

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

Office Use Only

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

12FE4M5

UnitedHealth Group Incorporated PAC (United for Health)

ADDRESS (number and street)

9900 Bren Road East

Check if different
than previously
reported. (ACC)

Minnetonka

MN

55343

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00274431

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

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

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

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

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

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

Type or Print Name of Treasurer

Sherwood, Susan, , ,

Signature of Treasurer

Sherwood, Susan, , ,

Date

M M M /

D D D /

Y Y Y Y Y Y Y

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

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

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

UnitedHealth Group Incorporated PAC (United for Health)

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2010 To: M M / D D / Y Y Y Y 03 / 31 / 2010

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y 2010		177649.83
(b) Cash on Hand at Beginning of Reporting Period.....	177649.83	
(c) Total Receipts (from Line 19)	98915.14	98915.14
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	276564.97	276564.97
7. Total Disbursements (from Line 31)	173450.00	173450.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	103114.97	103114.97
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

UnitedHealth Group Incorporated PAC (United for Health)

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	0

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	77211.40	77211.40
(ii) Unitemