MURLEY, MARY J, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt					
	Mailing Address 2775 COUNTRYSIDE DRIVE W	EST			м м 06	/	D D D 30) / Y	ү 2017	Y		
	City ORONO	State MN	Zip Code 55356-9675					PR25754 leceipt th				
	FEC ID number of contributing federal political committee.	С			<u> </u>					00		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Chief Actuary		Me	emc	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4999.90	P/R Deduction (\$0.00 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Initia AXBERG, PAMELA, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt					
	Mailing Address 1427 BROOKSHIRE COURT				06	/	^D 30		2017	Y		
	City NEW BRIGHTON	State MN	Zip Code 55112-6390	_				PR25754		-		
	FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period									
	Name of Employer (for Individual) Optum Services, Inc	Occu SVP	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1818.16	P/R Deduction (\$227.27 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initia SPILKER, TIMOTHY M, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt					
	Mailing Address 9801 MOHAWK LANE				^M 06	1	D 30		2017	Y		
	LEAWOOD	State KS	Zip Code 66206-2432					PR25754 Receipt th				
	FEC ID number of contributing federal political committee.	С					,	. ,	576.	90		
Name of Employer (for Individual) United HealthCare Services Inc			upation (for Individual) n CEO	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)		•				, .	.,	1031.	44		
т	OTAL This Period (last page this line number or	ly)		-			-	- 41-				

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports an or for commercial purposes, other than using			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle A. HAUTMAN, MILLA, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 410 SYCAMORE CIRCLE			06 30 / Y Y Y Y Y 2017						
City PLYMOUTH	State MN	Zip Code 55441-5667	Transaction ID : PR2575447146270						
FEC ID number of contributing federal political committee.	С	33441-3007	Amount of Each Receipt this Period 683.19						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ef Tech Off	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2039.43	P/R Deduction (\$227.73 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. BOOKER, ROBERT E, , ,	Date of Receipt								
Mailing Address 16632 HANSON BLVD NV			06 / ¹ ²⁰¹⁷ 2017						
City ANDOVER	State MN	Zip Code 55304-2089	Transaction ID : PR2575447246270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		710.25						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1922.08	P/R Deduction (\$236.75 Bi-Weekly)						
Full Name of Individual (Last, First, Middle GEHLBACH, THOMAS E, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 5380 YELLOWSTONE TR			06 / D D / Y Y Y Y Y 2017						
City MINNETRISTA	State MN	Zip Code 55331-9163	Transaction ID : PR2575448846270						
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 Underwriting	Memo Item						
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 440.47	P/R Deduction (\$43.04 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			1522.56						
TOTAL This Period (last page this line numb	per only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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				Detailed Summary Page	×	11a		11	b	11c	12	
						13		14		15	16	17
	rmation copied from such Reports and St mmercial purposes, other than using the											
	E OF COMMITTEE (In Full)				<u> </u>							
/	tedHealth Group Incorporate				AC)							
	lame of Individual (Last, First, Middle Initi GLINCH, THOMAS S, , ,	ial) or Full O	Drga	nization Name	[Date of Receipt						
Mailin	g Address 910 MIDWEST TRAIL NORTH					06 30 2017						
City		State		Zip Code		Trans	acti	ion	ID : F	PR2575	45164627	0
	ELMO	MN		55042-9658	/	Amoun	t of	Ea	ch Re	eceipt th	nis Period	
	ID number of contributing al political committee.	С				-,-		-	142.	33		
Name Unite			tion (for Individual) asury		М	emo	o Ite	em				
Recei	pt For:	Aggregate	Yea	ar-to-Date V								
	Primary General	5554.0			P/	/R Ded	uctio	on	(\$47.6	61 Bi-We	ekly)	
	Other (specify)	L	-	380.88	4							
Full N B. MU	lame of Individual (Last, First, Middle Initi RPHY, ERIC D, , ,	ial) or Full O	Date of Receipt									
	g Address 5201 BLAKE ROAD			м м 06	/	Γ	30	/ Y	2017	Y		
City		State		Zip Code		Trans	acti	ion	ID · F	PR25754	45374627	0
EDIN	A	MN		55436-1127	A			-			nis Period	
	ID number of contributing al political committee.	С		576.90					90			
	e of Employer (for Individual) n Services, Inc	Occupation (for Individual) Bus Segment CEO					Memo Item					
Recei	pt For:	Aggregate	Yea	ar-to-Date 🔻		7						
	Primary General Other (specify) ▼		P/	P/R Deduction (\$192.30 Bi-Weekly)								
	lame of Individual (Last, First, Middle Initi EWART, JUSTIN B, , ,	ial) or Full O	Drga	nization Name		Date of	f Re	ecei	ipt			
	g Address 311 S YORKSHIRE CIRCLE					м м 06	/	Γ	30	/ Y	ү ү 2017	Y
City		State		Zip Code		Trans	sact	ion	ID : I	PR2575	46464627	0
ANA	HEIM	CA		92808-1313	A	Amoun	t of	Ea	ch Re	eceipt th	nis Period	
	ID number of contributing al political committee.	С						y		, ,	57.	69
Name	e of Employer (for Individual)	Occi	upa	tion (for Individual)		М	emc	o Ite	em			
	m Services, Inc	VPI	•	· · · · · · · · · · · · · · · · · · ·								
Recei	pt For:	Aggregate	Yea	ar-to-Date 🔻								
	Primary General	7.99.09uto			P.	/R Ded	luction	ion	(\$19.2	23 Bi-We	eekly)	
	Other (specify)	L	-	249.99	4							
SUBTO	TAL of Receipts This Page (optional)			•				9		,	777.4	12
TOTAL	This Period (last page this line number of	only)		••••••				-				

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c	12				
Any information copied from such Reports an or for commercial purposes, other than using								
NAME OF COMMITTEE (In Full)	and manie and a							
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group PA	NC)					
Full Name of Individual (Last, First, Middle A. SADUSKE, NANETTE M, , ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 4276 NICOLET DRIVE				2017				
City GREEN BAY	State WI	Zip Code 54311-9798	Transaction ID : PR2575470 Amount of Each Receipt this I					
FEC ID number of contributing federal political committee.	C			130.41				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Compli	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 391.23	P/R Deduction (\$43.47 Bi-Week	ly)				
Full Name of Individual (Last, First, Middle B. STARMANN, LYNN A, , ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 11701 WEMBLEY RD				017				
City	State	Zip Code	Transaction ID : PR2575494					
LOS ALAMITOS	CA	90720-4235	Amount of Each Receipt this I	^{>} eriod				
FEC ID number of contributing federal political committee.	С		142.83					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Clin Ops	Memo Item					
Receipt For:	Aggregate	Year-to-Date 🔻						
Other (specify) ▼		380.88	P/R Deduction (\$47.61 Bi-Weekly)					
Full Name of Individual (Last, First, Middle HOWELL, NICHOLAS F, , ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 300 ORANGE GROVE AV		7.01	06 30 2	017				
City SOUTH PASADENA	State CA	Zip Code 91030-1616	Transaction ID : PR2575510 Amount of Each Receipt this I					
FEC ID number of contributing federal political committee.	С			623.79				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) OptumI CnsIt	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2296.69	P/R Deduction (\$207.93 Bi-Wee	kly)				
SUBTOTAL of Receipts This Page (optional)				897.03				
TOTAL This Period (last page this line numb	per only)							

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17			Use separate schedule(s)	(ch	eck onl	y or	e)					
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page	>	1 1a		11b		11c		12	
					13		14		15		16	17
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements ma ame and a	ay not be sold or used by any pe ddress of any political committee	to so	for the plicit co	purp ntrib	oose utions	of s s fro	oliciting m sucl	g cont h corr	tributio nmitte	ons e.
	NAME OF COMMITTEE (In Full)											
	UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	(C)								
_	Full Name of Individual (Last, First, Middle Initial) or Full O	rganization Name									
Α.	JOSEPH, MOLLY E, , ,			_	Date o	f Re	ceipt					
	Mailing Address 9209 GRAND SUMMIT BLVD	1			06 30 / Y Y Y Y 2017							
		State TX	Zip Code						R2575			
	DRIPPING SPRINGS		78620-2882	_	Amoun	t of	Each	Red	ceipt th	nis Pe	eriod	
	FEC ID number of contributing federal political committee.	С					,		-	į	576.00	0
	Name of Employer (for Individual)	Оссі	upation (for Individual)	-	М	emo	Item	1				
	United HealthCare Services Inc		Segment CEO									
	Poppint For:		Year-to-Date ▼									
	Primary General	Aggregate		F	P/R Ded	luctio	on (\$1	92.0	00 Bi-V	Veekly	/)	
	Other (specify)		2496.00							-	,	
	Full Name of Individual (Last, First, Middle Initial HEBERT, PAUL B, , ,) or Full O	rganization Name		Data a	f Do	agint					
в.				-	Date of		· ·					
	Mailing Address 13 GOVERNORS ROW			06	1	3	30	/ Y	201	7	ŕ	
	City	State Zip Code				acti	1		R2575			
	WEST HARTFORD	СТ	06117-1931		Amoun							
	FEC ID number of contributing federal political committee.	С					,			-	375.00	0
	Name of Employer (for Individual) United HealthCare Services Inc	Occi VP	upation (for Individual) Fin	Memo Item								
	Receipt For:		Year-to-Date ▼	-	-							
	Primary General	Aggregate		F	P/R Ded	uctio	on (\$1	25.0)0 Bi-V	/eeklv	/)	
	Other (specify) V		1625.00				(*			,	,	
~	Full Name of Individual (Last, First, Middle Initial) or Full O	rganization Name		Data a	4 D a						
C.	DI RE, BERNADETTE, , , Mailing Address 1 NORFOLK LANE			\dashv	Date of		· ·	_			24	
	Maining Address TNORFOLK LANE				м м 06		D 3	30	/ Y	201	7 7	Y
	City	State	Zip Code		Trans	sacti	on ID) : P	R2575	52254	46270	
	HOLLISTON	MA	01746-2362		Amoun	t of	Each	Red	ceipt th	nis Pe	eriod	
	FEC ID number of contributing federal political committee.	С					,		y		115.38	8
	Name of Employer (for Individual)	000	upation (for Individual)	_	М	emo	Item	1				
	United HealthCare Services Inc		Plan CEO									
	Poppint For:	1	Year-to-Date ▼	-								
	Primary General	Aggregate		F	P/R Ded	luctio	on (\$3	38.4	3 Bi-W	eekly))	
Other (specify)			499.98									
	LIPTOTAL of Descripto This Descriptors					-	-			10	066.38	3
	UBTOTAL of Receipts This Page (optional)		r			÷	,		9			#
Т	OTAL This Period (last page this line number on	ly)	••••••				7					_

Use separate schedule(s)

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IТ	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)					
11			for each category of the Detailed Summary Page	X 11a 11b 11c 12	٦				
Ar	y information copied from such Reports and S	tatements ma	Ay not be sold or used by any p	13 14 15 16 erson for the purpose of soliciting contribution	<u>17</u> າຣ				
or	for commercial purposes, other than using the	name and a	ddress of any political committee	e to solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)					
Α.	Full Name of Individual (Last, First, Middle Init CROCKETT, DOUGLAS F, , ,	ial) or Full O	organization Name	Date of Receipt					
	Mailing Address 5938 DEER HOLLOW COURT			06 / 0 / Y Y Y Y 06 2017]				
	City PITTSBORO	State IN	Zip Code 46167-9583	Transaction ID : PR2575526046270 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		214.26					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 571.36	P/R Deduction (\$71.42 Bi-Weekly)					
в.	Full Name of Individual (Last, First, Middle Init Cohen, SANFORD P, , ,	Date of Receipt							
	Mailing Address 28 CRESCENT LANE			06 30 Y Y Y Y Y 2017]				
	City LEVITTOWN	State NY	Zip Code 11756-2506	Transaction ID : PR2575526146270 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		78.08 Memo Item					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) s Seg Chief Med Off						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 218.48	P/R Deduction (\$50.00 Bi-Weekly)					
с.	Full Name of Individual (Last, First, Middle Init GREENBERG, JASON E, , ,	ial) or Full O	organization Name	Date of Receipt					
	Mailing Address 630 STILSON CANYON ROA			06 / D D / Y Y Y Y 2017]				
	City CHICO	State CA	Zip Code 95928-9179	Transaction ID : PR2575526746270 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		288.45					
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) CInt Svc Acct Mgt	Memo Item					
Receipt For: Age Primary General Other (specify) Image: Constraint of the second s		Aggregate	Year-to-Date ▼ 1249.95	P/R Deduction (\$96.15 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)			580.79					
T	OTAL This Period (last page this line number of	only)							

SCHEDULE A (FEC Form 3X) __ _ _ _ _ _ _ _ - - - - -

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle HOLOVNIA, KRISTEN NOEL ANDER		rganization Name	Date of Receipt							
Mailing Address 4610 LAKEVIEW DRIVE			M M / D D / Y Y Y Y Y 06 30 2017							
City EDINA	State MN	Zip Code 55424-1518	Transaction ID : PR2575533046270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		288.45							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) buty Gen Counsel Mgr	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1249.95	P/R Deduction (\$96.15 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. HILL, JANE B, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 34301 299TH PLACE			06 / Y Y Y Y 2017							
	State MN	Zip Code	Transaction ID : PR2575533146270							
	_	56431-5914	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		115.38							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Compli	Memo Item							
Receipt For:	1	Year-to-Date ▼								
Other (specify) ▼		499.98	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. BAHL, ALISA LAMNIN, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 41 BIRCHWOOD DRIVE			M M / D D / Y Y Y Y 06 30 2017							
City GREENWICH	State CT	Zip Code 06831-3311	Transaction ID : PR2575534446270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		65.22							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Sales	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 217.40	P/R Deduction (\$21.74 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			469.05							
TOTAL This Period (last page this line numb	er only)									

Use separate schedule(s)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17			
			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)	ated PAC (I	UnitedHealth Group PA	AC)			
Full Name of Individual (Last, First, Middle A. Mullaney, SUSAN, , ,	Date of Receipt					
Mailing Address 169 HUNNEWELL STRE			06 / D D / Y Y Y Y Y 2017			
City NEEDHAM	State MA	Zip Code	Transaction ID : PR2575535146270			
FEC ID number of contributing	C	02494-1421	Amount of Each Receipt this Period 365.00			
federal political committee.						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Memo Item			
Receipt For:	Aggregate	Year-to-Date ▼				
Primary General Other (specify) ▼		365.00	P/R Deduction (\$365.00 Bi-Weekly)			
Full Name of Individual (Last, First, Middle B. HAMLIN, THOMAS A, , ,	e Initial) or Full C	Organization Name	Date of Receipt			
Mailing Address 2800 NEWMAN						
City HOUSTON	State TX	Zip Code 77098-1408	Transaction ID : PR2575536246270 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	FEC ID number of contributing					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Behvrl Med Dir	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)			
Full Name of Individual (Last, First, Middle C. STEINBRECHER, HOLLY, , ,	e Initial) or Full C	Organization Name	Date of Receipt			
Mailing Address 3631 CHESAPEAKE			M M / D D / Y Y Y Y 06 30 2017			
City FRISCO	State TX	Zip Code 75034-0807	Transaction ID : PR2575544546270			
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period			
Name of Employer (for Individual)		upation (for Individual)	Memo Item			
Optum Services, Inc Receipt For:	I	Gen Mgmt	_			
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1249.95	P/R Deduction (\$96.15 Bi-Weekly)			
SUBTOTAL of Receipts This Page (optional)	b	768.83			
TOTAL This Period (last page this line num	ber only)	·····				

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		Use separate schedule(s)	(check only one)					
11			for each category of the Detailed Summary Page					
	y information copied from such Reports and Sta for commercial purposes, other than using the r							
$\overline{)}$	NAME OF COMMITTEE (In Full)	//		-				
/	UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	(C)				
A.	Full Name of Individual (Last, First, Middle Initia STOUT-PENN, MELISSA K, , ,	l) or Full O	organization Name	Date of Receipt				
	Mailing Address 1336 HARBOUR TOWN PLACE			06 30 Y Y Y Y Y 2017				
	City CHULA VISTA	State CA	Zip Code 91915-2225	Transaction ID : PR2575547046270 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		148.56				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 396.16	P/R Deduction (\$49.52 Bi-Weekly)				
в.	Full Name of Individual (Last, First, Middle Initia MOCK, CURTIS A, , ,	l) or Full O	organization Name	Date of Receipt				
	Mailing Address 23 KELTON STREET			06 30 2017				
	City REHOBOTH	State MA	Zip Code 02769-2530	Transaction ID : PR2575579246270 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		288.45				
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1249.95	P/R Deduction (\$96.15 Bi-Weekly)				
С.	Full Name of Individual (Last, First, Middle Initia WINSOR, ELIZABETH C, , ,	l) or Full O	organization Name	Date of Receipt				
	Mailing Address 57 WILDERS PASS			06 / D D / Y Y Y Y 06 30 2017				
	City CANTON	State CT	Zip Code 06019-2259	Transaction ID : PR2575582846270 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		576.90				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) DNA Acct	Memo Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)				
s	UBTOTAL of Receipts This Page (optional)		•••••	1013.91				
т	OTAL This Period (last page this line number or	ıly)						

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
			13 14 15 16 1 erson for the purpose of soliciting contributions to collicit contributions from such committee						
or for commercial purposes, other than using t	ne name and a	duress of any political committee	e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle HARRIS, EUGENE M, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 2832 HARBORSIDE WAY			06 / D D / Y Y Y Y 06 30 2017						
City SOUTHPORT	State NC	Zip Code 28461-8373	Transaction ID : PR2575585446270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		115.38						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) R Reg VP of Brkr Sls	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle MILLER, MICHAEL R, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 213 MAGILL DRIVE			06 / D D / Y Y Y Y Y 2017						
City GRAFTON	State MA	Zip Code 01519-1328	Transaction ID : PR2575595646270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		124.98						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Business Development Exe	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		458.26	P/R Deduction (\$41.66 Bi-Weekly)						
Full Name of Individual (Last, First, Middle Chimento, LISA M, , ,	,	rganization Name	Date of Receipt						
Mailing Address 524 FORT WILLIAMS PKW		Zin Code	06 / 0 0 / Y Y Y Y Y 2017						
City ALEXANDRIA	State VA	Zip Code 22304-1849	Transaction ID : PR2575596146270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		357.14						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) g Dir Optuml Cons	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 357.14	P/R Deduction (\$357.14 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).		,	597.50						
TOTAL This Period (last page this line number	er only)								

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)					
I LIVIIZED RECEIPIO		for each category of the Detailed Summary Page	X 11a 11b 11c 12					
			13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)	porated PAC (l	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, M A. IVERSON, LISA M, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 13341 CARRACH AV	ENUE		M M / D D / Y Y Y Y Y 06 30 2017					
City ROSEMOUNT	State MN	Zip Code 55068-4774	Transaction ID : PR2575603246270 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		576.90					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CFO	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, M B. MCNUTT, DIANE L, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 11524 ZION ROAD			06 / Y Y Y Y Y 2017					
City BLOOMINGTON	State MN	Zip Code 55437-3636	Transaction ID : PR2575604546270 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		576.90					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Human Capital Partner	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, M C. COSTA, JOEL, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 775 WESTCHESTER		7: 0.4	M M / D D / Y Y Y Y 06 30 2017					
City SHAKOPEE	State MN	Zip Code 55379-4557	Transaction ID : PR2575605846270 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		346.14					
		upation (for Individual) Fin	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1499.94	P/R Deduction (\$115.38 Bi-Weekly)					
SUBTOTAL of Receipts This Page (opti	 onal)		1499.94					
TOTAL This Period (last page this line i	umber only)							

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17			
or for commercial purposes, other than usin			erson for the purpose of soliciting contributions to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group PA	AC)			
Full Name of Individual (Last, First, Middl KING, SARAH D, , ,	Date of Receipt					
Mailing Address 116 CUTLER ROAD			06 / D D / Y Y Y Y Y 06 30 2017			
City GREENWICH	State CT	Zip Code 06831-2511	Transaction ID : PR2575612846270 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		600.00			
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2400.00	P/R Deduction (\$200.00 Bi-Weekly)			
Full Name of Individual (Last, First, Midd B. STOCKHOWE, MARK W, , ,	le Initial) or Full C	rganization Name	Date of Receipt			
Mailing Address 2108 MANOR DRIVE			06 30 2017			
City BURNSVILLE	State MN	Zip Code 55337-2036	Transaction ID : PR2575619946270 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	s l					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 380.88	P/R Deduction (\$47.61 Bi-Weekly)			
Full Name of Individual (Last, First, Middl C. THOMPSON, BRIAN R, , ,	le Initial) or Full C	rganization Name	Date of Receipt			
Mailing Address 17829 63RD AVE N			06 / D D / Y Y Y Y Y 2017			
City MAPLE GROVE	State MN	Zip Code 55311-4650	Transaction ID : PR2575634646270 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	Jan San San San San San San San San San S					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CEO	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1611.08	P/R Deduction (\$260.68 Bi-Weekly)			
SUBTOTAL of Receipts This Page (optiona	al)		1524.87			
TOTAL This Period (last page this line nun						

SCHEDULE A (FEC Form 3X) EMIZED DECEIDTE

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FOR LINE NUMBER:

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ITEMIZED RECEIPTS			or each category of the	४ 11a │ 11b │ 11c │ 12				
		' '	Detailed Summary Page	13 14 15 16				
				rson for the purpose of soliciting contributio to solicit contributions from such committee				
NAME OF COMMITTEE	. ,							
> UnitedHealth Gro	oup Incorporated PA	AC (Uni	itedHealth Group PA	C)				
Full Name of Individual (CLARK, TERRENCE	Last, First, Middle Initial) or $M, , ,$	Full Orga	nization Name	Date of Receipt				
Mailing Address 8 COOF				06 30 / Y Y Y Y Y				
City		ate	Zip Code	Transaction ID : PR2575636946270				
EDINA	M	N	55436-1315	_ Amount of Each Receipt this Period				
FEC ID number of contri federal political committe	ů.			576.90				
Name of Employer (for In United HealthCare Servic	,	· ·	tion (for Individual) gment CMO	Memo Item				
Receipt For:			5	-				
Primary G	aeneral Agg	regale rea	ur-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)				
Other (specify) v			2433.30					
Full Name of Individual (. DAVIS, BENTON \	Last, First, Middle Initial) or	Full Orga	nization Name	Date of Receipt				
Mailing Address 9825 NC				06 30 2017				
City	Sta	ate	Zip Code	Transaction ID : PR2575639246270				
PARADISE VALLEY	A	Z	85253-1634	Amount of Each Receipt this Period				
FEC ID number of contri federal political committe	ů.			576.90				
Name of Employer (for I Optum Services, Inc	ndividual)		tion (for Individual) Clin Comnty Ntwk	Memo Item				
Receipt For:	Agg	regate Yea	ar-to-Date ▼					
Other (specify) V		,	2307.60	P/R Deduction (\$192.30 Bi-Weekly)				
Full Name of Individual (HERMAN, CRAIC	Last, First, Middle Initial) or	Full Orga	nization Name	Date of Receipt				
Mailing Address 9609 W				06 30 2017				
City	Sta	ate	Zip Code	Transaction ID : PR2575650246270				
BLOOMINGTON	M	IN	55438-1628	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.				576.90				
Name of Employer (for I	ndividual)	Occupat	tion (for Individual)	Memo Item				
Optum Services, Inc	,	VP Gen	()					
Receipt For:	Agg	1	ur-to-Date ▼	1				
Primary G	General	594.0 100		P/R Deduction (\$192.30 Bi-Weekly)				
Other (specify)			2499.90					
SUBTOTAL of Receipts Th	nis Page (ontional)			1730.70				
SUBIUTAL OF RECEIPTS IT	ns raye (uplional)		▶					
TOTAL This Period (last p	age this line number only)		•••••					

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a		11b	11c	12		
Any information copied from such Reports and									
or for commercial purposes, other than using t	he name and a	ddress of any political committee	e to solicit c	ontrib	utions fr	om such	committe	e.	
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle I A. MCFANN, ELENA J, , ,	nitial) or Full C	rganization Name	Date	of Re	ceipt				
Mailing Address 18925 24TH AVENUE NOR	TH		M 06		D D 30	/ Y	ү 2017	Y	
City PLYMOUTH	State MN	Zip Code 55447-2072					54746270 s Period)	
FEC ID number of contributing federal political committee.	С					 	576.9	0	
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In CEO	_ _ '	Memo	Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R De	eductio	on (\$192	2.30 Bi-W	eekly)		
Full Name of Individual (Last, First, Middle I ZIGLER, JANICE C, , ,	nitial) or Full C	rganization Name	Date	of Re	ceipt				
Mailing Address 21 TREVINO CIRCLE	1-		06		D D 30	/ Y	2017	Y	
City ANGEL FIRE	State NM	Zip Code 87710					65646270)	
FEC ID number of contributing federal political committee.	С						s Period 576.9	0	
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) gn Pres Ntwk Mgmt	- D	Memo	tem				
Receipt For:	Aggregate	Aggregate Year-to-Date ▼			7				
Primary General Other (specify) ▼		2499.90			P/R Deduction (\$192.30 Bi-Weekly)				
Full Name of Individual (Last, First, Middle I ALLEN, CARL E, , ,	nitial) or Full C	rganization Name	Date	of Re	ceipt				
Mailing Address 8675 AZURE SKY DRIVE			06		^D 30		2017		
City LAS VEGAS	State NV	Zip Code 89129-2227					6934627)	
FEC ID number of contributing federal political committee.	С				y .	. ,	117.0	00	
Name of Employer (for Individual) Southwest Medical Assoc. Inc.		upation (for Individual) Ied Dir		Memc	ltem				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 507.00	P/R De	eductio	on (\$39.	00 Bi-We	ekly)		
SUBTOTAL of Receipts This Page (optional)					, .	. ,	1270.8	0	
TOTAL This Period (last page this line number	er only)								

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		Use separate schedule(s)	(che	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12	<u> </u>
Any information copied from such Reports and or for commercial purposes, other than using									
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle SIMONSON, KELLY A, , ,	Initial) or Full C	rganization Name		Date of	Re	ceipt			
Mailing Address 11680 GLOWING SUNSET				м м 06	1	D 10 30	D / Y	ү ү 2017	Y
City LAS VEGAS	State NV	Zip Code 89135-1658	A					68234627 nis Period	0
FEC ID number of contributing federal political committee.	С					,	1 Apr.	180.	00
Name of Employer (for Individual) Health Plan of Nevada		upation (for Individual) Gen Mgmt		Me	emo	Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 420.00	P/	/R Dedu	uctio	on (\$60.	.00 Bi-W	eekly)	
Full Name of Individual (Last, First, Middle STIDMAN, CHRISTOPHER J, , ,	Initial) or Full C	rganization Name		Date of	Re	ceipt			
Mailing Address 6504 CHEROKEE TRAIL		7: 0		м м 06	1	30		2017	Y
City EDINA	State MN	Zip Code 55439-1109				-		68384627	0
FEC ID number of contributing federal political committee.	С			anount	J	Laun H	ieceipt th	nis Period 576.	90
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) CInt Relationship		Me	emo	Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90] P/	R Dedu	uctic	on (\$192	2.30 Bi-W	Veekly)	
Full Name of Individual (Last, First, Middle C. OCHIPINTI, JOSEPH, , ,	Initial) or Full C	rganization Name		Date of	Re	ceipt			
Mailing Address 2751 MEETING PLACE				м м 06	/	30		2017	
City ORLANDO	State FL	Zip Code 32814-6136	A					68574627 nis Period	0
FEC ID number of contributing federal political committee.	С					y .	· ·	119.	43
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Me	emo	Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 517.53]	/R Ded	uctio	on (\$39	.81 Bi-W	eekly)	
SUBTOTAL of Receipts This Page (optional).						,	. ,	876.	33
TOTAL This Period (last page this line number	er only)						1.46		

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)						
ILEWIZED RECEIPIS		for each category of the Detailed Summary Page	X 11a	11b	11c	12			
Any information copied from such Reports an									
or for commercial purposes, other than using	the name and a	ddress of any political committee	e to solicit co	ntribution	s from sucl	n committe	ee.		
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle FINE, BRETT M, , ,	Initial) or Full O	rganization Name	Date o	f Receipt	:				
Mailing Address 607 STONINGTON ROAD			м м 06		D / Y 30	2017	Y		
City SILVER SPRING	State MD	Zip Code 20902-1547			D:PR25750		D		
FEC ID number of contributing federal political committee.	C			-		115.3	38		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Corp Strat	M	lemo Iten	n				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Dec	luction (\$	38.46 Bi-We	eekly)			
Full Name of Individual (Last, First, Middle B. FARRELL, STEPHEN J, , ,	Initial) or Full O	rganization Name	Date o	f Receipt	:				
Mailing Address 50 MAJOR DOANE RD			06		30 / Y	2017	Y		
City WELLFLEET	State MA	Zip Code 02667-7836			D:PR25756 Receipt th)		
FEC ID number of contributing federal political committee.	С					115.3	38		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	M	lemo Iten	n				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.98	P/R Ded	luction (\$	38.46 Bi-We	eekly)			
Full Name of Individual (Last, First, Middle C. PROKOCKI, ELIZABETH SOB		rganization Name	Date o	f Receipt	:				
Mailing Address 9746 SUNSET HILL DR			M M 06		30 / Y	үүү 2017	Ŷ		
City LONE TREE	State CO	Zip Code 80124-6720			D:PR2575 Receipt th		0		
FEC ID number of contributing federal political committee.	С			7	y	288.4	15		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		lemo Iten	n				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1249.95	P/R Dec	duction (\$	96.15 Bi-We	eekly)			
SUBTOTAL of Receipts This Page (optional)				9		519.2	21		
TOTAL This Period (last page this line numb	er only)								

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		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 1					
Any information copied from such Reports and s or for commercial purposes, other than using th			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (I	JnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, Middle In WILSON, D ELLEN, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 400 STUART STREET 25D			06 / D D / Y Y Y Y 06 30 2017					
City BOSTON	State MA	Zip Code 02116-5011	Transaction ID : PR2575708846270 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		576.90					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Human Capital	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle In B. VOLLRATH, MICHELLE G, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 7647 MARKER ROAD	State	Zin Code	06 / D D / Y Y Y Y Y 2017					
City SAN DIEGO	State CA	Zip Code 92130-5616	Transaction ID : PR2575719846270 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		236.82					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP SIs Acct Mgmt	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 473.64	P/R Deduction (\$78.94 Bi-Weekly)					
Full Name of Individual (Last, First, Middle In C. KNORR, MOLLY LOUISE, , ,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 1144 PROSPECT AVENUE			06 / 0 0 / Y Y Y Y 06 30 2017					
City HARTFORD	State CT	Zip Code 06105-1124	Transaction ID : PR2575735446270 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		115.38					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) PRisk Adjustment	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			929.10					
TOTAL This Period (last page this line number	only)							

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorpora	ited PAC (l	JnitedHealth Group PA	AC)					
Full Name of Individual (Last, First, Middle GROSKLAGS, JEFFREY, , ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 3233 TIMBERWOLF CIRCI	_E		06 / ²⁰¹⁷ 2017					
City PRIOR LAKE	State MN	Zip Code 55372-3272	Transaction ID : PR2575735746270 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		288.45					
Name of Employer (for Individual) Optum Services, Inc	Occi VP	upation (for Individual) Fin	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1249.95	P/R Deduction (\$96.15 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. KRAL, JESSICA C, , ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 4358 COOLIDGE AVE			06 / Y Y Y Y 2017					
City SAINT LOUIS PARK	State MN	Zip Code 55424-1020	Transaction ID : PR2575736146270 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		115.38					
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) IT	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼	1					
Other (specify) ▼		, 499.98	P/R Deduction (\$38.46 Bi-Weekly)					
Full Name of Individual (Last, First, Middle MURRAY, THOMAS M, , ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 10 CIRCLE WEST	Ctoto	Zin Code	06 / D D / Y Y Y Y 2017					
City EDINA	State MN	Zip Code 55436-1313	Transaction ID : PR2575736546270 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		652.17					
Name of Employer (for Individual) United HealthCare Services Inc	Occi VP (upation (for Individual) Dps	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2173.90	P/R Deduction (\$217.39 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional).			1056.00					
TOTAL This Period (last page this line number	er only)							

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12						
			13 14 15 16 17 erson for the purpose of soliciting contributions to collicit contributions from such committee						
or for commercial purposes, other than using t	ne name and a	uuress or any political committee	e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle CESARETTI, GINA L, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 5020 CIRCLE DOWN			06 / Y Y Y Y 2017						
City GOLDEN VALLEY	State MN	Zip Code 55416-1304	Transaction ID : PR2575739046270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		576.90						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) outy Gen Counsel Mgr	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle LAMOINE, DAVID D, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 3607 W 89TH ST	1-		06 / D D / Y Y Y Y Y 2017						
City BLOOMINGTON	State MN	Zip Code 55431-1826	Transaction ID : PR2575755146270						
FEC ID number of contributing	_	33431-1020	Amount of Each Receipt this Period						
federal political committee.	C		142.83						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Proj Mgmt	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) ▼		380.88	P/R Deduction (\$47.61 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. Eklo, BENJAMIN N, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 3942 CAMPELLO CURVE	State	Zin Code	06 / 0 / Y Y Y Y 2017						
City CHASKA	MN	Zip Code 55318-4639	Transaction ID : PR2575761846270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		666.66						
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP I	upation (for Individual) Fin	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 666.66	P/R Deduction (\$333.33 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			1386.39						
TOTAL This Period (last page this line number	er only)								

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	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a	11b	11c	12	□ ,_		
Any information copied from such Reports and or for commercial purposes, other than using the									
	io name dilu a		LIG SUIICIL CO	minution	S ITOTTI SUC				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ted PAC (l	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle II AMULLINS, CHRISTOPHER J, , ,	nitial) or Full O	rganization Name	Date o	f Receipt	t				
Mailing Address 15560 SMITHFIELD PLACE					30 / Y	2017	Y		
City CENTREVILLE	State VA	Zip Code 20120-4901			D : PR2575 n Receipt tl		0		
FEC ID number of contributing federal political committee.	С					57.6	<u>39</u>		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	M	lemo Iter	n				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2749.99	P/R Dec	duction (\$:19.23 Bi-W	eekly)			
Full Name of Individual (Last, First, Middle In MAURER, CARRIE J, , ,	nitial) or Full O	rganization Name	Date o	f Receipt	t				
Mailing Address 2899 EDGEWATER COVE			M M 06		30 / Y	ү ү 2017	Y		
City WOODBURY	State MN	Zip Code 55125-8705			D : PR2575 n Receipt tl)		
FEC ID number of contributing federal political committee.	С			648.33					
Name of Employer (for Individual) Optum Services, Inc		Occupation (for Individual) VP Mktg			n				
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		2190.43	P/R Ded	luction (\$	216.11 Bi-V	Veekly)			
Full Name of Individual (Last, First, Middle II Levine, CAROL L, , ,	nitial) or Full O	rganization Name	Date o	f Receipt	t				
Mailing Address 10415 HOMEWARD HILLS			06	JL	30	2017			
City EDEN PRAIRIE	State MN	Zip Code 55347-4900			D: PR2575		U		
FEC ID number of contributing federal political committee.	С			9	,	357.2	4		
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		lemo Iter	n				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 357.14	P/R Dec	duction (\$	357.14 Bi-\	Veekly)			
SUBTOTAL of Receipts This Page (optional)				,		1063.1	6		
TOTAL This Period (last page this line numbe	r only)								

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		Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
✓ UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle I HJERPE, ADAM C, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 13932 UTAH AVE S			06 30 / Y Y Y Y Y							
City SAVAGE	State MN	Zip Code 55378-2159	Transaction ID : PR2575806246270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		576.90							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef of Staff	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I RUSSELL, LAURIE ERIN, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 3108 SONIA DRIVE	0	7. 0.1	06 / D D / Y Y Y Y Y 2017							
City LAS VEGAS	State NV	Zip Code 89107-3246	Transaction ID : PR2575812146270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) /t Affs Dir	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 507.00	P/R Deduction (\$39.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I C. MECKEY, SAMUEL JAMES, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 1828 WYNDAM DRIVE			06 30 / Y Y Y Y 2017							
City SHAKOPEE	State MN	Zip Code 55379-5437	Transaction ID : PR2575814546270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		576.90							
Name of Employer (for Individual) Optum Services, Inc	Occ VP (upation (for Individual) Ops	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			1270.80							
TOTAL This Period (last page this line number	r only)									

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	, C	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPT	3	for each category of the Detailed Summary Page	X 11a 11b 11c 12							
			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.							
VinitedHealth Grou	up Incorporated PAC	(UnitedHealth Group PA	AC)							
Full Name of Individual (Li A. MILLER, WILLIAM J, ,	ast, First, Middle Initial) or Full	Organization Name	Date of Receipt							
Mailing Address 27409 W	108 STREET		06 30 2017							
City	State	Zip Code	Transaction ID : PR2575819846270							
OLATHE	KS	66061-7533	Amount of Each Receipt this Period							
FEC ID number of contribution federal political committee.	ů.		265.41							
Name of Employer (for Inc Optum Services, Inc	· ·	cupation (for Individual) is Segment CEO	Memo Item							
Receipt For: Primary Ge Other (specify) ▼	neral Aggregat	e Year-to-Date ▼ 1150.11	P/R Deduction (\$88.47 Bi-Weekly)							
Full Name of Individual (La B. SEXTON, ELLEN R	ast, First, Middle Initial) or Full	Organization Name	Date of Receipt							
Mailing Address 15346 FIS			06 / 0 / Y Y Y Y Y 06 2017							
City PRIOR LAKE	State MN	Zip Code 55372-1948	Transaction ID : PR2575823246270 Amount of Each Receipt this Period							
FEC ID number of contribution federal political committee.	ů.		600.95							
Name of Employer (for Ind United HealthCare Services	1	cupation (for Individual) th Plan CEO	Memo Item							
Receipt For:	Aggregat	e Year-to-Date ▼	-							
Other (specify) ▼	neral	, 1562.45	P/R Deduction (\$252.40 Bi-Weekly)							
Full Name of Individual (La C. MCNATT, RICHAR	ast, First, Middle Initial) or Full	Organization Name	Date of Receipt							
Mailing Address 1120 KEN			06 / D D / Y Y Y Y Y 2017							
City ALPHARETTA	State GA	Zip Code 30022-6274	Transaction ID : PR2575824946270 Amount of Each Receipt this Period							
FEC ID number of contribution federal political committee.	9		115.38							
Name of Employer (for Inc United HealthCare Service	·	cupation (for Individual) SIs Ops	Memo Item							
Receipt For: Primary Ge Other (specify)	neral Aggregat	e Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)							
SUBTOTAL of Receipts This	Page (optional)		981.74							
TOTAL This Period (last pag	ge this line number only)									

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)						
ITEINIZED REGEIFIS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
			person for the purpose of soliciting contributions be to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle BRADLEY, JOEL F, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 300 WHITE MOSS PLACE	E		06 30 / Y Y Y Y Y 2017						
City FRANKLIN	State TN	Zip Code 37064-8628	Transaction ID : PR2575825846270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		55.38						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 1ed Dir	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 239.98	P/R Deduction (\$18.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle KAUFMAN, PHILIP R , , ,		rganization Name	Date of Receipt						
Mailing Address 1680 NORTH FARM ROA		Zin Codo	06 / ¹ ² ² ² ² ² ² ²						
City ORONO	State MN	Zip Code 55356-9309	Transaction ID : PR2575829846270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		631.86						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) D Spclty Ben Visn	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2261.86	P/R Deduction (\$210.62 Bi-Weekly)						
Full Name of Individual (Last, First, Middle CVerity, CLAIRE, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 583 BATTERY STREET APT 716N	Otata		M M / D D / Y Y Y Y 06 30 2017						
City SEATTLE	State WA	Zip Code 98121-1956	Transaction ID : PR2575830246270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		365.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 365.00	P/R Deduction (\$365.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			1052.24						

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12							
			13 14 15 16 17 erson for the purpose of soliciting contributions from such committee							
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	ule lidille and a	uuress or any political committe	5 to solicit contributions from such committee.							
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle HUNTLEY, MICHELLE M, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 19503 HARMONY AVE			06 30 / Y Y Y Y 2017							
City ROGERS	State MN	Zip Code 55374-4843	Transaction ID : PR2575832046270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		559.14							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) outy Gen Counsel	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1915.38	P/R Deduction (\$103.68 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. JERDE, MARY J, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 304 EAST VERA LANE		7.001	06 / D D / Y Y Y Y Y 2017							
City TEMPE	State AZ	Zip Code 85284-4036	Transaction ID : PR2575837446270							
FEC ID number of contributing federal political committee.	C	0520+*4030	Amount of Each Receipt this Period							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Memo Item							
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 380.88	P/R Deduction (\$47.61 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. BEESON, MARY JANE, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 279 OAK COMMON AVEN	1		06 / D D / Y Y Y Y 2017							
City SAINT AUGUSTINE	State FL	Zip Code 32095-6803	Transaction ID : PR2575839546270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		288.45							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1249.95	P/R Deduction (\$96.15 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			990.42							
TOTAL This Period (last page this line numb	er only)									

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	EMIZED RECEIPTS			or each category of the Detailed Summary Page	×	11a 13		11b 14	11c 15	12 16	17		
or	y information copied from such Reports and State for commercial purposes, other than using the na								soliciting				
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Uni	tedHealth Group PA	C)								
Α.	Full Name of Individual (Last, First, Middle Initial) BOROCH, BLAIR WILLIAM, , ,	or Full O	Drgar	nization Name		Date of Receipt							
	Mailing Address 800 BELFRY DRIVE					^M 06		D D D 30		ү ү 2017			
	City BLUE BELL	State PA		Zip Code 19422-1210					PR25758				
				19422-1210	_	Amount	t of E	Each R	eceipt th	is Period			
	FEC ID number of contributing federal political committee.	С								55.	38		
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Mgmt		M	emo	ltem					
	Receipt For:		Yea	r-to-Date ▼									
	Primary General Other (specify) ▼		-	239.98	F	P/R Ded	uctio	n (\$18.	46 Bi-We	eekly)			
	Full Name of Individual (Last, First, Middle Initial) GOLDEN, WILLIAM J, , ,	or Full O	Drgar	nization Name		Date of	f Rec	eipt					
	Mailing Address 106 SOUND COURT					06 30 / Y Y Y Y							
	City	State		Zip Code		Trans	actio	n ID :	PR25758	35934627	0		
	NORTHPORT	NY		11768-3527		Amount of Each Receipt this Perio							
	FEC ID number of contributing federal political committee.	С								288.	45		
	Name of Employer (for Individual) United HealthCare Services Inc		cupat gn C	ion (for Individual) EO		Memo Item							
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 3749.95	F	P/R Ded	uctior	า (\$96.	15 Bi-We	ekly)			
	Full Name of Individual (Last, First, Middle Initial) COTTINGTON, NYLE BRENT, , ,	or Full O	Drgar	nization Name		Date of	f Rec	eipt					
	Mailing Address 6630 EMPIRE COURT					06	/	D D D 30	/ Y	y y 2017	Y		
	City	State		Zip Code		Trans	actio	on ID :	PR2575	86534627	70		
	MAPLE GROVE	MN		55311-3433		Amount	t of E	Each R	eceipt th	is Period			
	FEC ID number of contributing federal political committee.	С				115.38							
	Name of Employer (for Individual) United HealthCare Services Inc		cupat Acct	ion (for Individual)		Memo Item							
	Baggint For:	1		r-to-Date ▼	-								
	Primary General Other (specify)	-ggi egale	, Tea	499.98	F	P/R Ded	luctio	n (\$38.	.46 Bi-We	eekly)			
S	UBTOTAL of Receipts This Page (optional)									459.	21		
т	OTAL This Period (last page this line number only	y)											

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IT.	ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)							
			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions							
\setminus	NAME OF COMMITTEE (In Full)										
	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group PA	NC)							
Α.	Full Name of Individual (Last, First, Middle Initi PEZHMAN, PAYMAN, , ,	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 3016 GROVELAND SCHOOL	ROAD		06 30 2017							
	City	State	Zip Code	Transaction ID : PR2575883546270							
	WAYZATA	MN	55391-2816	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		288.45							
	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item							
	United HealthCare Services Inc	Bus	Segment Gen Counsel								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General	33 - 3		P/R Deduction (\$96.15 Bi-Weekly)							
	Other (specify) v	L	1249.95								
в.	Full Name of Individual (Last, First, Middle Initi LANGAN, PATRICK J, , ,	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 405 MEADOW LANE			06 30 2017							
	City	State	Zip Code	Transaction ID : PR2575885046270							
	BENSON	MN	56215-1033	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		291.00							
	Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) IT	Memo Item							
	Receipt For:	Aggregate	Year-to-Date V	-							
	Primary General Other (specify) ▼		1261.00	P/R Deduction (\$97.00 Bi-Weekly)							
<u> </u>	Full Name of Individual (Last, First, Middle Initi JENSEN PFIEFFER, KIM M, , ,	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 9449 ASPEN RD			06 30 2017							
	City	State	Zip Code	Transaction ID : PR2575929746270							
	LAKEVILLE	MN	55044-8148	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		142.83							
	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item							
	United HealthCare Services Inc		Acctng								
	Receipt For:	Aggregate	Year-to-Date V								
	Other (specify)		380.88	P/R Deduction (\$47.61 Bi-Weekly)							
	UBTOTAL of Receipts This Page (optional)			722.28							

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
or for commercial purposes, other than usin			erson for the purpose of soliciting contributions to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Midd MEDEIROS, MICHAEL W, , ,	lle Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 7112 LANGMUIR DRIVE			06 / D D / Y Y Y Y 2017						
City MCKINNEY	State TX	Zip Code 75071-4606	Transaction ID : PR2575930646270						
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) CInt Mgmt NA Accts	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 507.00	P/R Deduction (\$39.00 Bi-Weekly)						
Full Name of Individual (Last, First, Midd B. ZITZER, CHRISTOPHER C, , ,	lle Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 2848 FRANCE AVE S			06 / Y Y Y Y 2017						
City ST LOUIS PARK	State MN	Zip Code 55416-4204	Transaction ID : PR2575933346270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		132.84						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Compli	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 424.44	P/R Deduction (\$44.28 Bi-Weekly)						
Full Name of Individual (Last, First, Midd MATTERA, RICHARD J, , ,	lle Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 483 HIGHCROFT ROAD	1		06 / D D / Y Y Y Y 2017						
City WAYZATA	State MN	Zip Code 55391-1548	Transaction ID : PR2575938446270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		576.90						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Group Gen Counsel	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional	al)		826.74						
TOTAL This Period (last page this line nur	mber only)	•••••							

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

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	EWIZED RECEIPTS			br each category of the Detailed Summary Page	×	11a		11	b	1	11c	12	
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	y information copied from such Reports and State for commercial purposes, other than using the na												
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Unit	tedHealth Group PA	C)								
A.	Full Name of Individual (Last, First, Middle Initial PERLMAN, JUDITH GAGER, , ,) or Full O	Drgan	ization Name		Date of Receipt							
	Mailing Address 116 CANTERBURY LANE - 210)8				м м 06	/	Γ	30	1	Y	ү ү 2017	Y
	City	State		Zip Code		Trans	acti	ion	ID :	PR	25759	689462	70
	VINEYARD HAVEN	MA		02568-5659		Amount	t of	Ea	ch Re	ece	ipt this	s Perio	d
	FEC ID number of contributing federal political committee.	С						-			-y	173	8.07
	Name of Employer (for Individual) United HealthCare Services Inc		•	on (for Individual) Mgmt		M	emo) Ite	em				
		Aggregate	Year	r-to-Date ▼									
	Primary General Other (specify) ▼	- 7 -	749.97	P	/R Ded	uctio	on ((\$57.6	69 E	Bi-Wee	ekly)		
B.	Full Name of Individual (Last, First, Middle Initial SCHULTZ, STACY A, , ,) or Full O	Drgan	ization Name		Date of	f Re	ecei	ipt				
	Mailing Address 4012 S XERXES AVENUE	1.0				06 30 / Y Y Y Y Y 2017							
	City	State		Zip Code								909462	-
	MINNEAPOLIS	MN		55410-1146		Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		115.38									
	Name of Employer (for Individual) United HealthCare Services Inc	Occ Dep		Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year	r-to-Date ▼ 499.98	P.	/R Ded	uctic	on ((\$38.4	46 E	Bi-Wee	ekly)	
	Full Name of Individual (Last, First, Middle Initial, Sann, DAVID, , ,) or Full O	Drgan	ization Name		Date of	f Re	ecei	ipt				
	Mailing Address 8326 ELKO DRIVE	1				^M 06	/	[30	1	Y	үүү 2017	Y
	City	State		Zip Code								264462	
	ELLICOTT CITY	MD		21043-6913		Amount	t of	Ea	ch Re	ece	ipt this	s Perio	d
	FEC ID number of contributing federal political committee.	С						,			9	115	.38
	Name of Employer (for Individual)	Occi	upati	on (for Individual)		Μ	emo	o Ite	em				
	Optum Services, Inc	Dir N	Med (Clin Ops									
		Aggregate	Year	r-to-Date ▼									
	Other (specify)		-y	499.98	P	/R Ded	luctio	on	(\$46.	15	Bi-We	ekly)	
s	UBTOTAL of Receipts This Page (optional)			•••••				,			,	403	.83
т	OTAL This Period (last page this line number onl	ly)		•••••				- -			-		

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle I A. ADAMS, GAYLE Q, , ,	nitial) or Full O	rganization Name	Date of Receipt							
Mailing Address 39 CANYON RIDGE DRIVE			M M / D D / Y Y Y Y 06 30 2017							
City SANDIA PARK	State NM	Zip Code 87047-8509	Transaction ID : PR2576040346270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		288.45							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Strategic Acct Mgmt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1249.95	P/R Deduction (\$96.15 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I B. BYRNES, CHRISTOPHER A, , ,	nitial) or Full O	rganization Name	Date of Receipt							
Mailing Address 705 IRVING PLACE			06 / D D / Y Y Y Y Y 2017							
City DULUTH	State MN	Zip Code 55812-1419	Transaction ID : PR2576042846270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		288.45							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 Ops	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1249.95	P/R Deduction (\$96.15 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I KANDALAFT, KEVIN P, , ,	nitial) or Full O	rganization Name	Date of Receipt							
Mailing Address 4189 WINDSOR POINT PL			06 / D D / Y Y Y Y 06 2017							
City EL DORADO HILLS	State CA	Zip Code 95762-3797	Transaction ID : PR2576043646270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		115.38							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			692.28							
TOTAL This Period (last page this line number	er only)									

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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12	<u> </u>			
	y information copied from such Reports and Sta for commercial purposes, other than using the n												
$\overline{\left(\right. \right. }$	NAME OF COMMITTEE (In Full)												
	UnitedHealth Group Incorporated	I PAC (L	InitedHealth Group PA	C)									
A.	Full Name of Individual (Last, First, Middle Initia MONICAL, KENT, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt						
	Mailing Address 9795 E PIEDRA DRIVE				^M M	/	D D 30	/ Y	2017	Y			
	City SCOTTSDALE	State AZ	Zip Code 85255-9231						5134627 is Period	0			
	FEC ID number of contributing federal political committee.	С					7		115.:	38			
United HealthCare Services Inc			pation (for Individual) Prd		Me	emo	ltem						
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 499.98	F	P/R Dedu	uctic	on (\$38.	46 Bi-We	ekly)				
B.	Full Name of Individual (Last, First, Middle Initia REX, JOHN F, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt						
	Mailing Address 503 HARRINGTON ROAD	1			06 / 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y								
	City WAYZATA	State MN	Zip Code 55391-1512						6004627	0			
	FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual)		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ , 2499.90	P	/R Dedu	ictio	on (\$192	30 Bi-W	eekly)				
C.	Full Name of Individual (Last, First, Middle Initia MCEWAN, JOSHUA M, , ,	l) or Full Or	ganization Name		Date of	Re	ceipt						
	Mailing Address 4711 WEST 28TH STREET	1			06	/	D D D 30	/ Y	2017	Y			
	City SAINT LOUIS PARK	State MN	Zip Code 55416-1927						08574627 is Period	0			
	FEC ID number of contributing federal political committee.	С					y .	. ,	265.	38			
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP T	pation (for Individual) ax		Me	emo	Item						
	Receipt For: Primary General Other (specify)	Aggregate Y	Year-to-Date ▼ 849.98	F	P/R Dedu	uctio	on (\$88.	46 Bi-We	ekly)				
s	UBTOTAL of Receipts This Page (optional)		•				,	. ,	957.0	66			
Т	OTAL This Period (last page this line number on	ıly)	•	-			,						

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TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12							
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or for commercial purposes, other than using			erson for the purpose of soliciting contributions to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	NC)							
Full Name of Individual (Last, First, Middle A. DUDA, MICHAEL R, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 5208 RICHWOOD DRIVE			06 / D D / Y Y Y Y 06 30 2017							
City EDINA	State MN	Zip Code	Transaction ID : PR2576089946270							
	IVIIN	55436-2322	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		288.45							
Name of Employer (for Individual) United HealthCare Services Inc	Occ	upation (for Individual) M A	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼	—							
Primary General Other (specify) ▼		1249.95	P/R Deduction (\$96.15 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. JOHNSON, DARRIN D, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 11 BERTON COURT			Mode D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
City	State	Zip Code								
MIDDLETOWN	DE	19709-9932	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		686.79							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2023.74	P/R Deduction (\$228.93 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. DIAMOND, TIFFANY D, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 5 HARVEY DRIVE			06 30 2017							
City	State	Zip Code	Transaction ID : PR2576105546270							
GOFFSTOWN	NH	03045-2315	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		142.83							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 380.88	P/R Deduction (\$47.61 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numb		· · · · · · · · · · · · · · · · · · ·								

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IT.	EMIZED RECEIPTS	Use separate schedule(s) (ch for each category of the			heck only	y or	ne)	(check only one)						
ITEMIZED RECEIPTS				× 11a		11b	11c	12	,					
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or	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and a	address of any political committee	e to s	SOLICIT COL	ntrib	outions f	rom sucr	n committ	ee.				
	UnitedHealth Group Incorporate	ed PAC (I	UnitedHealth Group PA	AC)										
Α.	Full Name of Individual (Last, First, Middle Ini KENT, CHRIS, , ,		Organization Name		Date of									
	Mailing Address 13273 CARLINGFORD LANE				м м 06	1	30	/ Y	2017	Y				
	City ROSEMOUNT	State MN	Zip Code 55068-6308		Transaction ID : PR2576119046270 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С							115.:	38				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		M	emo	tem							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98]	P/R Ded	ucti	on (\$38.	46 Bi-We	ekly)					
в.	Full Name of Individual (Last, First, Middle Ini BOADO, ANDREA M, , ,	tial) or Full C	Organization Name		Date of	f Re	eceipt							
	Mailing Address 14924 PONDVIEW CIRCLE				м м 06	1	D D 30	/ Y	2017	Y				
	City WAYZATA	State MN	Zip Code 55391-2249	_					4464627	0				
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 681.81										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Deputy Gen Counsel		Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 1818.16]	P/R Deduction (\$227.27 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Ini NELSON, STEVEN H, , ,	tial) or Full C	Organization Name		Date of	f Re	eceipt							
	Mailing Address 640 LOCUST HILLS DRIVE				-									
	City WAYZATA	State MN	Zip Code 55391-1973						14484627 is Period	0				
	FEC ID number of contributing federal political committee.	С			Ē		,	5	576.9	90				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P UHC CEO		Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			•			, .	9	1374.()9				
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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle I FRIDNER, JOHN E, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 782 PENFIELD DR			M M / D D / Y Y Y Y Y 06 30 2017							
City CAROL STREAM	State IL	Zip Code 60188-4738	Transaction ID : PR2576147546270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		117.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) NA VP SIs/Gen	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 507.00	P/R Deduction (\$39.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I B. SCOTT III, GARLAND G, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 8018 PERLETTE COURT			06 30 / Y Y Y Y Y 2017							
City KERNERSVILLE	State NC	Zip Code 27284-9957	Transaction ID : PR2576151046270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		750.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I C. MYHRAN, LYNN M, , ,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 2280 FOX STREET			06 / D D / Y Y Y Y Y 2017							
City ORONO	State MN	Zip Code 55356-9652	Transaction ID : PR2576158446270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		624.99							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Grp SVP, Human Capital	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2291.63	P/R Deduction (\$208.33 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			1491.99							
TOTAL This Period (last page this line numbe	er only)									

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		Use separate schedule(s)	(check only one)								
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12							
	y information copied from such Reports and Sta										
or	for commercial purposes, other than using the n NAME OF COMMITTEE (In Full)	ame and a	address of any political committe	e to solicit contributions from such committee.							
		I PAC (l	UnitedHealth Group P	AC)							
A.	Full Name of Individual (Last, First, Middle Initia BENSON, JEAN C, , ,	l) or Full O	Drganization Name	Date of Receipt							
	Mailing Address 14951 HIGHLAND COURT NE			M M / D D / Y Y Y Y 06 30 2017							
	City PRIOR LAKE	State MN	Zip Code 55372-4109	Transaction ID : PR2576310946270 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		576.90							
	Name of Employer (for Individual) Optum Services, Inc		· · · · · ·	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
в.	Full Name of Individual (Last, First, Middle Initia ELLIOTT III, THOMAS L, , ,	l) or Full O	Drganization Name	Date of Receipt							
	Mailing Address 1880 SUGARLOAF CLUB DR	1		06 / D D / Y Y Y Y 06 30 2017							
	City DULUTH			Transaction ID : PR2576313346270							
	FEC ID number of contributing federal political committee.	C		288.45							
	Name of Employer (for Individual) United HealthCare Services Inc		1 ()	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ , 1249.95	P/R Deduction (\$96.15 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initia KENIRY, DANIEL J, , ,	Inst. Middle Initial) or Full Organization Name Date of Receipt ND COURT NE Image: State initial initinitial inininitialinininitial ininitial initial initial initial	Date of Receipt								
	Mailing Address 5553 LITTLE FALLS ROAD			06 30 2017							
	City ARLINGTON			Transaction ID : PR2577379346270 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		576.90							
	Name of Employer (for Individual) United HealthCare Services Inc			Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)			1442.25							
т	OTAL This Period (last page this line number on	ly)									

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		Use separate schedule(s) (che for each category of the				/ or	ne)						
11	EMIZED RECEIPTS			4 11a		11b	11c	12	17				
	y information copied from such Reports and Sta for commercial purposes, other than using the n							soliciting	contribu				
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	AC)									
A.	Full Name of Individual (Last, First, Middle Initia ASNER, BARTLEY S, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt						
	Mailing Address 25 OFFSHORE				м м 06	/	D D D 30) / Y	ү ү 2017	Y			
	City NEWPORT BEACH	State CA	Zip Code 92657-2162		Transaction ID : PR2578819446270 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			704.25								
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual)) Med Grp Physn		Me	emc	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1948.20	P/R Deduction (\$234.75 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initia DUFFEY, KRISTY O, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt		v v v v				
	Mailing Address 8906 WINGED FOOT DRIVE	State	Zip Code		06	/	30		2017				
	PASADENA	MD	21122-6670				-			0			
	FEC ID number of contributing federal political committee.	С			576.90								
	Name of Employer (for Individual) Optum Services, Inc	Occupation (for Individual) Chief Clin Off				Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)									
С.	Full Name of Individual (Last, First, Middle Initia CIAVOLA, LAURA, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt		<pre>/ 2017 2578819446270 eipt this Period 704.25 5 Bi-Weekly) / 2017 2578823246270 eipt this Period 576.90 0 Bi-Weekly) / 2017 2578824346270 eipt this Period 576.90</pre>				
	Mailing Address 1686 WILDFIRE LANE				06 M	1	30			Y			
	City FRISCO	State TX	Zip Code 75033-7325							0			
	FEC ID number of contributing federal political committee.	С			<u> </u>		,		576.	90			
	Name of Employer (for Individual) United HealthCare Services Inc	Occu SVP	ipation (for Individual) Ops		Me	emo	tem						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)		•	•			, .	.,	1858.	05			
т	OTAL This Period (last page this line number or	ly)	•••••	•	_		_						

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
or for commercial purposes, other than using			erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle A. BUSBEE, NATHANAEL, , ,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 611 ORPINGTON RD			06 / D D / Y Y Y Y Y 06 30 2017									
City	State MD	Zip Code	Transaction ID : PR2578826746270									
BALTIMORE		21229-2128	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		115.38									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Bus Process	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Primary General Other (specify) ▼		499.98	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. COHEN, JAY J, , ,	Initial) or Full C	Organization Name	Date of Receipt									
Mailing Address 98 VISTA DEL SOL			06 / Y Y Y Y 06 30 / 2017									
City	State	Zip Code	Transaction ID : PR2578829646270									
LAGUNA BEACH	CA	92651-6748	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		288.45									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) O Med Grp Physn	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1249.95	P/R Deduction (\$96.15 Bi-Weekly)									
Full Name of Individual (Last, First, Middle C. Miller, TRACI R, , ,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 729 PINE TRAIL			06 30 2017									
City	State	Zip Code	Transaction ID : PR2578829946270									
ARNOLD	MD	21012-1628	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		1333.32									
Name of Employer (for Individual)		upation (for Individual)	Memo Item									
Optum Services, Inc	Dir I	Med Clin Ops	_									
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify)		1333.32	P/R Deduction (\$666.66 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional).		••••••	1737.15									
TOTAL This Period (last page this line numb	er only)											

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	-	Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17									
			person for the purpose of soliciting contributions are to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle FARMER, RACHEL C, , ,	e Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 1929 ALBIZIA COURT			06 30 Y Y Y Y 2017									
City BATON ROUGE	State LA	Zip Code 70808-3973	Transaction ID : PR2595208346270 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		190.38									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 674.98	P/R Deduction (\$63.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. LONIGRO, ANTHONY S, , ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 3186 WEST CANYON AV			06 / D / Y Y Y Y 06 / 30 / 2017									
City SAN DIEGO	State CA	Zip Code 92123-5426	Transaction ID : PR2595225846270 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		115.38									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middle C. SCOTT, WESTON PRICE, , ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 1050 LAKE CAROLYN PK APT 4349		Zin Onda	M M / D D / Y Y Y Y 06 / 30 / 2017									
City IRVING	State TX	Zip Code 75039-3999	Transaction ID : PR2601125346270 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		92.31									
Name of Employer (for Individual) Optum Services, Inc	Occi Med	upation (for Individual) Dir	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 400.01	P/R Deduction (\$30.77 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional))		398.07									
TOTAL This Period (last page this line numb	per only)											

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

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		Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle SHORT, MARIANNE D, , ,	nitial) or Full C	organization Name	Date of Receipt							
Mailing Address 2215 SUMMIT AVENUE			M M / D D / Y Y Y Y Y 06 30 2017							
City SAINT PAUL	State MN	Zip Code 55105-1002	Transaction ID : PR2601133546270							
FEC ID number of contributing	_		Amount of Each Receipt this Period							
federal political committee.	С		576.90							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 Gen Counsel	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General Other (specify) ▼		2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I	nitial) or Full C	Prganization Name								
B. SWANSON, AMY N, , ,			Date of Receipt							
Mailing Address 621 SPARROW WAY			06 / ^D J ^Y ^Y ^Y ^Y ^Y ^Y ^Y							
City WADSWORTH	State OH	Zip Code 44281-7716	Transaction ID : PR2601140746270							
FEC ID number of contributing		44201-7710	Amount of Each Receipt this Period							
federal political committee.	С		288.45							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify) ▼		, 1249.95	P/R Deduction (\$96.15 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I c. KAPROW, MARC GORDON, , ,	nitial) or Full C	Prganization Name	Date of Receipt							
Mailing Address 5079 SW 89TH AVE			06 30 / Y Y Y Y 2017							
City COOPER CITY	State FL	Zip Code 33328-3636	Transaction ID : PR2601179046270							
		55520-5050	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		115.38							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir	Memo Item							
Receipt For:		Year-to-Date ▼								
Primary General Other (specify)		499.98	P/R Deduction (\$38.46 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			980.73							
TOTAL This Period (last page this line number	er only)	······								

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11b	11c	12	<u> </u>			
Any information copied from such Reports an or for commercial purposes, other than using						soliciting	contribut				
		uness of any political committee		JIIIID	uuuuis II	Sucr	Committe				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (l	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle MCBEATH, ROBERT, , ,	Initial) or Full O	rganization Name	Date of	of Re	ceipt						
Mailing Address 2537 RED ARROW DRIV			06	VI /	30	/ Y	2017	Y			
City LAS VEGAS	State NV	Zip Code 89135-1628		Transaction ID : PR2605708946270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С				-y		714.2	27			
Name of Employer (for Individual) Southwest Medical Assoc. Inc.		upation (for Individual) D Med Grp Physn		/lemo	tem						
Receipt For: Primary General Other (specify) ▼	Primary General Other (specify) ▼ 1904.72						15 16 of soliciting contributions s from such committee. 30 / 2017 2017 2017 2017 2017 2017 2017 2017 2017 2017 2017 2017 2017 2017 238.09 Bi-Weekly) 30 / 2017 2017 217 238.09 Bi-Weekly) 30 115.38 1 38.46 Bi-Weekly) 30 / 2017 2017 2017 2017 2017 2017 2017 2017 2017 2017 2017 2017 2017 2017 2017 2017 2017 2017 2017 2017				
Full Name of Individual (Last, First, Middle DAVIS, KELLY MARIE, , ,	Initial) or Full O	rganization Name	Date of	of Re	ceipt		16 ng contributions committee. 2017 5708946270 this Period 714.27 Weekly) 2017 5734246270 this Period 115.38 Veekly) 2017 5736946270 this Period 5736946270 this Period 5736946270 this Period 5736946270 this Period 576.90				
Mailing Address 905 N LEBANON ST	1		06	VI /	D D 30						
City ARLINGTON	State VA	Zip Code 22205-1433			-)			
FEC ID number of contributing federal political committee.	C										
Name of Employer (for Individual) United HealthCare Services Inc		Occupation (for Individual) Govt Affs Dir			Item						
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify) ▼		499.98	P/R Dee	ductio	on (\$38.4	46 Bi-We	ekly)				
Full Name of Individual (Last, First, Middle MALONE, TRACY, , ,	Initial) or Full O	rganization Name	Date of	of Re	ceipt		16 ing contributior ing contributior 2017 5708946270 this Period 714.27 Weekly) 2017 5734246270 this Period 115.38 /eekly) 2017 5736946270 this Period 576.90 Weekly)				
Mailing Address 900 S 22ND ST	04	Zip Ood-	06		30		2017				
City ARLINGTON	State VA	Zip Code 22202-2625						U			
FEC ID number of contributing federal political committee.	С				y .	. ,	576.9	90			
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) External Affs		Vemo	tem						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R De	ducti	on (\$192	2.30 Bi-W	/eekly)				
SUBTOTAL of Receipts This Page (optional))				,	. ,	1406.5	55			
TOTAL This Period (last page this line num	per only)										

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		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using			person for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	4C)							
Full Name of Individual (Last, First, Middle SMITH, LARRY, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 1164 RUE CHINON			06 30 2017							
City MANDEVILLE	State LA	Zip Code 70471-1213	Transaction ID : PR2605760646270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		57.69							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Compli	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 249.99	P/R Deduction (\$19.23 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. WEISSEL, MICHAEL E, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 99 HAGEN ROAD			06 / 30 / Y Y Y Y 2017							
City NEWTON	State MA	Zip Code 02459-2731	Transaction ID : PR2606842946270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		576.90							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) um Exec	Memo Item							
Receipt For: Primary General Other (specify) ▼	· _ ·	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. MATECZUN, JOHN MATTHEW		rganization Name	Date of Receipt							
Mailing Address 1908 HARBOURSIDE DRI UNIT 403	1									
City LONGBOAT KEY	State FL	Zip Code 34228-4207	Transaction ID : PR2606845146270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		576.90							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) s M&V	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			1211.49							
TOTAL This Period (last page this line numb	er only)									

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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		4 11a		11b	11c	12	1 -7			
	y information copied from such Reports and Sta for commercial purposes, other than using the								contribu				
$\overline{)}$	NAME OF COMMITTEE (In Full)												
/	UnitedHealth Group Incorporated	d PAC (L	United Health Group PA	AC)									
A.	Full Name of Individual (Last, First, Middle Initia KENNEDY, SHELLEY L, , ,	al) or Full Or	rganization Name		Date of	Re	ceipt						
	Mailing Address 706 SUE BARNETT				м м 06	1	30	/ Y	2017	Y			
	City HOUSTON	State TX	Zip Code 77018-5412		Transaction ID : PR2607803046270 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С											
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Service Acct Mgmt		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00	P/R Deduction (\$50.00 Bi-Weekly)									
В.	Full Name of Individual (Last, First, Middle Initia	al) or Full Or	rganization Name		Date of	Re	ceipt		2017 20806746270				
	Mailing Address 173 LAURELWOOD DRIVE	State											
	NOVATO	CA	Zip Code 94949-8427							0			
	FEC ID number of contributing federal political committee.	С			124.98								
	Name of Employer (for Individual) Optum Services, Inc	Occu VP (Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 416.60	P/R Deduction (\$41.66 Bi-Weekly)									
С.	Full Name of Individual (Last, First, Middle Initia	al) or Full Or	rganization Name		Date of	Re	ceipt		16 ing contributions uch committee. 2017 07803046270 this Period 150.00 Weekly) 2017 07803046270 this Period 150.00 Weekly) Y 2017 07806746270 this Period 124.98 Weekly) Y 2017 07806746270 this Period 124.98 Weekly) Y 2017 03059546270 this Period 115.38				
	Mailing Address 60 PINEAPPLE STREET APT 3J	01-1-	75 0 4		^M 06	1	30		2017				
	City BROOKLYN	State NY	Zip Code 11201-6839							0			
	FEC ID number of contributing federal political committee.	С			<u> </u>		,	. ,	115.	38			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		Me	emc	Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)		•	•			,	,	390.3	36			
т	OTAL This Period (last page this line number of	nly)	•••••	•	_ .		,						

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
or for commercial purposes, other than us			person for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)	orated PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Mic A. FLYNN, VIRGINIA A, , ,	Idle Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 30 VAN TERRACE			06 30 / Y Y Y Y Y								
City SPARKILL	State NY	Zip Code 10976-1406	Transaction ID : PR2608061246270								
FEC ID number of contributing federal political committee.	С	10970-1400	Amount of Each Receipt this Period								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Mic FERGUSON, SANDRA, , ,	Idle Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 710 SOUTH SHERATC	DN DRIVE		06 30 / Y Y Y Y Y 2017								
City AKRON	State OH	Zip Code 44319-1918	Transaction ID : PR2608061946270 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		115.38								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) sc Dir Med Clin Ops	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Mic C. Bodell, LESLIE, , ,	Idle Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 18710 34TH AVENUE			06 / D D / Y Y Y Y 06 2017								
City PLYMOUTH	State MN	Zip Code 55447-1000	Transaction ID : PR2609811346270								
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period								
Name of Employer (for Individual) Optum Services, Inc	Occ VP 0	upation (for Individual) Ops	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 357.14	P/R Deduction (\$357.14 Bi-Weekly)								
SUBTOTAL of Receipts This Page (option	nal)		587.90								
TOTAL This Period (last page this line nu	umber only)										

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				Detailed Summary Page	×	11a		-	1b		11c	12	_		
	y information copied from such Reports and State for commercial purposes, other than using the na								se of						
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated											Johnmitt			
A.	Full Name of Individual (Last, First, Middle Initial) WRIGHT, NORMAN L, , ,	or Full O	Orgar	nization Name		Date of	Re	ece	eipt						
	Mailing Address 5205 KELSEY TERRACE					06 / ^D 06 / ^Y 2017									
	City EDINA	State MN		Zip Code 55436-1172	A			-					0		
	FEC ID number of contributing federal political committee.	С				576.90									
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) Ops		Me	emo	o It	em						
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 2499.90	P/	P/R Deduction (\$192.30 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initial)	or Full O	Orgar	Date of Receipt											
	Mailing Address 5000 FRANCE AVENUE S UNIT 33	State		Zin Codo		м м 06	/	30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					Y		
	City MINNEAPOLIS	State MN		Zip Code 55410-2061	A)		
	FEC ID number of contributing federal political committee.	С				681.						31			
	Name of Employer (for Individual) United HealthCare Services Inc	Occ SVF		Memo Item											
	Receipt For: µ Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 2045.43	P/	P/R Deduction (\$227.27 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial) SMITH, MELANIE J, , ,	or Full O	Orgar	nization Name		Date of	Re	ece	eipt	30 / 2017 30 2017 D: PR2609812346270 n Receipt this Period 576.90 n 192.30 Bi-Weekly) t 30 2017 D: PR2612521846270 n Receipt this Period 681.81 n 227.27 Bi-Weekly) t 2017 D: PR2612527646270 n Receipt this Period 142.83 n					
	Mailing Address 15340 HIGHLAND PLACE	1		1		^M 06	1	L	D D D 30	J.	/ Y	2017			
	City MINNETONKA	State MN		Zip Code 55345-4613	A								0		
	FEC ID number of contributing federal political committee.	С				_		,			y	142.8	33		
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) uit Ops		Me	emo	o It	tem						
	Receipt For: A Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 380.88	P/R Deduction (\$47.61 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)			•				,		l	9	1401.5	54		
Т	OTAL This Period (last page this line number only	y)		•••••				-,-			- J				

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			Detailed Summary Page	×	11a		11b	11c	12						
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	E OF COMMITTEE (In Full) tedHealth Group Incorporate	ed PAC (UnitedHealth Group PA	NC)											
	Jame of Individual (Last, First, Middle In KER, MICHAEL, , ,	itial) or Full C	Organization Name		Date of	F Re	acaint								
	ng Address 2383 HIGHOVER TRAIL				06 30 2017										
City		State	Zip Code		Trans	act	ion ID :	PR26125	53054627	0					
CHA	NHASSEN	MN	55317-4744	_	Amoun	t of	Each R	eceipt th	is Period						
	ID number of contributing al political committee.	С							576						
	e of Employer (for Individual) d HealthCare Services Inc		upation (for Individual) Cust Svs		М	emo	tem								
Rece	ipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	F	P/R Ded	ucti	on (\$192	2.30 Bi-W	/eekly)						
	lame of Individual (Last, First, Middle In CKMANN, NATASHA, , ,	itial) or Full C	Organization Name		Date of	f Re	eceipt								
	ng Address 34 WEST 17TH STREET #3				06	1	D D 30	/ Y	ү 2017	Y					
City		State	Zip Code					PR26125							
	YORK	NY	10011-5709		Amoun	t of	Each R	eceipt th	is Period						
	ID number of contributing al political committee.	С			Ľ				576	90					
	e of Employer (for Individual) n Services, Inc		cupation (for Individual) Gen Mgmt		M	emo	ltem								
Rece	pt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P	P/R Ded	uctio	on (\$192	2.30 Bi-W	'eekly)						
Full N	Name of Individual (Last, First, Middle In	itial) or Full C	Organization Name		Date of	f Re	eceipt								
Mailir	ng Address 57 ATKINSON LANE				^M 06	/	D D 30	/ Y	2017	Y					
City	BURY	State MA	Zip Code 01776-1938					PR26133							
		IVIA	01770-1936	_	Amoun	t of	Each R	eceipt th	is Period						
	ID number of contributing al political committee.	С			Ļ.		y	y	214.	26					
	e of Employer (for Individual) m Services, Inc		upation (for Individual) Mktg Bus Dev		М	emo	o Item								
Rece	pt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 571.36	F	P/R Ded	lucti	on (\$71.	42 Bi-We	eekly)						
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			Detailed Summary Page	×	11a		11b		11c	12	
					13		14		15	16	17
	y information copied from such Reports and State for commercial purposes, other than using the na										
	NAME OF COMMITTEE (In Full)			\sim							
/	UnitedHealth Group Incorporated		-	(C)							
Α.	Full Name of Individual (Last, First, Middle Initial) TAYLOR, SCOTT ANTHONY, , ,	or Full O	Organization Name		Date of	Re	ceipt	t			
	Mailing Address 7927 RHODE ISLAND CIRCLE				^M 06	/		30	/ Y	2017	Y
	City BLOOMINGTON	State MN	Zip Code 55438-1194							39234627	0
			00400-1194	_ A	mount	of	Each	ו Re	ceipt th	iis Period	_
	FEC ID number of contributing federal political committee.	С				-	-		- 45-	57.	69
	Name of Employer (for Individual) Optum Services, Inc	Occi VP I	upation (for Individual) Fin	1	Me	emo	Iten	n			
		Aggregate	Year-to-Date V								
	Primary General Other (specify) ▼	249.99	P/	R Dedu	uctio	on (\$	19.2	3 Bi-We	eekly)		
B.	Full Name of Individual (Last, First, Middle Initial) VAIL, ABIGAIL LONDON, , ,	or Full O	Organization Name		Date of	Re	ceipt	t			
	Mailing Address 3636 DEXTER DRIVE				м м 06	/		30	/ Y	2017	Y
	City	State	Zip Code							31564627	0
	TALLAHASSEE	FL	32312-1022	A	mount	of	Each	n Re	ceipt th	is Period	
	FEC ID number of contributing federal political committee.	С					7		-9	190.	38
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) vt Affs Dir		Me	emo	Iten	n			
		Aggregate	Year-to-Date V								
	Primary General Other (specify) ▼		, 674.98	P/	R Dedu	uctio	on (\$	63.40	6 Bi-We	eekly)	
C.	Full Name of Individual (Last, First, Middle Initial)	or Full O	Organization Name		Date of	Re	ceipt	t			
	Mailing Address 1697 COUNCIL BLUFF DRIVE N				м м 06	1		30	/ Y	2017	Y
	City ATLANTA	State GA	Zip Code 30345-4137							32234627	0
			30343-4137	A	mount	of	Each	n Re	ceipt th	is Period	
	FEC ID number of contributing federal political committee.	С					9		- <u> </u>	65.	19
	Name of Employer (for Individual)	Осси	upation (for Individual)		Me	emo	lter	n			
	United HealthCare Services Inc		S Dir Sls								
	Receipt For:	Aggregate	Year-to-Date ▼		B Dod		on /¢	21 7	3 Bi-We	a a k lu	
	Other (specify)		217.30			ucut	UI (⊅	o∠1.7	0 01-146	CCNIY)	
s	UBTOTAL of Receipts This Page (optional)						7		9	313.	26
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	y information copied from such Reports and S									
or	for commercial purposes, other than using the	e name and a	ddress of any political committee	e to s	olicit coi	ntrib	outions f	rom such	n committ	ee.
$\left \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)						
<u> </u>	Full Name of Individual (Last, First, Middle Ini Burkholder, CHAD, , ,	itial) or Full O	rganization Name		Date of	F Do				
А.	Mailing Address 2423 DUBONNET DRIVE					/	30	/ Y	2017	Y
	City	State	Zip Code			act		PR26150)7344627	n
	MACUNGIE	PA	18062-8857						is Period	•
	FEC ID number of contributing federal political committee.	С							401.0)9
	Name of Employer (for Individual) Optum Services, Inc	Occi VP (upation (for Individual) Ops		M	emo	tem			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 785.69]	P/R Ded	ucti	on (\$324	4.17 Bi-W	/eekly)	
в.	Full Name of Individual (Last, First, Middle Ini SOLOMON, RANDALL L, , ,	itial) or Full O	rganization Name		Date of	f Re	eceipt			
	Mailing Address 760 HAIGHT STREET				06	1	30	/ Y	2017	Y
	City	State CA	Zip Code						7154627)
	SAN FRANCISCO		94117-3317	_	Amount	t of	Each R	eceipt th	is Period	_
	FEC ID number of contributing federal political committee.	C			Ľ.		-	-	115.3	38
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Behvrl Med Dir		M	emo	ltem			
	Receipt For:	Aggregate	Year-to-Date 🔻							
	Other (specify)		499.98] F	P/R Ded	uctio	on (\$38.	46 Bi-We	ekly)	
С.	Full Name of Individual (Last, First, Middle Ini BIRNBAUM, MICHAEL, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt			
	Mailing Address 55 DEAN STREET				06	1	30	/ Y	2017	Y
	City BROOKLYN	State NY	Zip Code 11201-6245				-		5 7164627 is Period	0
	FEC ID number of contributing federal political committee.	С			Ľ		,	9	642.8	34
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ilthcare Econ		M	emo) Item			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2214.24	1	P/R Ded	lucti	on (\$214	4.28 Bi-W	/eekly)	
s	UBTOTAL of Receipts This Page (optional)			•			, .		1159.3	31
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	EMIZED RECEIPTS			for each category of the Detailed Summary Page		X 11a 13		11b	11c 15	12	17
	y information copied from such Reports and Stat for commercial purposes, other than using the n					for the		ose of a	soliciting	g contribu	utions
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	Jn	itedHealth Group PA	AC)						
A.	Full Name of Individual (Last, First, Middle Initia NIEMYER, ELIZABETH S, , ,	l) or Full O	rga	nization Name		Date o	f Re	ceipt			
	Mailing Address 9237 ENGLISH MEADOW WAY	,				06	/	о 30	/ Y	ү ү 2017	Y
	City LAYTONSVILLE	State MD		Zip Code 20882-1348				-		68284627	-
			_	20002-1340	_	Amoun	t of I	Each Re	eceipt th	nis Perioo	ł
	FEC ID number of contributing federal political committee.	С	_			Ľ		,		376	.92
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP (•	tion (for Individual)		M	lemo	Item			
	Receipt For:		· ·	ar-to-Date 🔻							
	Primary General Other (specify) ▼		-	2299.92		P/R Dec	luctio	on (\$92.3	31 Bi-W	ekly)	
B	Full Name of Individual (Last, First, Middle Initia KNUTSON, DIANE M, , ,	l) or Full O	rga	nization Name		Date o	f Ro	coint			
J.	Mailing Address 4320 POLARIS LANE NORTH							30	/ Y	2017	Y
	City	State		Zip Code		Trans	actio	on ID : F	PR2615	92394627	70
	PLYMOUTH	MN		55446-2658						nis Period	
	FEC ID number of contributing federal political committee.	С						,		150	.00
	Name of Employer (for Individual) Optum Services, Inc		•	tion (for Individual) k Pricing		M	lemo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 350.00	1	P/R Ded	luctio	n (\$50.0	00 Bi-We	ekly)	
<u>с.</u>	Full Name of Individual (Last, First, Middle Initia BAKSHI, BIKRAM, , ,	l) or Full O	rga	nization Name		Date o	f Red	ceipt			
	Mailing Address 9036 BRONSON DRIVE					M M		30	/ Y	2017	Y
	City	State		Zip Code		Trans	sacti	on ID : I	PR2615	9548462 ⁻	70
	РОТОМАС	MD		20854-4606	_	Amoun	t of I	Each Re	eceipt th	nis Perioo	k
	FEC ID number of contributing federal political committee.	С	_					,	, ,	384	.60
	Name of Employer (for Individual) Optum Services, Inc	Occu Optu		tion (for Individual) Exec		N	lemo	Item			
	Poppint For:	1.		ar-to-Date V							
	Primary General Other (specify)		-	2307.60	1	P/R Dec	ductio	on (\$192	30 Bi-V	Veekly)	
s	UBTOTAL of Receipts This Page (optional)				•					911.	.52
т	OTAL This Period (last page this line number on	ıly)			- •	Γ.					

SCHEDULE A (FEC Form 3X) __ _ _ _ _ _ _ _ - - - - -

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	-	Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)
Full Name of Individual (Last, First, Middle TRAW, KEVIN JON, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 518 13TH ST			06 30 / Y Y Y Y Y
City HUNTINGTON BEACH	State CA	Zip Code 92648-4038	Transaction ID : PR2617365646270 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		115.38
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus Process	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)
Full Name of Individual (Last, First, Middle JOHNSON, MARK OWEN, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 8687 RILEY CURVE			06 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City CHANHASSEN	State MN	Zip Code 55317-4822	Transaction ID : PR2617933946270
		33317-4022	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		138.45
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify) ▼		599.95	P/R Deduction (\$46.15 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. BROWN, ROGER ALAN, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 512 EAST STATE AVE			06 / D D / Y Y Y Y 06 30 2017
City PHOENIX	State AZ	Zip Code 85020-4940	Transaction ID : PR2622557946270 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		362.34
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Nktg Bus Dev	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 929.70	P/R Deduction (\$120.78 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)			616.17
TOTAL This Period (last page this line numb	er only)		

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	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page				11b	11c	12	·			
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<u> </u>	AME OF COMMITTEE (In Full)	name and a	duress of any political committee	10 30					r commu				
	JnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	C)									
A	ull Name of Individual (Last, First, Middle Init WENGER, BRIAN, , ,	tial) or Full O	rganization Name		Date of Receipt								
_	lailing Address 818 GOODRICH AVE				06 / 06 / Y Y Y Y 06 30 / 2017								
	ity SAINT PAUL	State MN	Zip Code 55105-3345	_					70334627 is Period	0			
	EC ID number of contributing aderal political committee.	С							384.0	30			
С	ame of Employer (for Individual) Optum Services, Inc		upation (for Individual) Group Gen Counsel		Me	emo	Item						
R	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2307.60	F	P/R Ded	uctio	on (\$192	2.30 Bi-W	/eekly)				
	ull Name of Individual (Last, First, Middle Init MILLER, JOHN SCOTT, , ,	tial) or Full O	rganization Name		Date of	Re	ceipt						
_	lailing Address 3107 ECTOR				^M 06	/	30	/ Y	2017	Y			
	ity IOUSTON	State TX	Zip Code 77056-4037						0474627	00			
F	EC ID number of contributing ederal political committee.	C	11030-4031		Amount	. Of	Each R	eceipt th	is Period 57.0	69			
	lame of Employer (for Individual) ptum Services, Inc		upation (for Individual) Pharm Ops		Me	emo	Item						
R	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 249.99	P	/R Dedu	uctio	on (\$19.	23 Bi-We	ekly)				
	ull Name of Individual (Last, First, Middle Init MULES, REBECCA HUMBERT, ,		rganization Name		Date of	Re	ceipt						
_	lailing Address 660 DOVER STREET	1			06 ^M	/	30		2017	Y			
	ity BALTIMORE	State MD	Zip Code 21230-2228						14264627 is Period	0			
	EC ID number of contributing deral political committee.	С			<u> </u>		y .		190.3	38			
ι	ame of Employer (for Individual) Inited HealthCare Services Inc		upation (for Individual) Govt Affs		M	emo	tem						
п	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 674.98	F	P/R Ded	uctio	on (\$63.	.46 Bi-We	ekly)				
SU	BTOTAL of Receipts This Page (optional)		•				y .	,	632.6	37			
U R	Inited HealthCare Services Inc leceipt For: Primary General Other (specify)	Dir C	Govt Affs Year-to-Date ▼ 674.98	F	P/R Ded	uctio	on	(\$63	(\$63.46 Bi-We	n (\$63.46 Bi-Weekly) 632.6			

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	EMIZED RECEIFTS			Detailed Summary Page	×	-		-	lb	11	H		12	
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	y information copied from such Reports and Stat for commercial purposes, other than using the n													
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (I	Uni	itedHealth Group PA	C)									
<u> </u>	Full Name of Individual (Last, First, Middle Initial COLLETTE, CHRISTOPHER LOUIS, , ,	l) or Full C	Orgai	nization Name		Date of	Re	a cei	int					
~ ·	Mailing Address 786 CAMBERWELL DRIVE					06	/		D D 30	/	Y	ү 20	17	Y
	City	State		Zip Code	- '	Trans	acti	ion		PR26	2549		- 10 C)
	EAGAN	MN		55123-3939		Amount								-
	FEC ID number of contributing federal political committee.	С						-					660.8	4
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) itedHlth Grp		M	emo	o Ite	em					
	Receipt For:	Aggregate	Yea	ur-to-Date ▼										
	Primary General Other (specify) ▼		-	2136.36	P	/R Ded	uctio	on	(\$220).28 E	3i-W€	ekl	y)	
В.	Full Name of Individual (Last, First, Middle Initia RELLER, TAMI, , ,	l) or Full C	Orgai	nization Name		Date of	Re	ecei	ipt					
	Mailing Address 5120 MIRROR LAKES DRIVE					м м 06	/	ľ	D D 30	/	Y	Y 201	17 17	Y
	City EDINA	State MN		Zip Code 55436-1342		Trans Amount								
	FEC ID number of contributing federal political committee.	С						-					576.9	0
	Name of Employer (for Individual) Optum Services, Inc			tion (for Individual) gment CEO		M	emo	o Ite	em					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 2499.90	P/	/R Ded	uctio	on	(\$192	30 B	i-We	ekly	y)	
с.	Full Name of Individual (Last, First, Middle Initial SMITH, LISA MARIE, , ,	l) or Full C	Orgai	nization Name		Date of	Re	ecei	ipt					
	Mailing Address 5040 INTERLACHEN BLUFF	1				^M 06	1	C	30	/	Y	20°	17 [°]	Y
	City EDINA	State MN		Zip Code 55436-1360		Trans)
	FEC ID number of contributing federal political committee.	C				Amount	tof	Ea	ach Re	eceip	t this		eriod 130.4	4
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) Mgmt	_	M	emc	o It	em					
	Poppint For:			ur-to-Date ▼ 434.80	P	/R Ded	ucti	on	(\$43.4	48 Bi	-Wee	∘kly)	
s	UBTOTAL of Receipts This Page (optional)							9			_	1	368.1	8
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			for each category of the Detailed Summary Page	
	y information copied from such Reports and Stat for commercial purposes, other than using the na			
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	.C)
Α.	Full Name of Individual (Last, First, Middle Initial COWEN, WESLEY RYAN, , ,) or Full O	rganization Name	Date of Receipt
	Mailing Address 825 VIRGINIA PARK CIRCLE N	E		06 / D D / Y Y Y Y 06 30 2017
	City	State	Zip Code	Transaction ID : PR2625532346270
	ATLANTA	GA	30306-4081	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.38
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Dir Acct Mgmt	Memo Item
	Receipt For:		Year-to-Date ▼	_
	Primary General Other (specify) ▼		499.98	P/R Deduction (\$38.46 Bi-Weekly)
В.	Full Name of Individual (Last, First, Middle Initial CULHANE, DEBORAH ANNE, , ,) or Full O	rganization Name	Date of Receipt
	Mailing Address 100 COVE WAY UNIT 301			06 30 2017
	City	State	Zip Code	Transaction ID : PR2626356046270
	QUINCY	MA	02169-5857	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		669.63
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2098.19	P/R Deduction (\$223.21 Bi-Weekly)
с.	Full Name of Individual (Last, First, Middle Initial HINES, GREGORY M, , ,) or Full O	rganization Name	Date of Receipt
	Mailing Address 3660 SILVERWOOD RD			06 30 2017
	City	State	Zip Code	Transaction ID : PR2626886546270
	WEST SACRAMENTO	CA	95691-5403	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		265.38
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 849.98	P/R Deduction (\$88.46 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)		•	1050.39
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	nformation copied from such Reports and State commercial purposes, other than using the na													
\ NA	AME OF COMMITTEE (In Full) InitedHealth Group Incorporated													
	II Name of Individual (Last, First, Middle Initial) RANHEIM, CRAIG, , ,	or Full C	Drga	nization Name		Da	te of	Re	cei	pt				
Ma	ailing Address 5228 ABBOTT AVENUE SOUTH						06 [™]	1	Г	30		Y	ү ү 2017	Y
Ci	,	State		Zip Code		Т	rans	acti	on	ID :	PR	26283	293462	70
	INNEAPOLIS	MN	_	55410-2125	_	Am	ount	of	Ea	ch R	ece	ipt this	s Perio	t i
	EC ID number of contributing deral political committee.	C							,			- J -	115	.38
	ame of Employer (for Individual) btum Services, Inc		•	tion (for Individual) Mgmt			Me	emo	lte	əm				
Re	eceipt For:	ggregate	Yea	ar-to-Date ▼										
	Primary General Other (specify) ▼		-	499.98	F	P/R	Dedu	uctio	on ((\$38.	46 I	Bi-Wee	ekly)	
	III Name of Individual (Last, First, Middle Initial) AN DER WALDE, LAMBERT, , ,	or Full C	Drga	nization Name		Da	te of	Re	cei	pt				
	ailing Address 45 AUDUBON CAUSEWAY						м 06	/	ľ	30	/	Y	2017	Y
Ci L/	ty ANTANA	State FL		Zip Code 33462-4756									323462 s Perio	
	EC ID number of contributing deral political committee.	С							,				576	.90
	ame of Employer (for Individual) ited HealthCare Services Inc		•	tion (for Individual) th Reform/Modernizatn			Me	emo	lte	əm				
Re	Primary General Other (specify) ▼	vggregate	Yea	ar-to-Date ▼ 2499.90	P	9/R	Dedu	uctic	on ((\$192	2.30	Bi-We	eekly)	
	III Name of Individual (Last, First, Middle Initial)	or Full C	Drga	nization Name		Da	te of	Re	cei	pt				
Ma	ailing Address 3106 FABER DRIVE					M	06 ^M	/	Γ	30		Y	2017	Y
Ci	-	State		Zip Code		Т	rans	acti	ion	ID :	PR	26288	261462	70
	ALLS CHURCH	VA	_	22044-1711	-	Am	ount	of	Ea	ch R	ece	ipt this	s Perio	k
	EC ID number of contributing deral political committee.	С				Ē	_		y			y	624	.03
	ame of Employer (for Individual) nited HealthCare Services Inc		•	tion (for Individual) fs Dir			Me	emo	o Ite	em				
Re	Primary General Other (specify)	vggregate	Yea	ar-to-Date ▼ 2295.83	F	P/R	Ded	uctio	on	(\$208	8.01	Bi-We	eekly)	
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	y information copied from such Reports and State for commercial purposes, other than using the na								se of			ributic	
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Uni	tedHealth Group PA	C)								
Α.	Full Name of Individual (Last, First, Middle Initial) JARVIE, BRUCE MICHAEL, , ,	or Full O	Orgar	nization Name		Date o	f Re	ecei	ipt				
	Mailing Address 18750 KIPHEART DRIVE	State		Zip Code		06 -		L	30		201		
	LEESBURG	VA		20176-8220						PR2629 eceipt t			
	FEC ID number of contributing federal political committee.	С				Amour		La				15.38	3
	Name of Employer (for Individual) Optum Services, Inc	Occ VP	•	ion (for Individual)		N	lemo	o Ite	em				
	Receipt For: A Primary General Other (specify) ▼	ggregate	Yea	r-to-Date ▼ 499.98	P	/R Dec	ducti	ion	(\$38.4	46 Bi-W	'eekly)		
	Full Name of Individual (Last, First, Middle Initial) WONG, MING TED, , ,	or Full O	rgar	nization Name		Date o	of Re	ecei	ipt				
	Mailing Address 21066 ASHLEY LANE					^M 06	/	Г	D D 30	/ Y	2017		
	City LAKE FOREST	State CA		Zip Code 92630-5867				-		PR2629 eceipt t			
	FEC ID number of contributing federal political committee.	С						-			2	88.45	5
	Name of Employer (for Individual) United HealthCare Services Inc			ion (for Individual) Mgmt		N	lemo	o Ite	em				
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 1249.95	P	/R Dec	luctio	on	(\$96.′	15 Bi-W	eekly)		
	Full Name of Individual (Last, First, Middle Initial)	or Full O	Orgar	nization Name		Date o	of Re	ecei	ipt				
	Mailing Address 16 BEACH WOOD ROAD					^M 06	/	E	D D 30		2017		
	City FERNANDINA BEACH	State FL		Zip Code 32034-6504						PR2632 eceipt t			
	FFO ID number of contribution	С				Amoun		La J				50.00)
	Name of Employer (for Individual) United HealthCare Services Inc	Occi Dir F		ion (for Individual)		N	lemo	o Ite	em				
	Receipt For: A Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 350.00	P	P/R Dec	ducti	ion	(\$50.	00 Bi-W	′eekly)		
s	UBTOTAL of Receipts This Page (optional)			•				1			5	53.83	3
т	OTAL This Period (last page this line number only	/)		•				-		-			

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)
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Any information copied from such Reports a or for commercial purposes, other than using	nd Statements ma	ay not be sold or used by any j ddress of any political committe	13 14 15 16 1 person for the purpose of soliciting contributions te to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		darees of any political commute	
UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P	AC)
Full Name of Individual (Last, First, Middl OTTESON, WILLIAM JOHN, , ,	e Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 4545 OXFORD AVE			06 30 2017
City EDINA	State MN	Zip Code 55436-1405	Transaction ID : PR2632082546270 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		115.38
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) uty Gen Counsel Mgr	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)
Full Name of Individual (Last, First, Middl B. HIBBERT, LINDA F, , ,	e Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 924 BENTLEY COURT			06 30 / Y Y Y Y 2017
City	State PA	Zip Code	Transaction ID : PR2632085346270
CHALFONT FEC ID number of contributing federal political committee.	C	18914-3762	Amount of Each Receipt this Period
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual)	Memo Item
Receipt For: Primary General Other (specify) ▼		Gen Mgmt Year-to-Date ▼ 416.60	P/R Deduction (\$41.66 Bi-Weekly)
Full Name of Individual (Last, First, Middl C. GORSUCH, KIRSTEN, , ,	e Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 2780 COUNTRYSIDE D	RIVE WEST		06 30 2017
City ORONO	State MN	Zip Code 55356-9676	Transaction ID : PR2632087846270 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		645.60
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2202.35	P/R Deduction (\$215.20 Bi-Weekly)
SUBTOTAL of Receipts This Page (optiona	l)		885.96
TOTAL This Period (last page this line num	ber only)		

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using			13 14 15 16 berson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)
Full Name of Individual (Last, First, Middle TUFFIN, MICHAEL J, , ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 5904 ASHBY MANOR PLA			06 30 / Y Y Y Y Y 06 30 2017
City ALEXANDRIA	State VA	Zip Code 22310-2267	Transaction ID : PR2632087946270 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		576.90
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Public Affairs	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle B. Keaney, CRAIG J, , ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 6233 CRESCENT DRIVE	1	- 1	06 30 / Y Y Y Y
City EDINA	State MN	Zip Code 55436-2572	Transaction ID : PR2632088346270
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Ops	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 666.60	P/R Deduction (\$333.33 Bi-Weekly)
Full Name of Individual (Last, First, Middle WALTER, JEFFREY D, , ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 1490 SETTLER ST			M M / D D / Y Y Y Y Y 06 30 2017
City ELBURN	State IL	Zip Code 60119-7841	Transaction ID : PR2632088846270 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		115.38
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) T Architecture	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)			1120.83
TOTAL This Period (last page this line numb	er only)		

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17						
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle TEMPLE, MARTHA R, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 194 LITTLE LANE			06 30 2017						
City DURHAM	State CT	Zip Code 06422-1303	Transaction ID : PR2632873646270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		645.60						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2202.35	P/R Deduction (\$215.20 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. PLATT, LAWRENCE DAVID, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 3830 KING STREET			06 / D D / Y Y Y Y 06 2017						
City ALEXANDRIA	State VA	Zip Code 22302-1906	Transaction ID : PR2632880746270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		576.90						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. HOWARD, PATRICIA A, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 12 STAYMAN COURT			06 30 2017						
City MANALAPAN	State NJ	Zip Code 07726-7928	Transaction ID : PR2632882746270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		576.90						
Name of Employer (for Individual) Optum360 Services Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)		1799.40						
TOTAL This Period (last page this line num	per only)								

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle HAPGOOD, WADE, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 330 NW 82ND			06 / D D / Y Y Y Y 2017						
City TOPEKA	State KS	Zip Code 66617-2223	Transaction ID : PR2634167046270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		190.38						
Name of Employer (for Individual) United HealthCare Services Inc									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 674.98	P/R Deduction (\$63.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. CASTILLO, FLORA M, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 202 N ROSBOROUGH AVE									
City VENTNOR CITY	State NJ	Zip Code 08406-2022	Transaction ID : PR2634177946270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С	288.45							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1249.95	P/R Deduction (\$96.15 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. PRIBLE, JOHN M, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1923 SHIVER DR	Mailing Address 1923 SHIVER DR City State Zip Code								
ALEXANDRIA	VA	22307-1629	Transaction ID : PR2634656646270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		576.90						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			1055.73						
TOTAL This Period (last page this line number	er only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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			Use separate schedule(s)	(ch	(check only one)							
	EMIZED RECEIPTS		for each category of the Detailed Summary Page		4 11a		11b	11c	12			
	y information copied from such Reports and Sta for commercial purposes, other than using the n											
\setminus	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (I	InitedHealth Group PA									
				,								
Α.	Full Name of Individual (Last, First, Middle Initia SCHEID, ADREAN ELISABETH, , ,	l) or Full Or	rganization Name		Date of	Re	eceipt					
	Mailing Address 2915 CATHEDRAL AVENUE N	N			^M M 06	/	D 0 30) / Y	y y 2017	Y		
	City WASHINGTON	State DC	Zip Code 20008-3406					PR26348 leceipt th				
	FEC ID number of contributing federal political committee.	С						і. 1. 17-	576.	90		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) External Affs		Me	emc	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	'	P/R Dedu	uctio	on (\$192	2.30 Bi-W	/eekly)			
в.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name LARAMEE, CHRISTINE, , ,						eceipt					
	Mailing Address 2902 S ESPERANZA AVENUE						30		y y 2017	Y		
	City TAMPA	State	Zip Code 33629-7119				-	PR26348		-		
	FEC ID number of contributing federal political committee.	С				U		leceipt th	189.	_		
	Name of Employer (for Individual) United HealthCare Services Inc	upation (for Individual) I Dir		Me	emc	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 378.90	F	P/R Dedu	uctio	on (\$63.	15 Bi-We	ekly)			
С.	Full Name of Individual (Last, First, Middle Initia PESCATELLO, SARA M, , ,	l) or Full Or	rganization Name		Date of	Re	eceipt					
	Mailing Address 2149 CALIFORNIA STREET NV APT #D				^M 06	1	30		ү ү 2017			
	City WASHINGTON	State DC	Zip Code 20008-1834	_				PR2634				
	FEC ID number of contributing federal political committee.	ů – Elektrik – Elektri						, ,	705.	12		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs		Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	1	P/R Ded	ucti	on (\$23	5.04 Bi-W	/eekly)				
s	UBTOTAL of Receipts This Page (optional)			•			, ,		1471.	47		
T	OTAL This Period (last page this line number or	ıly)	•	•	<u> </u>							

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	4C)						
Full Name of Individual (Last, First, Middle A . POWER, ROBERT B, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 20 SMITH LANE		M = M / D = D / Y = Y = Y							
City	State	Zip Code	06 30 2017 Transaction ID : PR2634892846270						
SAINT JAMES	NY	11780-3810	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		150.00						
Name of Employer (for Individual) Optum360 Services Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Bi-Weekly)						
B. <u>REED</u> , PAM S, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name REED, PAM S, , ,								
Mailing Address 2983 BLACKSTONE			06 / D D / Y Y Y Y Y 2017						
City FRISCO	State TX	Zip Code 75033-7389	Transaction ID : PR2635426346270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		60.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mgr Acct Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 240.00	P/R Deduction (\$20.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. ROOS, THOMAS EDWARD, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3199 KAGEN AVE NE			06 / D D / Y Y Y Y Y 06 2017						
City SAINT MICHAEL	State MN	Zip Code 55376-3416	Transaction ID : PR2635451246270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		576.90						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Chief Acctng Off	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			786.90						
TOTAL This Period (last page this line number	er only)								

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using the			person for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle I A. ADAMS, SCOTT, , ,	nitial) or Full O	rganization Name	Date of Receipt						
Mailing Address 7019 TRUMPETER SWAN	LANE		M M / D D / Y Y Y Y 06 30 2017						
City MANASSAS	State VA	Zip Code 20112-3293	Transaction ID : PR2636726246270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		288.45						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) rt Affs Dir	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1249.95	P/R Deduction (\$96.15 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I 3. SMITH, KENNETH JOHN , , ,	nitial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1200 WASHINGTON ST #20			M M / D D / Y Y Y Y Y 06 30 2017						
City BOSTON	State MA	Zip Code 02118-2132	Transaction ID : PR2636734546270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		115.38						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I C. LIST, CHRISTINE, , ,	nitial) or Full O	rganization Name	Date of Receipt						
Mailing Address 340 DAVIS ST			M M / D D / Y Y Y Y 06 30 2017						
City NORTHBOROUGH	State MA	Zip Code 01532-2420	Transaction ID : PR2637694646270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		142.83						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 380.88	P/R Deduction (\$47.61 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			546.66						
TOTAL This Period (last page this line numbe	r only)								

SCHEDULE A (FEC Form 3X) __ _ _ _ _ _ _ _ - - - - -

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ted PAC (I	UnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle LOGAN, BRETT, , ,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 121 3RD STREET NE			06 30 / Y Y Y Y Y 2017						
City WASHINGTON	State DC	Zip Code 20002-7313	Transaction ID : PR2638112746270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		142.83						
Name of Employer (for Individual) United HealthCare Services Inc	United HealthCare Services Inc Assc Dir Regl Affs								
Receipt For: Primary General Other (specify) \forall	Aggregate	Year-to-Date ▼ 333.27	P/R Deduction (\$47.61 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. HAUSCHILDT, TODD CURTIS, ,		Organization Name	Date of Receipt						
Mailing Address 111 4TH AVE N UNIT 703	Ctoto	Zin Code	06 / 0 / Y Y Y Y 06 2017						
City MINNEAPOLIS	State MN	Zip Code 55401-1538	Transaction ID : PR2638114746270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		115.38						
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) IT	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	1						
Other (specify) ▼		499.98	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. FRY, BENJAMIN HOWARD, , ,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 3115 BRIARCLIFF GABLES			06 / D D / Y Y Y Y 2017						
City ATLANTA	State GA	Zip Code 30329-2456	Transaction ID : PR2638114946270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		190.38						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date V 674.98	P/R Deduction (\$63.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			448.59						
TOTAL This Period (last page this line number	er only)								

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
Any information copied from such Reports and or for commercial purposes, other than using t			13 14 15 16 17 rerson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle ZEGLINSKI, MICHAEL G, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1 TRIMONT LANE #610A			M M / D D / Y Y Y Y Y 06 30 2017						
City PITTSBURGH	State PA	Zip Code 15211-1206	Transaction ID : PR2639701846270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		576.90						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Pharm Ops	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. EDWARDS, MICHAEL F, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 379 DURHAM ROAD			06 / Y Y Y Y 2017						
City WYCKOFF	State NJ	Zip Code 07481-1018	Transaction ID : PR2639702046270						
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) SIs SVP OptumI	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle SKOMO, DAVID A, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 4002 PHILLIPS COURT			06 / D D / Y Y Y Y Y 06 30 2017						
City MARS	State PA	Zip Code 16046-2140	Transaction ID : PR2639702746270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		115.38						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Pharm Ops	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			1442.28						
TOTAL This Period (last page this line number	er only)								

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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				or each category of the Detailed Summary Page	×	11a 13		1 ⁻	1b 4		11c 15	12 16	17
	y information copied from such Reports and State for commercial purposes, other than using the na					or the		rpo	se of		liciting	contribu	tions
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Uni	tedHealth Group PA	C)								
Α.	Full Name of Individual (Last, First, Middle Initial) CALABRESE, DAVID CHRISTIAN, , ,	or Full O	Orgar	nization Name		Date	of Re	ece	eipt				
	Mailing Address 85 LITTLE POND RD					[™] 06	M /		30		/ Y	ү ү 2017	Y
	City	State		Zip Code		Tran	sact	tior	n ID :	PR	26397	0834627	0
	NORTHBOROUGH	MA		01532-1686	_ /	Amou	nt of	Ea	ach R	lece	eipt thi	s Period	
	FEC ID number of contributing federal political committee.	C						,			-g	142.	83
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) Clin Ops		P	Nemo	o It	em				
	Receipt For:	Aggregate	Yea	r-to-Date ▼									
	Primary General Other (specify) ▼		-	380.88	P/R Deduction (\$47.61 Bi-Weekly)								
B.	Full Name of Individual (Last, First, Middle Initial) SURRELL, CHRISTOPHER P, , ,	or Full O	Orgar	nization Name		Date of Receipt							
	Mailing Address 620 DARTINGTON WAY							06 30 2017					
	City	State		Zip Code	Transaction ID : PR263			26397	5814627	0			
	JOHNS CREEK	GA		30022-8045	_ /	Amou	nt of	Ea	ach R	lece	eipt thi	s Period	
	FEC ID number of contributing federal political committee.	C						-			-y=-	115.	38
	Name of Employer (for Individual) United HealthCare Services Inc		•	iion (for Individual) g Bus Dev		Memo Item							
	Receipt For: µ Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 499.98	P/	/R De	ducti	ion	(\$38.	46	Bi-Wee	ekly)	
с.	Full Name of Individual (Last, First, Middle Initial) JENSEN MOORE, KIMBERLY, , ,	or Full O	Orgar	nization Name		Date	of Re	ece	eipt				
	Mailing Address 230 ROSE AVENUE					[™] 06			D 30		/ Y	ý ý 2017	Y
	City	State		Zip Code		Trar	Isact	tior	n ID :	PR	26397	7034627	0
	MILL VALLEY	CA		94941-1728	_ /	Amou	nt of	Ea	ach R	lece	eipt thi	s Period	
	FEC ID number of contributing federal political committee.	С						y			y	92.	85
	Name of Employer (for Individual) Optum Services, Inc	Occi Dir (1	Mem	o li	tem						
	Receipt For:		Yea	r-to-Date ▼									
	Primary General Other (specify)		P	/R De	duct	ion	(\$30.	.95	Bi-We	ekly)			
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т	OTAL This Period (last page this line number only	y)		····· •				-		Ì	-		

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ILEIVILLED RECEIPIO		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using			person for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle BIGHAM, ANNE ELIZABETH, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1 FLETCHER PLACE			M M / D D / Y Y Y Y 06 30 2017						
City HOPKINS	State MN	Zip Code 55305-4428	Transaction ID : PR2639771446270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		714.27						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1904.72	P/R Deduction (\$238.09 Bi-Weekly)						
Full Name of Individual (Last, First, Middle THIERER, MARK A, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 11 EAST WALTON UNIT 4701	Ototo	Zin Oode	06 / D D / Y Y Y Y 2017						
City CHICAGO	State IL	Zip Code 60611-5441	Transaction ID : PR2639773646270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		576.90						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. Dutta, SUMIT, , ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1112 W WRIGHTWOOD A									
City CHICAGO	State IL	Zip Code 60614-1315	Transaction ID : PR2639773846270 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		384.60						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Seg Chief Med Off	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional). TOTAL This Period (last page this line numb			1675.77						

Use separate schedule(s)

FOR LINE NUMBER:

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ıт.			Use separate schedule(s)	(check only one)						
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a ☐ 11b ☐ 11c ☐ 12						
	y information copied from such Reports and Sta									
or	for commercial purposes, other than using the n	ame and a	address of any political committee	to solicit contributions from such committee.						
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	UnitedHealth Group PA	C)						
A.	Full Name of Individual (Last, First, Middle Initia NELSON, ELLEN RUTH, , ,	l) or Full O	Drganization Name	Date of Receipt						
	Mailing Address 11882 TILDEN PLACE			06 30 Y Y Y Y Y 07 30 2017						
	City WELLINGTON	State FL	Zip Code 33414-6056	Transaction ID : PR2639795346270 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		115.38						
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individual) CInt Svc Acct Mgmt	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)						
в.	Full Name of Individual (Last, First, Middle Initia BARRAGREE, SHERI ANN, , ,	l) or Full O	Drganization Name	Date of Receipt						
	Mailing Address 812 BARNES STREET			06 / D D / Y Y Y Y Y 2017						
	City MCKINNEY	State TX	Zip Code 75069-5549	Transaction ID : PR2640450146270 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		60.00						
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Dir Acct Mgmt	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P/R Deduction (\$20.00 Bi-Weekly)						
C.	Full Name of Individual (Last, First, Middle Initia WU, LAMBERT ANTHONY, , ,	l) or Full O	Drganization Name	Date of Receipt						
	Mailing Address 11008 CHERWELL COURT	1		06 / D D / Y Y Y Y Y 2017						
	City LAS VEGAS	State NV	Zip Code 89144-4526	Transaction ID : PR2640461646270 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		115.38						
	Name of Employer (for Individual) Health Plan of Nevada	Occu Med	upation (for Individual) d Dir	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)			290.76						
т	OTAL This Period (last page this line number or	ıly)	·····							

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
or for commercial purposes, other than us			erson for the purpose of soliciting contributions e to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)	orated PAC (I	JnitedHealth Group PA	AC)				
Full Name of Individual (Last, First, Mid A. STOW, CHRISTINA L, , ,	ddle Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 4709 ALTON PL NW	State	Zip Code	06 / D D / Y Y Y Y 2017				
WASHINGTON	DC	20016-2041	Transaction ID : PR2640466446270 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		576.90				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) External Affs	Memo Item				
Receipt For: Primary General Other (specify) ▼	Receipt For: Aggregate Year-to-Date ▼ Primary General						
Full Name of Individual (Last, First, Mid LAUBSTED, MICHAEL, , ,	ddle Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 148 VIA SERENA	06 / D D / Y Y Y Y Y 2017						
City ALAMO	State CA	Zip Code 94507-1842	Transaction ID : PR2640469746270 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		199.00				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 398.00	P/R Deduction (\$199.00 Bi-Weekly)				
Full Name of Individual (Last, First, Mid C. SCHUTT, ERIC A, , ,	ddle Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 2359 US HWY 51	Mailing Address 2359 US HWY 51						
City MC FARLAND	State WI	Zip Code 53558-9142	Transaction ID : PR2640846246270 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		576.90				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P External Affs	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optic	nal)		1352.80				
TOTAL This Period (last page this line n	umber only)	•••••					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12							
			13 14 15 16 17 erson for the purpose of soliciting contributions a to solicit contributions from such committee							
	ig the name and a	doress of any political committe	e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (l	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Midd A. WAGNER, JOSEPH F, , ,	lle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 3405 MEREDITH RIDGE	EROAD		M M / D D / Y Y Y Y Y 06 30 2017							
City PHOENIX	State MD	Zip Code 21131-1456	Transaction ID : PR2640875846270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		57.69							
Name of Employer (for Individual) United HealthCare Services Inc	Occi VP	upation (for Individual) Fin	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 249.99	P/R Deduction (\$19.23 Bi-Weekly)							
Full Name of Individual (Last, First, Midd B. MINTO, RYAN J, , ,	lle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1505 HERITAGE CLUB			06 / D D / Y Y Y Y 06 2017							
City	State NC	Zip Code	Transaction ID : PR2640882446270							
WAKE FOREST		27587-7698	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		152.88							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 587.48	P/R Deduction (\$50.96 Bi-Weekly)							
Full Name of Individual (Last, First, Midd C. ADVANI, PROTIMA, , ,	lle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 7618 BRITTANY PARC	1		06 / D D / Y Y Y Y Y 2017							
City FALLS CHURCH	State VA	Zip Code 22043-2907	Transaction ID : PR2642024146270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		300.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Rsch	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 815.38	P/R Deduction (\$100.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (option	al)		510.57							
TOTAL This Period (last page this line nur	mber only)									

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)											
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17											
			13 14 15 16 17 berson for the purpose of soliciting contributions be to solicit contributions from such committee.											
NAME OF COMMITTEE (In Full)	·g ···· ····													
UnitedHealth Group Incorpo	orated PAC (I	JnitedHealth Group P	AC)											
Full Name of Individual (Last, First, Mide FISHMAN, EINA GAIL , , ,	dle Initial) or Full O	rganization Name	Date of Receipt											
Mailing Address 27708 WATER ASH DR	IVE		06 / Y Y Y Y 06 / 30 / 2017											
City WESLEY CHAPEL	State FL	Zip Code 33544-8752	Transaction ID : PR2642027846270 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	C		776.16											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) d Dir	Memo Item											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1650.60	P/R Deduction (\$258.72 Bi-Weekly)											
Full Name of Individual (Last, First, Mide B. Brueckman, BRIAN D, , ,	dle Initial) or Full O	rganization Name	Date of Receipt											
Mailing Address 4601 PARK COMMONS #417	1		06 / 0 / Y Y Y Y 2017											
City SAINT LOUIS PARK	State MN	Zip Code 55416-4993	Transaction ID : PR2642029446270											
FEC ID number of contributing federal political committee.	C	55410-4995	Amount of Each Receipt this Period 666.66											
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item											
United HealthCare Services Inc	SVF	P UHC Operations												
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 666.66	P/R Deduction (\$333.33 Bi-Weekly)											
Full Name of Individual (Last, First, Mide C. BRANNEN, RAYMOND CLIF		rganization Name	Date of Receipt											
Mailing Address 6258 FORT PIERCE W			06 / ¹ 2017											
City HERRIMAN	State UT	Zip Code 84096-3977	Transaction ID : PR2642030746270 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		92.85											
Name of Employer (for Individual) Optum360 Services Inc		upation (for Individual) Fraining	Memo Item											
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 247.60	P/R Deduction (\$30.95 Bi-Weekly)											
SUBTOTAL of Receipts This Page (option	al)		1535.67											
TOTAL This Period (last page this line nu	mber only)	······												

FOR LINE NUMBER:

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T	EMIZED RECEIPTS		Use separate schedule(s)	(che	(check only one)									
			for each category of the Detailed Summary Page	×	11a 13		11b	11c		12 16 [17			
	y information copied from such Reports and Stat for commercial purposes, other than using the na				or the	purp	ose of :	soliciting	g cont	ributio	ns			
	NAME OF COMMITTEE (In Full)													
\rangle	UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)										
A.	Full Name of Individual (Last, First, Middle Initial YOUNG, ALLISON, , ,) or Full Oi	rganization Name		Date of	Red	ceipt							
	Mailing Address 15222 ALMA MATER CT				06 30 2017									
	City BATON ROUGE	State LA	Zip Code 70810-8389	A			on ID : I Each Re							
	FEC ID number of contributing federal political committee.	С					y		1	142.83				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		Me	emo	Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 380.88	P/	/R Dedi	uctio	ın (\$47.6	61 Bi-W	eekly)					
в.	Full Name of Individual (Last, First, Middle Initial LONG, RICHARD JOSEPH, , ,) or Full Oi	rganization Name		Date of	Red	ceipt							
	Mailing Address 618 WASHINGTON AVE N UNIT 504				м м 06	/	30	/ Y	201	Y Y 7]			
	City MINNEAPOLIS	State MN	Zip Code 55401-4111				on ID : F							
			55401-4111		Amount	of I	Each Re	eceipt tr	nis Pe	riod				
	FEC ID number of contributing federal political committee.	С		176.46										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt		Me	emo	Item							
		Aggregate	Year-to-Date 🔻											
	Other (specify) ▼		235.28	P/R Deduction (\$58.82 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initial FOX, ELIZABETH NICOLE, , ,) or Full Oi	rganization Name		Date of	Red	ceipt							
	Mailing Address 1021 NORTH GARFIELD STRE				м м 06	/	30	L	201]			
	City ARLINGTON	State VA	Zip Code 22201-2548				on ID : I Each Re							
	FEC ID number of contributing				Amount			eceipt tr	lis Pe	nou	-			
	federal political committee.	С				-	y	y	2	288.45				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs		Me	emo	ltem							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1249.95	P/	/R Ded	uctic	on (\$96.′	15 Bi-W	eekly)					
s	UBTOTAL of Receipts This Page (optional)								6	607.74				
т	OTAL This Period (last page this line number on	ly)		j			,	, , ,		-				

SCHEDULE A (FEC Form 3X) __ _ _ _ _ _ _ _ - - - - -

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		Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17										
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions										
NAME OF COMMITTEE (In Full)													
> UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Middle I CRESTA, BRIAN M, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 5 OGDEN LANE			06 30 2017										
City MIDDLETON	State MA	Zip Code 01949-1669	Transaction ID : PR2642837546270 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		142.83										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 380.88	P/R Deduction (\$47.61 Bi-Weekly)										
Full Name of Individual (Last, First, Middle I B. CRAGLE, STEVE LAURENCE, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 6604 MOHAWK TRAIL			06 / D D / Y Y Y Y Y 2017										
City	State MN	Zip Code	Transaction ID : PR2643200646270										
EDINA	IVIIN	55439-1030	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		142.83										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg	Memo Item										
Receipt For:	Aggregate	Year-to-Date ▼											
Primary General Other (specify) ▼		380.88	P/R Deduction (\$47.61 Bi-Weekly)										
Full Name of Individual (Last, First, Middle I C. NEELY, MARC, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 1159 BUFFALO RIDGE RD			M M / D D / Y Y Y Y 06 30 2017										
City CASTLE PINES	State CO	Zip Code 80108-8190	Transaction ID : PR2643203146270 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		142.83										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) /P SIs Acct Mgmt	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 380.88	P/R Deduction (\$47.61 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)			428.49										
TOTAL This Period (last page this line numbe	r only)												

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
or for commercial purposes, other than usin			erson for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (U	InitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Midd A. HAMMOND, MICHAEL JOSEPH, ,	lle Initial) or Full Or	ganization Name	Date of Receipt									
Mailing Address 244 NE 59TH TERR			06 / D D / Y Y Y Y 06 2017									
City TOPEKA	State KS	Zip Code 66617-1661	Transaction ID : PR2644644846270									
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period									
Name of Employer (for Individual) Optum Services, Inc	Occu Prod	pation (for Individual) Dir	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	/ear-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Midd B. MCKOY, PHILIP GREGORY JA		ganization Name	Date of Receipt									
Mailing Address 927 LINCOLN AVE			06 / D D / Y Y Y Y Y 2017									
City SAINT PAUL	State MN	Zip Code 55105-3149	Transaction ID : PR2644651646270 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		576.90									
Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Grp CIO	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	/ear-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Midd C. SCHACHER, ELIZABETH AL		ganization Name	Date of Receipt									
Mailing Address 3579 13TH ST NW APT 6			06 / D D / Y Y Y Y 2017									
City WASHINGTON	State DC	Zip Code 20010-2001	Transaction ID : PR2644918346270									
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 576.90									
Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) ovt Affs	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	/ear-to-Date ▼ 2499.90	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional	al)	••••••	1269.18									
TOTAL This Period (last page this line nur	nber only)											

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T			Use separate schedule(s)	(check only one)								
			for each category of the Detailed Summary Page	X 1	1a 3		11b	11c		2 6 [_ ₁₇	
	y information copied from such Reports and Stat for commercial purposes, other than using the na			rson for	the p	purp	ose of s		g conti			
	NAME OF COMMITTEE (In Full)											
\rangle	UnitedHealth Group Incorporated	PAC (L	InitedHealth Group PA	C)								
Α.	Full Name of Individual (Last, First, Middle Initial MISTRY, RASHMITA, , ,) or Full Or	ganization Name	Da	te of	Rec	ceipt					
	Mailing Address 404 RAVENSCLIFF DR				M M / D D / Y Y Y Y Y 06 30 2017							
	City MEDIA	State PA	Zip Code 19063-1457				on ID : F Each Re					
	FEC ID number of contributing federal political committee.	С					y	- 7	7	14.27		
	Name of Employer (for Individual) United HealthCare Services Inc		ipation (for Individual) Gen Mgmt		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 1904.72	P/R	Dedu	uctio	n (\$238.	.09 Bi-V	Veekly)		
	Full Name of Individual (Last, First, Middle Initial NEALE, MATTHEW, , ,) or Full Or	ganization Name	Da	te of	Rec	ceipt					
	Mailing Address 11380 WILD HERON PT	1			06	/	30	/ Y	201	ү ү 7]	
	City	State	Zip Code				on ID : P					
		MN	55347-4729	Am	ount	of E	Each Re	ceipt th	nis Per	'iod	_	
	FEC ID number of contributing federal political committee.	С		142.83								
	Name of Employer (for Individual) Optum Services, Inc	Occu VP I	ipation (for Individual) T	1 L	Me	emo	Item					
		Aggregate `	Year-to-Date 🔻	1								
	Primary General Other (specify) ▼		380,88	P/R Deduction (\$47.61 Bi-Weekly)								
	Full Name of Individual (Last, First, Middle Initial HOFFMAN, SHERRI LINKOFF, , ,) or Full Or	ganization Name	Da	te of	Rec	ceipt					
	Mailing Address 3409 DEEP WILLOW AVENUE				06 ^M	/	D D D 30	ΙL	201 [°]	7		
	City PIKESVILLE	State MD	Zip Code 21208-3116				on ID : F Each Re					
	FEC ID number of contributing federal political committee.	С			ount			, sceipt ti		42.83		
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) Int Svc Acct Mgt	Memo Item								
	Receipt For:		Year-to-Date ▼ 380.88	P/R Deduction (\$47.61 Bi-Weekly)								
s	JBTOTAL of Receipts This Page (optional)				_				9	99.93	_	
	OTAL This Period (last page this line number on			Ē	_		,	,		-	Ξ	

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TEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17										
or for commercial purposes, other than us			erson for the purpose of soliciting contributions e to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full)	orated PAC (I	JnitedHealth Group PA	AC)										
Full Name of Individual (Last, First, Mic MEBANE, JEREMY J, , ,	Idle Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 1808 PICADILLY PL			06 / D D / Y Y Y Y 06 30 2017										
City TYLER	State TX	Zip Code 75703-2400	Transaction ID : PR2646298046270										
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Prgms	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 480.00	P/R Deduction (\$40.00 Bi-Weekly)										
Full Name of Individual (Last, First, Mic B. Stevens, WILLIAM, , ,	Idle Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 17723 SHADY CREEK	AVE		06 30 / Y Y Y Y Y 2017										
City BATON ROUGE	State LA	Zip Code 70816-7709	Transaction ID : PR2646302646270 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С	365.00											
Name of Employer (for Individual) United HealthCare Services Inc													
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 365.00	P/R Deduction (\$365.00 Bi-Weekly)										
Full Name of Individual (Last, First, Mic c. STANKIEWICZ, DENNIS AN		rganization Name	Date of Receipt										
Mailing Address 17761 WEAVER LAKE	1		M M / D D / Y Y Y Y 06 30 2017										
	State MN	Zip Code	Transaction ID : PR2646304046270										
MAPLE GROVE FEC ID number of contributing federal political committee.	C	55311-1328	Amount of Each Receipt this Period										
Name of Employer (for Individual)		upation (for Individual)	Memo Item										
United HealthCare Services Inc Receipt For:		Gen Auditor Year-to-Date ▼											
Other (specify)		4999.90	P/R Deduction (\$0.00 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optio	nal)		485.00										
TOTAL This Period (last page this line nu	umber only)	•••••											

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)										
I EIVILED KEGEIP13		for each category of the Detailed Summary Page	X 11a 11b 11c 12										
			erson for the purpose of soliciting contributions										
or for commercial purposes, other than using t	me name and a	nucress of any political committe	e to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)										
Full Name of Individual (Last, First, Middle AHLSTROM, ALEXIS K, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 3421 OAKWOOD TERRAC	E		06 30 2017										
City WASHINGTON	State DC	Zip Code 20010-1819	Transaction ID : PR2699187146270 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		115.08										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) rt Affs Dir	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 498.68	P/R Deduction (\$38.36 Bi-Weekly)										
Full Name of Individual (Last, First, Middle B. ZHOU, JINGXIN, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 13 LARKSPUR LANE			06 / D / Y Y Y Y 2017										
City NORTH OAKS	State MN	Zip Code 55127-2092	Transaction ID : PR2699187846270 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		142.83										
Name of Employer (for Individual) Optum Services, Inc	Occ Dir	upation (for Individual) Fin	Memo Item										
Receipt For:	Aggregate	Year-to-Date ▼											
Primary General Other (specify) ▼		380.88	P/R Deduction (\$47.61 Bi-Weekly)										
Full Name of Individual (Last, First, Middle BETCHLEY, ROBERT, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 3371 EMERALD VALLEY			06 / D D / Y Y Y Y 2017										
City ONALASKA	State WI	Zip Code 54650-8746	Transaction ID : PR2699189646270 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		300.00										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 915.86	P/R Deduction (\$100.00 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional).			557.91										
TOTAL This Period (last page this line number	er only)												

Use separate schedule(s)

FOR LINE NUMBER:

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IT.			Use separate schedule(s)	(ch	(check only one)								
	EMIZED RECEIPTS		for each category of the Detailed Summary Page		′ 11a 13		11b	11c	12	17			
	y information copied from such Reports and Sta for commercial purposes, other than using the r				for the		pose of	soliciting	contrib	utions			
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group P	AC)									
A.	Full Name of Individual (Last, First, Middle Initia FARRELL, ELIZABETH ANN, , ,	al) or Full O	rganization Name		Date of	Re	eceipt						
	Mailing Address 18777 THE PINES				M M / D D / Y Y Y Y 06 30 2017								
	City EDEN PRAIRIE	State MN	Zip Code 55347					PR26999					
	FEC ID number of contributing federal political committee.	С							576	5.90			
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) POps		Me	emc	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2499.90] F	P/R Ded	uctio	on (\$192	2.30 Bi-W	/eekly)				
в.	Full Name of Individual (Last, First, Middle Initia MCCAIN, KELLY LYNN, , ,	al) or Full O	rganization Name		Date of	Re	eceipt						
	Mailing Address 531 T STREET NW APT 204				06	/	30	/ Y	y y 2017	Y			
	City WASHINGTON	State DC	Zip Code 20001-2087				-	PR27009 leceipt th		-			
	FEC ID number of contributing federal political committee.	C				. 01			180				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ernal Affs Dir		Me	emc	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 720.00] 「	P/R Dedu	uctio	on (\$60.	00 Bi-We	ekly)				
C.	Full Name of Individual (Last, First, Middle Initia FRINGER, TRICIA LYNN, , ,	al) or Full O	rganization Name		Date of	Re	eceipt						
	Mailing Address 2809 STANFORD AVE	-			^M 06	1	D D D 30		2017	Y			
	City DALLAS	State TX	Zip Code 75225-7917					PR27018 Receipt th					
	FEC ID number of contributing federal political committee.	C			<u> </u>		, .	. ,	714	.27			
	Name of Employer (for Individual) Optum Services, Inc	Occu VP F	upation (for Individual) Fin		Me	emo	tem Item						
	Receipt For: Primary General Other (specify)	Aggregate	P/R Deduction (\$238.09 Bi-Weekly)										
	UBTOTAL of Receipts This Page (optional)		, ,	▶ ▶			5		1471	.17			

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)							
II EIVIIZED KEGEIPIS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
			person for the purpose of soliciting contributions the to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)	<u> </u>	, , , , , , , , , , , , , , , , , , ,								
UnitedHealth Group Incorpo	orated PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Mid O'CONNELL, DANIEL T, , ,	dle Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 3325 W 18TH AVENUE			06 / Y Y Y Y 2017							
City DENVER	State CO	Zip Code 80204-1681	Transaction ID : PR2701819646270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		306.24							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1022.88	P/R Deduction (\$102.08 Bi-Weekly)							
Full Name of Individual (Last, First, Mid ROTH, TROY D, , ,	dle Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 7982 WOOD COURT			06 / 0 / Y Y Y Y Y 06 / 30 / 2017							
City FRISCO	State TX	Zip Code 75034-8203	Transaction ID : PR2701828946270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		142.83							
Name of Employer (for Individual) Optum360 Services Inc		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 380.88	P/R Deduction (\$47.61 Bi-Weekly)							
Full Name of Individual (Last, First, Mid MILLER, CORA, , ,	dle Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 813 PILOT MOUNTAIN	WAY SE	Zin Code								
City MABLETON	GA	Zip Code 30126-2678	Transaction ID : PR2702484446270 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		365.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Found/Social Resp	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 365.00	P/R Deduction (\$365.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (option	nal)		814.07							
TOTAL This Period (last page this line nu	mber only)									

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

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				Detailed Summary Page	×	11a		-	1b		11c	12	·-			
	y information copied from such Reports and State for commercial purposes, other than using the na								se of							
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated					ion CUI		Jul	.ona II		3001	Jonnin				
A.	Full Name of Individual (Last, First, Middle Initial) KRAMER, NANCY J, ,) or Full O	rgar	nization Name		Date of Receipt										
	Mailing Address 5701 STONE TRACE DRIVE				06 / D D / Y Y Y Y 2017											
	City MASON	State OH		Zip Code 45040-8315	Transaction ID : PR2702501446270 Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.				_		,			7	142.	33				
	Name of Employer (for Individual) Optum Services, Inc	ion (for Individual)		Me	emo	o It	tem									
	Receipt For: // Primary General Other (specify) ▼	ar-to-Date ▼ 380.88	P/	/R Ded	uctio	on	(\$47.0	61	Bi-We	ekly)						
B.	Full Name of Individual (Last, First, Middle Initial) Brenner, JEFFREY, , ,) or Full O	rgar	nization Name		Date of	Re	ece	eipt							
	Mailing Address 4610 CEDAR AVE APT 301	10			06 / D D / Y Y Y Y 2017											
	City PHILADELPHIA	State PA		Zip Code 19143-2118		Transaction ID : PR2702506346270 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С				365.00										
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) egrated Hlth Human Svs		Memo Item										
	Receipt For: // Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 365.00	P/R Deduction (\$365.00 Bi-Weekly)											
с.	Full Name of Individual (Last, First, Middle Initial) BENSON-SCEARCE, DENA L, , ,) or Full O	rgar	nization Name		Date of	Re	ece	eipt							
	Mailing Address 406B RUDOLPH AVE	1		1		M M 06	/	l	D D D 30		/ Y	2017 Y				
	City NASHVILLE	State TN		Zip Code 37206-1811	<i>µ</i>							2464627 s Period	0			
	FEC ID number of contributing federal political committee.	С						9			5	157.	39			
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Affs		Me	emo	o li	tem							
	Receipt For: // Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 315.78	P	/R Ded	uctio	ion	ı (\$52.	63	Bi-We	ekly)				
s	UBTOTAL of Receipts This Page (optional)			•••••				7		Ì	y	665.	72			
т	OTAL This Period (last page this line number onl	y)						,			7					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

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			for each category of the Detailed Summary Page	×	11a 13		11		11c 15	12	17				
	y information copied from such Reports and State for commercial purposes, other than using the na				or the		pos	se of s	oliciting	g contribu	tions				
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group PA	C)											
Α.	Full Name of Individual (Last, First, Middle Initial) Sammy, VANESSA VILLAVERDE, , , Mailing Address 3344 BRANTLY RD) or Full O	rganization Name	Date of Receipt											
	City	State	Zip Code		06 Trans	acti	ion	30 ID : P	R2704 [,]	2017 19074627	0				
	GLENWOOD	MD	21738-9523	A	moun	t of	Ea	ch Re	ceipt th	nis Period					
	FEC ID number of contributing federal political committee.	С			_	_	-		-y	312.	50				
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) t Affs Dir		М	emc	o Ite	em							
	Receipt For: 0 Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 312.50	P/	R Ded	uctio	ion ((\$156.	25 Bi-W	√eekly)					
B.	Full Name of Individual (Last, First, Middle Initial) or Full O	rganization Name		Date of	f Re	ecei	ipt							
	Mailing Address	1			M = M	1		D D	/ Y	YY	Y				
	City	State	Zip Code	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С													
	Name of Employer (for Individual)	Occ	upation (for Individual)		М	emc	o Ite	em							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼												
с.	Full Name of Individual (Last, First, Middle Initial)) or Full O	rganization Name		Date of	f Re	ecei	ipt							
	Mailing Address				M – M	/	Г	D D	/ Y	YY	Y				
	City	State	Zip Code	A	moun	t of	Ea	ich Re	ceipt th	nis Period					
	FEC ID number of contributing federal political committee.	С					y		9						
	Name of Employer (for Individual)	Occi	upation (for Individual)		M	emo	o Ite	em							
	Receipt For: // Primary General Other (specify)	Aggregate	Year-to-Date ▼												
s	UBTOTAL of Receipts This Page (optional)		•				y		9	312.	50				
т	OTAL This Period (last page this line number onl	y)					-		- 40-	161523.	10				

S	CHEDULE B (FEC Form 3X)			F	OR LIN	E NUMBER: PAGE 168 OF 191
IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(c	heck or 211 28a	
	y information copied from such Reports and State for commercial purposes, other than using the na					
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (Un	itedHealth (Grou	p PA	C)
Α.	Full Name (Last, First, Middle Initial) Dr. Raul Ruiz For Congress					Date of Disbursement
	Mailing Address PO Box 3433		1			06 01 2017
	City Palm Desert Purpose of Disbursement	State Zip Code CA 92261				FEC Identification Number
	Contribution Candidate Name				11	C C00502575 Transaction ID : 40919606 Amount of Each Disbursement this Period
	Ruiz, Raul, , Rep.,	ment For: 2	2018		egory/ ype	2500.00
	State: CA District: 36	Primary Other (spec	General cify) ▼			Contribution Memo Item
в.	Full Name (Last, First, Middle Initial)					Date of Disbursement
	City	State	Zip Code			FEC Identification Number
	Thousand Oaks Purpose of Disbursement Contribution Candidate Name	CA 91358)11	C C00513077 Transaction ID : 40919610
	Brownley, Julia, , Rep., Office Sought: x House Disburse	ment For: Primary Other (spec	General		egory/ ype	Amount of Each Disbursement this Period 1500.00 Contribution Memo Item
С.	Full Name (Last, First, Middle Initial) Susan Davis for Congress					Date of Disbursement
	Mailing Address PO Box 84049					06 01 Y Y Y Y Y 2017
	City San Diego Purpose of Disbursement	State CA	Zip Code 92138-4049	_	_	FEC Identification Number
	Contribution Candidate Name Davis, Susan, A., Rep.,				egory/ ype	Transaction ID : 40919613 Amount of Each Disbursement this Period
	Office Sought: House Disburse Senate President State: CA District: 53	ment For: 2 Primary Other (spec	General			Contribution Memo Item
s	UBTOTAL of Disbursements This Page (optional).				····· Þ	5000.00
Т	OTAL This Period (last page this line number only	/)			····· Þ	

S	CHEDULE B (FEC Form 3X)			F		NUMBER: PAGE 169 OF 191
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the		heck on	ly one)
			Summary Page		21b	
	y information copied from such Reports and State for commercial purposes, other than using the na				any per	son for the purpose of soliciting contributions
$\left \right\rangle$	NAME OF COMMITTEE (In Full)		· · · · · · ·	~		2)
	UnitedHealth Group Incorporated	PAC (Ur	nitedHealth (rouز	р РА((ت
Α.	Full Name (Last, First, Middle Initial) Debbie Wasserman Schultz For C	ongress				Date of Disbursement
	Mailing Address 1071 Twin Branch Ln					06 01 2017
	City Weston	State FL	Zip Code 33326			FEC Identification Number
	Purpose of Disbursement	16	33320	_	_	C C00385773
	Contribution			C	011	Transaction ID : 40919638
	Candidate Name				egory/	Amount of Each Disbursement this Period
	Wasserman Schultz, Debbie, , , Office Sought: x House Disburse	ment For:	2018	Ę	уре	1000.00
	Senate X	Primary	General			Contribution
	State: El District: 22	Other (spe	cify) ▼			Memo Item
_	State: FL District: 23 Full Name (Last, First, Middle Initial)					
В.	Friends Of Mazie Hirono					Date of Disbursement
						M M / D D / Y Y Y Y
	Mailing Address PO Box 677					06 01 2017
	City	State	Zip Code			FEC Identification Number
	Honolulu Purpose of Disbursement	HI	96809	_		C C00420760
	Contribution			C	011	Transaction ID : 40919640
	Candidate Name				egory/	Amount of Each Disbursement this Period
	Hirono, Mazie, , Sen., Office Sought: House Disburse	ement For:	2018	Ľ	уре	2500.00
	x Senate x	1	General			Contribution
	President	Other (spe	cify)			Memo Item
	State: HI District: Full Name (Last, First, Middle Initial)					
C.						Date of Disbursement
	Mailing Address PO Box 3828					06 01 2017
	Mailing Address PO Box 3828					2017
	City	State	Zip Code			FEC Identification Number
	Honolulu Purpose of Disbursement	HI	96812	_	_	C C00540732
	Contribution			C)11	Transaction ID : 40919642
	Candidate Name				egory/	Amount of Each Disbursement this Period
	Schatz, Brian, , Sen., Office Sought: House Disburse	ement For:	2022	I.	ype	2500.00
	× Senate ×	Primary	General			Contribution
	President	Other (spe	cify) ▼			Memo Item
	State: HI District:					
s	UBTOTAL of Disbursements This Page (optional).				🕨	6000.00
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ΙT	OTAL This Period (last page this line number only	/)			····· >	

S	CHEDULE B (FEC Form 3X)			F	OR I	INE N	UMBER:				PAGE	E 170 OF 191
IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page		heck	only (21b 28a		x	23 28c		L	27 30b
	y information copied from such Reports and State for commercial purposes, other than using the na				any	persor	n for the	purpo	ose c	of solic	iting	contributions
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (Ur	nitedHealth	Grou	рР	PAC)						
A.	Full Name (Last, First, Middle Initial) Friends of Cheri Bustos			Date of Disbursement								
	Mailing Address 1050 17th St NW, Ste 590						06		0.	1		2017
	City Washington Purpose of Disbursement	State DC	Zip Code 20036	_				entific C004			ber	
	Contribution Candidate Name)11 egory	//	Tra	insac	ction	ID : 40		38 Int this Period
		ement For:			ype						-	3500.00
	State: IL District: 17	Primary Other (spe	General cify) ▼				Ме	mo It		Contrib	oution	
В.	Full Name (Last, First, Middle Initial) Rosen For Nevada						Date of	f Dist				
	Mailing Address 1000 N Green Valley Pkwy #440-177			06 / 01 / Y Y Y Y 2017								
	City Henderson Purpose of Disbursement	State NV	Zip Code 89074				FEC Id	-			ber	-
	Contribution Candidate Name)11 egory	//	Tra		tion	ID : 40		49 Int this Period
		ement For:	2018 General		ype					Contrik		1000.00
	State: NV District: 03	Other (spe	cify)				Me	mo It		oonn		
C.	Full Name (Last, First, Middle Initial) Gillibrand For Senate						Date of	f Dist	ourse	ment		
	Mailing Address 126 C Street NW 2nd Floor						06	1	0,			2017
	City Washington Purpose of Disbursement	State DC	Zip Code 20001				FEC Id	_			ber	-
	Contribution Candidate Name Gillibrand, Kirsten, , Sen.,			Cate	911 egory	//		insac		ID : 40		50 Int this Period
		ement For: ; Primary Other (spe	General	<u>I</u>	ype			mo It		Contril	oution	2500.00
	te: NY District:						I Ivie		leni			
s	UBTOTAL of Disbursements This Page (optional)							-,	,		,	7000.00
т	OTAL This Period (last page this line number only	y)						. ,	,		,	

S	CHEDULE B (FEC Form 3X)			F	DR L		NUMBER: PAGE 171 OF 191
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(C	heck	only 21b	
		Detailed	Summary Page			210 28a	22 X 23 26 27 28b 28c 29 30b
	y information copied from such Reports and State for commercial purposes, other than using the nar					perso	on for the purpose of soliciting contributions
\backslash	NAME OF COMMITTEE (In Full)			_			
	UnitedHealth Group Incorporated	PAC (Ur	itedHealth C	Grou	p F	PAC))
A.	Full Name (Last, First, Middle Initial) Manchin For West Virginia						Date of Disbursement
	Mailing Address PO Box 5202						06 01 2017
	City Charleston	State WV	Zip Code 25361				FEC Identification Number
	Purpose of Disbursement Contribution			0	11		C C00486563
	Candidate Name			Cate	aan		Transaction ID : 40919751 Amount of Each Disbursement this Period
	Manchin, Joe, , Sen., III				ype	y/	Amount of Each Disburschieft this Feriod
	Office Sought: House Disburse	ment For:	2018				2500.00
	X Senate President	Primary Other (spe	General				Contribution
	State: WV District:	Other (spe	city) 🔻				Memo Item
_	Full Name (Last, First, Middle Initial)						
Β.	Blue Dog Political Action Committe	ee					Date of Disbursement
	Mailing Address PO Box 83142						06 / 01 / Y Y Y Y 2017
	-	State MD	Zip Code				FEC Identification Number
	Gaithersburg Purpose of Disbursement	IVID	20883	_	_	_	C C00305318
	Contribution			C)11		Transaction ID : 40919757
	Candidate Name			Cate	•	y/	Amount of Each Disbursement this Period
	Blue Dog Political Action Committe Office Sought: House Disburse			Ту	ype		5000.00
	Senate	ment For: Primary	General				
	President	Other (spe					Contribution
	State: District:						Memo Item
C.	Full Name (Last, First, Middle Initial) Treasure State PAC						Date of Disbursement
	Mailing Address 3242 Cummins Way						06 / 01 / Y Y Y Y 2017
	City Missoula	State MT	Zip Code 59802				FEC Identification Number
	Purpose of Disbursement Contribution			0	11		C C00433680
	Candidate Name			Cate	egor	y/	Transaction ID : 40919760 Amount of Each Disbursement this Period
	Treasure State PAC Office Sought: House Disburse	mont For		Ţ	ype		2500.00
	Office Sought: House Disburse Senate	ment For: Primary	General				
	President	Other (spe					Contribution
	State: District:						Memo Item
s	UBTOTAL of Disbursements This Page (optional).					►	10000.00
т	OTAL This Period (last page this line number only)					, , , , , , , , , , , , , , , , , ,

	CHEDULE B (FEC Form 3X) Use separate schedule(s)						NUMBER: PAGE 172 OF 191							
IT	EMIZED DISBURSEMENTS	for each	category of the	(C		only 21b	/ one) 22 🕱 23 26 27							
		Detailed	Summary Page			28a	28b 28c 29 30b							
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ments may me and add	not be sold or us ress of any politic	ed by cal con	any nmitt	perso ee to	on for the purpose of soliciting contributions o solicit contributions from such committee.							
\square	NAME OF COMMITTEE (In Full)			_		_								
	UnitedHealth Group Incorporated	PAC (Ur	itedHealth (Grou	p F		;)							
Α.	Full Name (Last, First, Middle Initial)						Date of Disbursement							
	Mailing Address PO Box 492						06 / D D / Y Y Y Y Y 2017							
	City	State NM	Zip Code				FEC Identification Number							
	Albuquerque Purpose of Disbursement		87103	_	_		С С00497073							
	Contribution Candidate Name			0	011		Transaction ID : 40919761							
	LOBO PAC				egory ype	//	Amount of Each Disbursement this Period							
		ement For:					2500.00							
	President	Primary Other (spe	cify) ▼				Contribution							
	State: District:						Memo Item							
R	Full Name (Last, First, Middle Initial)						Date of Disbursement							
υ.	Collins For Senator													
	Mailing Address PO Box 1096						06 20 2017							
	City Bangor	State ME	Zip Code 04402				FEC Identification Number							
	Purpose of Disbursement Contribution			-	-		C C00314575							
	Candidate Name			1.1)11		Transaction ID : 41006344							
	Collins, Susan, M., Sen.,				egory ype	"	Amount of Each Disbursement this Period							
		ement For:					1000.00							
	X Senate X President	Primary Other (spe	General cifv)				Contribution							
	State: ME District:						Memo Item							
C.	Full Name (Last, First, Middle Initial) Kurt Schrader for Congress						Date of Disbursement							
							M M / D D / Y Y Y Y							
	Mailing Address PO Box 3314						06 20 2017							
	City Oregon City	State OR	Zip Code 97045				FEC Identification Number							
	Purpose of Disbursement				-		C C00446906							
	Contribution Candidate Name				011		Transaction ID : 41006400							
	Schrader, Kurt, , Rep.,				egory ype	//	Amount of Each Disbursement this Period							
	Office Sought: 🗶 House Disburse	ment For:					2500.00							
	Senate X	Primary Other (spe	General Gifv) ▼				Contribution							
	State: OR District: 05		-)/ 4				Memo Item							
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SCHEDULE B (FEC Form 3X))						NUMBER: PAGE 173 OF 191							
ITEMIZED DISBURSEMENTS		for each o	rate schedule(s) category of the Summary Page	(cł		nly 1b Ba	one) 22 28b	×	23 28c		26 29		27 30b	
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated P	PAC (Uni	itedHealth C	Grou	p P/	AC)								
Full Name (Last, First, Middle Initial) Castro For Congress Mailing Address PO Box 544				Date of Disbursement										
Mailing Address PO Box 544 City	9	itate	Zip Code				06			0			017	
San Antonio Purpose of Disbursement		TX	78292	_	_		FEC I		icatio 4979:	-	umbe	r	-	
Contribution Candidate Name Castro Locautin Pop				Cate	11 egory/		Tr		ction Each				2 this Period	I
Castro, Joaquin, , Rep., Office Sought: X House Di Senate President State: TX District: 20	×	nent For: 2 Primary Other (spec	General	Ty	/pe			emo		Cor	ntribut	-	1000.00]
Full Name (Last, First, Middle Initial) B. Kaine For Virginia Mailing Address 1751 Potomac Greens Drive	/e						Date of		D		nt /		017	
City Alexandria Purpose of Disbursement Contribution		itate VA	Zip Code 22314	0	11	1	FEC Id	C00	ication 4953: ction	58				
Candidate Name Kaine, Timothy, , Sen., Office Sought: K Senate President State: VA District:	×	nent For: 2 Primary Other (spec	General		egory/ /pe		Amour	it of	Each	Dis		ement	this Period]
Full Name (Last, First, Middle Initial) C. House Conservatives Fund							Date o		burse		nt		YY	
Mailing Address 228 South Washington Stre Suite 115	eet						06	<i>'</i>		0	Ĺ		017	
City Alexandria Purpose of Disbursement Contribution		state VA	Zip Code 22314	0	11		FEC Id	C00)3264	39				
		nent For:		Cate	egory/ /pe				iction Each		-	ment	7 : this Period 2500.00]
Senate President State: District:		Primary Other (spec	ify) ▼				M	emo	Item	Co	ntribu	tion		
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SCHEDULE B (FEC Form 3X)			FOR LINE I	NUMBER: PAGE 174 OF 191
ITEMIZED DISBURSEMENTS	for each Detailed	arate schedule(s) category of the Summary Page	(check only 21b 28a	22 X 23 26 27 28b 28c 29 30b
Any information copied from such Reports and State or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full)		vitodHoalth C		
)
Full Name (Last, First, Middle Initial) A. Jobs and Innovation Matter PAC	(JIM PAC	;)		Date of Disbursement
Mailing Address PO Box 15320	1			06 20 2017
City Washington	State DC	Zip Code 20003		FEC Identification Number
Purpose of Disbursement Contribution		20000	011	C C00494112
Candidate Name			Category/	Transaction ID : 41007245 Amount of Each Disbursement this Period
Jobs and Innovation Matter PAC (;)	Туре	
Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General cify) ▼		Contribution Memo Item
State: District:				
Full Name (Last, First, Middle Initial) B. Matsui for Congress Mailing Address PO Box 1738				Date of Disbursement 06 / 27 / 2017
City Sacramento	State CA	Zip Code 95812		FEC Identification Number
Purpose of Disbursement Contribution	1		011	C C00409219 Transaction ID : 41016342
Candidate Name			Category/	Amount of Each Disbursement this Period
Senate X President	ement For: Primary Other (spe	General	Туре	5000.00 Contribution Memo Item
State: CA District: 06 Full Name (Last, First, Middle Initial)				
C. Bilirakis for Congress				Date of Disbursement
Mailing Address PO Box 606				06 27 2017
City Tarpon Springs	State FL	Zip Code 34688-0606		FEC Identification Number
Purpose of Disbursement Contribution			011	C C00408534 Transaction ID : 41016343
Candidate Name Bilirakis, Gus, Michael, Rep.,			Category/ Type	Amount of Each Disbursement this Period
Senate President	ement For: Primary Other (spe	General		Contribution Memo Item
State: FL District: 12				
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number onl				9000.00

SCHEDULE B (FEC Form 3X)			FOR LINE I	NUMBER: PAGE 175 OF 191							
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a	one) 22 X 23 26 27 28b 28c 29 30b							
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may name and add	not be sold or use lress of any politica	ed by any perso al committee to	on for the purpose of soliciting contributions solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	d PAC (Ur	nitedHealth G	Group PAC)							
Full Name (Last, First, Middle Initial) A. David Scott For Congress Mailing Address P.O. Box 960821				Date of Disbursement							
City	State	Zip Code 30296		FEC Identification Number							
Purpose of Disbursement Contribution		30290	011	C C00369801 Transaction ID : 41016347							
Candidate Name Scott, David, Albert, Rep., Office Sought: x House Disbu	rsement For:	2018	Category/ Type	Amount of Each Disbursement this Period							
State: GA District: 13	Primary Other (spe	General		Contribution Memo Item							
Full Name (Last, First, Middle Initial) B. Rob Woodall for Congress				Date of Disbursement							
Mailing Address PO Box 1871	State	Zin Code		06 27 2017							
City Lawrenceville Purpose of Disbursement Contribution	State GA	Zip Code 30046-1871	011	FEC Identification Number							
Candidate Name Woodall, Robert, , Rep., III Office Sought: Senate President	rsement For: X Primary Other (spe	General	Category/ Type	Transaction ID : 41016362 Amount of Each Disbursement this Period 2500.00 Contribution Memo Item							
State: GA District: 07 Full Name (Last, First, Middle Initial)											
C. Debbie Dingell For Congress Mailing Address 19855 W Outer Dr Suite 103 AE				Date of Disbursement							
City Dearborn	State MI	Zip Code 48124		FEC Identification Number							
Purpose of Disbursement Contribution Candidate Name Dingell, Debbie, , ,			011 Category/ Type	C C00558213 Transaction ID : 41016391 Amount of Each Disbursement this Period							
Office Sought: House Disbu Senate President State: MI District: 12	rsement For: Primary Other (spe	General		Contribution Memo Item							
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S	CHEDULE B (FEC Form 3X)			F	OR I	LINE N	NUMBER: PAGE 176 OF 191
IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the	(c	heck	k only 21b	one) 22 🗶 23 26 27
		Detailed	Summary Page		$\left - \right $	28a	28b 28c 29 30b
	y information copied from such Reports and State for commercial purposes, other than using the na						
$\left \right\rangle$	NAME OF COMMITTEE (In Full)			_	_		
	UnitedHealth Group Incorporated	PAC (Ur	itedHealth	Grou	p F	PAC)	
A.	Full Name (Last, First, Middle Initial) Ann Wagner for Congress						Date of Disbursement
	Mailing Address PO Box 50						06 27 2017
	City	State MO	Zip Code				FEC Identification Number
	Ballwin Purpose of Disbursement Contribution	MO	63022	C)11		C C00495846
	Candidate Name			Cate	-	×/	Transaction ID : 41016514 Amount of Each Disbursement this Period
	Wagner, Ann, L., Rep.,				ype	y/	
	Office Sought: X House Disburse Senate X President	ement For: 2 Primary Other (spe	General				5000.00 Contribution
	State: MO District: 02						Memo Item
в.	Full Name (Last, First, Middle Initial) Zeldin For Congress						Date of Disbursement
	Mailing Address 47 Flintlock Drive						06 / 27 / Y Y Y Y 2017
	City Shirley	State NY	Zip Code 11967				FEC Identification Number
	Purpose of Disbursement Contribution			(011		C C00552547 Transaction ID : 41016515
	Candidate Name Zeldin, Lee, , Rep.,			Cate	egor ype	y/	Amount of Each Disbursement this Period
		ement For:	2018	1	ype		2500.00
	Senate X	1	General				Contribution
	State: NY District: 01	Other (spe	cify)				Memo Item
C.	Full Name (Last, First, Middle Initial) Marc Veasey Congressional Cam	paign Co	ommittee				Date of Disbursement
	Mailing Address PO Box 50084						06 / 27 / Y Y Y Y 2017
	City Fort Worth	State TX	Zip Code 76105				FEC Identification Number
	Purpose of Disbursement Contribution	1		C)11	٦	C C00506832 Transaction ID : 41016516
	Candidate Name Veasey, Marc, , Rep.,				egor ype	y/	Amount of Each Disbursement this Period
		ement For: 2					1000.00
	State: TX District: 33	Primary Other (spe	General cify) ▼				Contribution Memo Item
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	CHEDULE B (FEC Form 3X)		arato pohodulo/->				NUMBER: PAGE 177 OF 191
IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the	(C		only 21b	7 one) 22 🗶 23 26 27
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	y information copied from such Reports and State for commercial purposes, other than using the na						
$\left \right\rangle$	NAME OF COMMITTEE (In Full)			_	_		,
	UnitedHealth Group Incorporated	PAC (Un	itedHealth (rou	p ⊦	AC)
A.	Full Name (Last, First, Middle Initial) Mark Pocan for Congress						Date of Disbursement
	Mailing Address PO Box 327		1				06 27 2017
	City Madison	State WI	Zip Code 53701				FEC Identification Number
	Purpose of Disbursement	VVI	53701	_	_		C C00502179
	Contribution			C)11		Transaction ID : 41016532
	Candidate Name Pocan, Mark, , Rep.,				egory ype	y/	Amount of Each Disbursement this Period
		ement For: 2	2018		ype	_	1000.00
	Senate x	_	General				Contribution
	State: WI District: 02	Other (spec	cify) 🔻				Memo Item
	Full Name (Last, First, Middle Initial)						
В.	Liz Cheney for Wyoming						Date of Disbursement
	Mailing Address PO Box 697						06 / 27 / Y Y Y Y 2017
	City	State WY	Zip Code				FEC Identification Number
	Casper Purpose of Disbursement	VVY	82602	-	-	_	C C00607556
	Contribution			C)11		Transaction ID : 41016598
	Candidate Name Cheney, Liz, , Rep.,				egory ype	//	Amount of Each Disbursement this Period
		ement For:	2018		урс		1000.00
	Senate x	-	General				Contribution
	State: WY District: 00	Other (spec	cify)				Memo Item
	Full Name (Last, First, Middle Initial)						
C.	Pharmaceutical Care Management Association Po	litical Action (Committee (PCMA	A PAC)			Date of Disbursement
	Mailing Address 325 7th St, NW 9th Floor						06 / 27 / Y Y Y Y 06 / 27
	City Washington	State DC	Zip Code 20004				FEC Identification Number
	Washington Purpose of Disbursement Contribution		20004		_		C C00388819
	Candidate Name Pharmaceutical Care Management Association Political Action	Committee (PCI	MA PAC)	Cate)11 egory ype	y/	Transaction ID : 41016643 Amount of Each Disbursement this Period
	Office Sought: House Disburse	ement For:		1	he		5000.00
	Senate	Primary	General				Contribution
	State: District:	Other (spec	cify) 🔻				Memo Item
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	y information copied from such Reports and State for commercial purposes, other than using the national states of the states of											
\setminus	NAME OF COMMITTEE (In Full)											
$ \rangle$	UnitedHealth Group Incorporated	PAC (Un	itedHealth (Group PAC)							
Α.	Full Name (Last, First, Middle Initial) Supporting House Problem Solver	s PAC			Date of Disbursement							
	Mailing Address 1050 17th St NW, Ste 590				06 27 2017							
	City	State DC	Zip Code		FEC Identification Number							
	Washington Purpose of Disbursement	DC	20036		C C00563601							
	Contribution			011	•							
	Candidate Name			Category/	Transaction ID : 41016647 Amount of Each Disbursement this Period							
	Supporting House Problem Solver			Туре								
	Office Sought: House Disburse Senate President	ment For: Primary Other (spec	General cify) ▼		5000.00 Contribution							
	State: District:				Memo Item							
B.	Full Name (Last, First, Middle Initial) Donald Norcross For Congress Mailing Address PO Box 160				Date of Disbursement 06 / 27 / 2017							
	City Collingswood	State NJ	Zip Code 08108		FEC Identification Number							
	Purpose of Disbursement Contribution		00100	011	C C00558320							
	Candidate Name			Category/	Transaction ID : 41016651 Amount of Each Disbursement this Period							
	Norcross, Donald, , Rep.,			Type								
	Senate x	ment For: 2	General		1000.00 Contribution							
	State: NJ District: 01	Other (spec	спу)		Memo Item							
C.	Full Name (Last, First, Middle Initial) Filemon Vela For Congress				Date of Disbursement							
	Mailing Address 10715 Gulfdale St Ste 235				06 27 2017							
	City San Antonio	State TX	Zip Code 78216		FEC Identification Number							
	Purpose of Disbursement Contribution			011	C C00513531 Transaction ID : 41016668							
	Candidate Name Vela, Filemon, , Rep., Jr.			Category/ Type	Amount of Each Disbursement this Period							
		ment For: 2	2018	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1000.00							
	Senate X President	Primary Other (spec	General		Contribution Memo Item							
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S	CHEDULE B (FEC Form 3X)			F	OR L	LINE N	IUMBER:			Р	AGE	179 OF 191
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\square	NAME OF COMMITTEE (In Full)			_								
	UnitedHealth Group Incorporated	PAC (Un	itedHealth G	Grou	ip F	PAC)						
Α.	Full Name (Last, First, Middle Initial) Democrats Reshaping America (D	REAMP	AC)				Date of	f Disb	ourse		YY	YYY
	Mailing Address 410 1st Street SE, Suite 310						06		27			017
	City Washington	State DC	Zip Code 20003				FEC Id	entific	cation	Numb	ər	
	Purpose of Disbursement Contribution	00	20003		011		С	C004	12307	9		
	Candidate Name			<u></u>	egory					ID : 410		4 t this Period
	Democrats Reshaping America (D	REAMPA	AC)		ype	y/	Anoun		aon	Disbuis		
	Office Sought: House Disburse Senate President	ment For: Primary Other (spec	General cify) ▼					mo It		Contribu	_	5000.00
	State: District:								lonn			
в.	Full Name (Last, First, Middle Initial) Luke Messer For Congress Mailing Address PO Box 917						Date of	f Disb	oursei	D /		017
	City							_				
	Shelbyville	IN	Zip Code 46176				FEC Id	entific	cation	Numb	ər	
	Purpose of Disbursement Contribution			(011		U		6066	- 1		
	Candidate Name			Cat	egory	y/				I D : 410 Disburs		4 t this Period
	Messer, Allen, , Rep.,				ype			-	-		-	5000.00
	Office Sought: X House Disburse Senate X	ment For: 2 Primary	2018 General					-,		Contribu		5000.00
	State: IN District: 06	Other (spec					Ме	mo It		Contribu	ition	
_	Full Name (Last, First, Middle Initial)						Date of	Diah		mont		
0.	Duffy For Wisconsin										VVV	YY
	Mailing Address PO Box 538						06	Í	29			017
	City Wausau	State WI	Zip Code 54402				FEC Id	entific	cation	Numb	ər	
	Purpose of Disbursement Contribution			(011		С		16433	- 1		_
	Candidate Name			<u></u>	egor	v/				ID : 410 Disburs		8 t this Period
	Duffy, Sean, , Rep.,				ype	<i>y</i> ,	_					
	Sonoto	ment For: 2 Primary	2018 General					-,				2500.00
	State: WI District: 07	Other (spec					Ме	mo It		Contribu	ition	
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SCHEDULE B (FEC Form 3X)			FOR L	INE NUMBER: PAGE 180 OF 191
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the		only one) 21b 22 X 23 26 27
		Summary Page		210 22 X 23 26 27 28a 28b 28c 29 30b
Any information copied from such Reports and State or for commercial purposes, other than using the na				
			_	
UnitedHealth Group Incorporated	PAC (Ur	nitedHealth G	Froup P	AC)
Full Name (Last, First, Middle Initial) A. New Pioneers PAC				Date of Disbursement
Mailing Address 228 S Washington Street, Suite 1	15			06 29 2017
City	State VA	Zip Code 22314		FEC Identification Number
Alexandria Purpose of Disbursement Contribution	VA	22314	011	C C00459123
Candidate Name			Category	/ Transaction ID : 41030479 / Amount of Each Disbursement this Period
New Pioneers PAC			Туре	5000.00
Senate President	ement For: Primary Other (spe	General cify) ▼		Contribution Memo Item
State: District: Full Name (Last, First, Middle Initial)				
B.				Date of Disbursement
Mailing Address				
City	State	Zip Code		FEC Identification Number
Purpose of Disbursement	1			C
Candidate Name			Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburse Senate	ement For: Primary	General		
State: District:	Other (spe	cify)		Memo Item
Full Name (Last, First, Middle Initial)				Date of Disbursement
Mailing Address				M M / D D / Y Y Y Y
City	State	Zip Code		FEC Identification Number
Purpose of Disbursement				C
Candidate Name			Category Type	Amount of Each Disbursement this Period
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State: District:	Other (spe			Memo Item
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SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 181 OF 191	
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a		
Any information copied from such Reports and State or for commercial purposes, other than using the nat					
NAME OF COMMITTEE (In Full)		itad laste O			
UnitedHealth Group Incorporated		ineurrealth G		<i>,</i>)	
Full Name (Last, First, Middle Initial) A. Friends of Scott Walker	Date of Disbursement				
Mailing Address PO Box 620437				06 01 2017	
City Middleton	State WI	Zip Code 53562		FEC Identification Number	
Purpose of Disbursement Contribution		55562	011	C Transaction ID : 40921517	
Candidate Name			Category/	Amount of Each Disbursement this Period	
Walker, Scott, , , Office Sought: House Disburse	ement For:		Туре	5000.00	
Senate President	Primary Other (spe	General cify) ▼		Contribution Memo Item	
State: District:					
Full Name (Last, First, Middle Initial) B. Assembly Democratic Campaign (Committe	ee		Date of Disbursement	
Mailing Address PO Box 814		1		06 01 2017	
City Madison	State WI	Zip Code 53701		FEC Identification Number	
Purpose of Disbursement Contribution	C Transaction ID : 40921568				
Candidate Name	Indidate Name Category/ Type				
Office Sought: House Disburse	ment For:		1990	1000.00	
Senate President	Primary Other (spe	General		Contribution	
State: District:	Other (spe	city)		Memo Item	
Full Name (Last, First, Middle Initial) C. Committee to Elect a Republican S	Senate			Date of Disbursement	
Mailing Address PO Box 2741				06 01 2017	
City Madison	State WI	Zip Code 53701		FEC Identification Number	
Purpose of Disbursement Contribution			011	С	
Candidate Name			011 Category/ Type	Transaction ID : 40921569 Amount of Each Disbursement this Period	
	ment For:			1000.00	
Senate President	Primary Other (spe	General cify) ▼		Contribution Memo Item	
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S	CHEDULE B (FEC Form 3X)					NUMBER: PAGE 182 OF 191			
IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(c	heck only 21b 28a	y one) 22 23 26 27 28b 28c x 29 30b			
	y information copied from such Reports and State for commercial purposes, other than using the nar								
\backslash	NAME OF COMMITTEE (In Full)		_						
	UnitedHealth Group Incorporated	PAC (Un	itedHealth G	irou	p PAC	C)			
A.	Full Name (Last, First, Middle Initial) Rebekah Warren for State Senate	Date of Disbursement							
	Mailing Address 234 Eighth St					06 08 2017			
	City	State	Zip Code			FEC Identification Number			
	Ann Arbor	MI	48103						
	Purpose of Disbursement Contribution			0	11	C Transaction ID : 40950419			
	Candidate Name			Cate	egory/	Amount of Each Disbursement this Period			
	Warren, Rebekah, , MI Sen.,				ype				
	Office Sought: House Disburse Senate President Image: Senate	ment For: Primary Other (spec	General cify) ▼			Contribution Memo Item			
	State: District:								
в.	Full Name (Last, First, Middle Initial) Vincent Gregory for Senate	Date of Disbursement							
	Mailing Address 19578 San Jose Blvd.		1			06 08 2017			
	5	State MI	Zip Code 48076			FEC Identification Number			
	Lathrup Village Purpose of Disbursement Contribution	111	48078)11	С			
	Candidate Name	Transaction ID : 40950422							
	Gregory, Vincent, , MI Sen.,	Amount of Each Disbursement this Period							
	Gregory, Vincent, , MI Sen., Type Office Sought: House Disbursement For:					250.00			
	Senate	Primary	General			Contribution			
	State: District:	Other (spec	cify)			Memo Item			
	Full Name (Last, First, Middle Initial)								
C.	Sam Singh for State Representativ	/e				Date of Disbursement			
	Mailing Address PO Box 791					06 / 08 / Y Y Y Y 06 / 08			
	-	State	Zip Code			FEC Identification Number			
	East Lansing Purpose of Disbursement	MI	48826	_	_	С			
	Contribution	011							
	Candidate Name Singh, Samir, , MI Rep.,				egory/	Amount of Each Disbursement this Period			
		ment For:		1	уре	500.00			
	Senate	Primary	General						
	President	Other (spec				Contribution Memo Item			
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SCHEDULE B (FEC Form	3X) [FOR LINE	NUMBER: PAGE 183 OF 191			
ITEMIZED DISBURSEMENT	S	for each o	rate schedule(s) category of the Summary Page	(check only 21b 28a				
					on for the purpose of soliciting contributions solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorp	orated P	PAC (Un	itedHealth G	Group PAC)			
Full Name (Last, First, Middle Initial) A. Friends of Chris Larson		Date of Disbursement						
Mailing Address 3261 S. Herman Stree		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
City Milwaukee	-	State WI	Zip Code 53207		FEC Identification Number			
Purpose of Disbursement Contribution				011	C			
Candidate Name				Category/	Transaction ID : 40950529 Amount of Each Disbursement this Period			
Larson, Chris, , WI Sen., Office Sought: House	Disbursem	ent For:		Туре	250.00			
Senate President		Primary Other (spec	General cify) ▼		Contribution Memo Item			
State: District: Full Name (Last, First, Middle Initial)								
B. Friends of Dave Craig					Date of Disbursement			
Mailing Address PO Box 323		06 / 08 / Y Y Y Y 06 / 08 2017						
City Big Bend		State WI	Zip Code 53103		FEC Identification Number			
Purpose of Disbursement Contribution	I			011	C Transaction ID : 40950632			
Candidate Name Craig, Dave, , WI Sen.,		Category/	Amount of Each Disbursement this Period					
Office Sought: House					250.00			
Senate President		Primary Other (spec	General		Contribution			
State: District:		Other (spec	,iry)		Memo Item			
Full Name (Last, First, Middle Initial) C. Friends of Jerry Petrowski					Date of Disbursement			
Mailing Address 720 North 136th Aven	ue				06 / D D / Y Y Y Y 08 2017			
City Marathon		State WI	Zip Code 54448		FEC Identification Number			
Purpose of Disbursement Contribution			54440	011	С			
Candidate Name Petrowski, Jerry, , ,	Transaction ID : 40950633 Amount of Each Disbursement this Period							
Office Sought: House	Disbursem	nent For:		Туре	250.00			
Senate		Primary	General		Contribution			
State: District:		Other (spec	cify) 🔻		Memo Item			
SUBTOTAL of Disbursements This Page	(optional)				750.00			
TOTAL This Period (last page this line n								

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 184 OF 191			
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a				
Any information copied from such Reports and State or for commercial purposes, other than using the na	on for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (Ur	nitedHealth G	Froup PAC	;)			
Full Name (Last, First, Middle Initial) A. Friends of Terry Moulton	Date of Disbursement						
Mailing Address 2863 S. Prairie View Road				06 08 2017			
City Chippewa Falls	Chippewa Falls WI 54729						
Purpose of Disbursement Contribution Candidate Name			011	C Transaction ID : 40950634			
Moulton, Terry, , WI Sen.,	ement For:		Category/ Type	Amount of Each Disbursement this Period			
State: District:	Primary Other (spe	General cify) ▼		Contribution Memo Item			
Full Name (Last, First, Middle Initial) B. Friends of LaTonya Johnson Mailing Address PO Box 100813	Date of Disbursement 06 08 2017						
City Milwaukee	State WI	Zip Code 53210		FEC Identification Number			
Purpose of Disbursement Contribution Candidate Name	011 Category/	Transaction ID : 40950660 Amount of Each Disbursement this Period					
Johnson, LaTonya, , WI Sen., Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General cify)	Туре	250.00 Contribution Memo Item			
Full Name (Last, First, Middle Initial) C. People for Rebecca				Date of Disbursement			
Mailing Address PO Box 628284				06 / 08 / Y Y Y Y 2017			
City Middleton	State WI	Zip Code 53526		FEC Identification Number			
Purpose of Disbursement Contribution Candidate Name Kleefisch, Rebecca, , ,	C Transaction ID : 40950684 Amount of Each Disbursement this Period						
Office Sought: House Disburs Senate President State: District:	ement For: Primary Other (spe	General ccify) ▼		Contribution Memo Item			
SUBTOTAL of Disbursements This Page (optional)			····· ►	1000.00			
TOTAL This Period (last page this line number onl	y)		····· ►				

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 185 OF 191
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) 21b 22 23 26 27 28a 28b 28c x 29 30b
		ised by any person for the purpose of soliciting contributions tical committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (UnitedHealth	Group PAC)
Full Name (Last, First, Middle Initial) A. Shilling for Senate Mailing Address PO Box 1261		Date of Disbursement
City La Crosse	State Zip Code WI 54602-1261	FEC Identification Number
Purpose of Disbursement Contribution Candidate Name		011 Category/ Amount of Each Disbursement this Period
Shilling, Jennifer, , WI Sen., Office Sought: House Disburser Senate President District:	ment For: Primary General Other (specify) ▼	Category/ Type Amount of Each Disbursement this Period 500.00 Contribution Memo Item
Full Name (Last, First, Middle Initial) B. Cecil Thomas Senate Committee Mailing Address 515 Clinton Springs Ave.		Date of Disbursement
Cincinnati Purpose of Disbursement Contribution Candidate Name Thomas, Cecil, , OH Sen., Office Sought: House Disbursen		011 FEC Identification Number 011 C Category/ Type Transaction ID : 40951498 Amount of Each Disbursement this Period 350.00
State: District:	Primary General Other (specify)	Contribution Memo Item
Full Name (Last, First, Middle Initial) C. Citizens for Tavares Mailing Address 1003 Cloverly Drive		Date of Disbursement
City Gahanna Purpose of Disbursement Contribution Candidate Name Tavares, Charleta, , OH Sen., Office Sought: House Disburser	State Zip Code OH 43230 ment For: Primary General Other (specify) ▼	011 Transaction ID : 40951499 Category/ Type Amount of Each Disbursement this Period 011 350.00 Category/ Type Other is the second of the secon

SCHEDULE B (FEC Form 3X)			FOR		NUMBER				P	AGE	186 C	F 1	91
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the		(check only		ly one)								
		Summary Page		21b	22		23		26		27		
		28a	28b		280		x 29		30b				
Any information copied from such Reports and State or for commercial purposes, other than using the na													
NAME OF COMMITTEE (In Full)	// .												
UnitedHealth Group Incorporated	PAC (U	nitedHealth	Group I	PAC)								
Full Name (Last, First, Middle Initial)					Date o	f Dia	bur		ont				
A. Friends of Terry Moulton						_						N/	
Mailing Address 2863 S. Prairie View Road					06	ĺ		26			2017	T	
City	State	Zip Code			FEC Id	lentit	icati	on	Numbe	er.			-
Chippewa Falls	WI	54729			_		louii						
Purpose of Disbursement Void - Friends of Terry Moulton; check dated 6/8/2	017		011		C								
Candidate Name									D : 410				
Moulton, Terry, , WI Sen.,			Catego Type		Amoun	t of	Eac	n D	isburse	emen	it this P	erioc	í
	ement For:		туре								- 500.00)	1
Senate	Primary	General					7	.					
President	Other (spe	ecify) 🔻			Me	amo	ltom	vc ch ch	oid - ⊢r ieck da	iends	s of Teri 5/8/2017	y Mc	ultoi
State: District:	-												
Full Name (Last, First, Middle Initial)													
B. Committee to Elect Kevin Hertel					Date of Disbursement								
Mailing Address 22848 Poplar Beach Street					06		-	26	4.6		2017		
City	State	Zip Code				lanti	liaati		Numbe				
St. Clair Shores	MI	48081			FEC Id	ientii	icali		NUMBE	*1	_		
Purpose of Disbursement Contribution			011	C									
Candidate Name		Tra	ansa	ctio	n IC	D : 410	1624	6					
Candidate Name	Category/					Amount of Each Disbursement this Perio					erioc	1	
Office Sought: House Disburse	ement For:		Туре						_		250.0)	1.
Senate	Primary	General					7	C	ontribu	tion	1.000		1.
President	Other (spe	ecify)			Me	mo	Item						
State: District:	L				IVIE	mo	iten	1					
Full Name (Last, First, Middle Initial)					_								
c. Committee to Elect Winnie Brinks					Date o	f Dis	sburs	sem	ent				
Mailing Address 2060 Osceola Dr. SE					м м 06	1		D 26	1		017	Y	
Maining Address 2000 Osceola DI. SE					00		-	20	- F	2	.017		
City	State	Zip Code			FEC Id	lantii	licati	on	Numbr				
Grand Rapids	MI	49506					Joan			"	-		
Purpose of Disbursement Contribution					C								
Candidate Name	011								D:410				
Brinks, Winnie, T., MI Rep.,			Catego Type		Amoun	t of	Eac	n D	Isburse	emen	it this P	erioc	-
· · · · · · · · · · · · · · · · · · ·	ement For:		iype								250.0)	
Senate							7	C	ontribu	tion	1 40		1
President	Other (spe	ecify) 🔻			Me	mo	Item		Shabu	0011			
State: District:	-												
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SUBTOTAL of Disbursements This Page (optional).				•			7				0.0	0	
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TOTAL This Period (last page this line number only	/)			•			9	_		_			1

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 187 OF 191			
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check on 21b 28a	22 23 26 27			
Any information copied from such Reports and State or for commercial purposes, other than using the nat							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (Un	itedHealth G	roup PA	C)			
Full Name (Last, First, Middle Initial) A. Curtis Hertel Jr For Senate Mailing Address 2747 Southwood Dr	Date of Disbursement						
	State	Zip Code		FEC Identification Number			
East Lansing Purpose of Disbursement Contribution	MI	48823	011				
Candidate Name Hertel, Curtis, , , Jr			Category/ Type	Transaction ID : 41016248 Amount of Each Disbursement this Period			
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spec	General cify) ▼	General Contribution				
Full Name (Last, First, Middle Initial) B. David Knezek for State Senate Mailing Address 8033 Arnold	Date of Disbursement						
City Dearborn Heights Purpose of Disbursement Contribution	State MI	Zip Code 48127	011	FEC Identification Number			
Candidate Name Knezek, David, , ,	ment For: Primary Other (spec	General	Category/ Type	Transaction ID : 41016249 Amount of Each Disbursement this Period 500.00 Contribution Memo Item			
Full Name (Last, First, Middle Initial) C. Friends of Pam Faris				Date of Disbursement			
Mailing Address 4116 Orme Circle				06 / D D / Y Y Y Y 06 26 2017			
City Clio Purpose of Disbursement Contribution	State MI	Zip Code 48420	011	FEC Identification Number			
Candidate Name Faris, Pam, , MI Rep., Office Sought: House Disburse	Amount of Each Disbursement this Period						
State: District:	Primary Other (spec	cify) ▼		Contribution Memo Item			
SUBTOTAL of Disbursements This Page (optional).				1250.00			
TOTAL This Period (last page this line number only	/)		•••••	, ,			

ITEMIZED DISBURSEMENTS Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 28a	7 one) 22 23 26 27				
		28b 28c x 29 30b				
Any information copied from such Reports and Statements may not be sold or us or for commercial purposes, other than using the name and address of any politic	ed by any perso cal committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC (UnitedHealth C	Group PAC)				
Full Name (Last, First, Middle Initial) A. Friends of Joe Scarnati	Date of Disbursement					
Mailing Address PO Box 177		06 26 2017				
City State Zip Code Brockway PA 15824		FEC Identification Number				
Purpose of Disbursement Contribution	011	C Transaction ID : 41016254				
Scarnati, Joseph, , Senator, III Office Sought: House Disbursement For:	Category/ Type	Amount of Each Disbursement this Period 1000.00				
Senate Primary General Primary Senate Other (specify) ▼		Contribution Memo Item				
Full Name (Last, First, Middle Initial) B. Friends of Devin LeMahieu Mailing Address PO Box 700200		Date of Disbursement				
City State Zip Code Oostburg VI 53070		FEC Identification Number				
Contribution Candidate Name Lemahieu, Devin, , WI Sen.,	011 Category/ Type	C Transaction ID : 41016255 Amount of Each Disbursement this Period				
Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District:		250.00 Contribution Memo Item				
Full Name (Last, First, Middle Initial) C. Michigan House Democratic Fund		Date of Disbursement				
Mailing Address PO Box 16193		06 26 2017				
City State Zip Code Lansing MI 48901 Purpose of Disbursement Contribution	011	FEC Identification Number				
Candidate Name	Category/ Type	Transaction ID : 41016256 Amount of Each Disbursement this Period				
Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼	<u> </u>	500.00 Contribution Memo Item				
SUBTOTAL of Disbursements This Page (optional)		1750.00				

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 189 OF 191		
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a	v one) 22 23 26 27 28b 28c x 29 30b		
Any information copied from such Reports and State or for commercial purposes, other than using the nar						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I	PAC (Un	itedHealth G	Froup PAC	;)		
Full Name (Last, First, Middle Initial) A. Michigan Senate Democratic Func	ł			Date of Disbursement		
Mailing Address PO Box 11111				06 26 2017		
Lansing	State MI	Zip Code 48901		FEC Identification Number		
Purpose of Disbursement Contribution Candidate Name			011	C Transaction ID : 41016259		
	ment For:		Category/ Type	Amount of Each Disbursement this Period 500.00		
Senate President State: District:	Primary Other (spec	General cify) ▼		Contribution Memo Item		
Full Name (Last, First, Middle Initial) B. Republican Assembly Campaign C Mailing Address 148 East Johnson		Date of Disbursement				
City Madison Purpose of Disbursement	State WI	Zip Code 53703		FEC Identification Number		
Contribution Candidate Name	ndidate Name 011 Category/					
Office Sought: House Disburse Senate President District:	ment For: Primary Other (spec	General cify)	Туре	5000.00 Contribution Memo Item		
Full Name (Last, First, Middle Initial) C. Vote Charlie Collins				Date of Disbursement		
Mailing Address 3225 East Piper Glen				06 / 29 / Y Y Y Y 2017		
City Fayetteville Purpose of Disbursement Contribution	State AR	Zip Code 72703		FEC Identification Number		
Candidate Name Collins, Charlie, , AR Rep.,	te Name Category/					
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spec	General Cify) ▼		Contribution Memo Item		
SUBTOTAL of Disbursements This Page (optional)				6000.00		

SCHEDULE B (FEC Form 3X)			FOR LINE						
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a	one) 22 23 26 27 28b 28c x 29 30b					
	Any information copied from such Reports and Statements may not be sold or used by any per or for commercial purposes, other than using the name and address of any political committee								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (Ur	itedHealth G	roup PAC)					
Full Name (Last, First, Middle Initial) A. Brinkman Campaign Committee	Date of Disbursement								
Mailing Address 3215 Hardisty Ave.				06 29 2017					
City Cincinnati Purpose of Disbursement	State OH	Zip Code 45208		FEC Identification Number					
Contribution			011	C Transaction ID : 41030481					
Brinkman, Thomas, , OH Rep., Office Sought: House Dist Senate	Dursement For:	General	Category/ Type	Amount of Each Disbursement this Period 500.00 Contribution					
State: District:	Other (spe	cify) 🔻		Memo Item					
Full Name (Last, First, Middle Initial) B. Committee to Elect Cliff Rosen Mailing Address 7027 State Route 350 West	berger			Date of Disbursement					
City	State	Zip Code		FEC Identification Number					
Clarksville Purpose of Disbursement Contribution Candidate Name	OH	45113	011	Transaction ID : 41030483 Amount of Each Disbursement this Period					
Rosenberger, Cliff, , OH Rep.,	Office Sought: House Disbursement For: Senate Primary General President Other (specify)								
Full Name (Last, First, Middle Initial) C. Friends of Ryan Smith				Date of Disbursement					
Mailing Address 63 Cedar St				06 / 29 / Y Y Y Y 2017					
City Gallipolis Purpose of Disbursement Contribution	State OH	Zip Code 45631	011	FEC Identification Number					
Candidate Name Smith, Ryan, , OH Rep.,	Transaction ID : 41030485 Amount of Each Disbursement this Period								
Office Sought: House Dist Senate President State: District:	Dursement For: Primary Other (spe	General cify) ▼		Contribution Memo Item					
SUBTOTAL of Disbursements This Page (optio	nal)		····· >	2000.00					
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SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 191 OF 191
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a	-
Any information copied from such Reports and States or for commercial purposes, other than using the nar				
		itad Laste O		
UnitedHealth Group Incorporated I	PAC (Un	litedHealth G	roup PAC)
Full Name (Last, First, Middle Initial) A. Steve Huffman for State Rep.				Date of Disbursement
Mailing Address PO Box 739				06 29 2017
City Troy	State OH	Zip Code 45373		FEC Identification Number
Purpose of Disbursement Contribution			011	C Transaction ID : 41030486
Candidate Name			Category/	Amount of Each Disbursement this Period
Huffman, Stephen, , OH Rep., Office Sought: House Disburse Senate	ment For: Primary	General	Туре	500.00 Contribution
State: District:	Other (spec	cify) 🔻		Memo Item
Full Name (Last, First, Middle Initial) B.				Date of Disbursement
Mailing Address				
City	State	Zip Code		FEC Identification Number
Purpose of Disbursement				С
Candidate Name	Category/ Type	Amount of Each Disbursement this Period		
Senate	ment For: Primary	General		
State: District:	Other (spec	cify)		Memo Item
Full Name (Last, First, Middle Initial) C.				Date of Disbursement
Mailing Address				
City	State	Zip Code		FEC Identification Number
Purpose of Disbursement				C
Candidate Name			Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburse Senate	ment For: Primary	General		1 1 4 ² 1 1 4 ² 1 1 4 ² 1
State: District:	Other (spec	cify) ▼		Memo Item
SUBTOTAL of Disbursements This Page (optional)				500.00
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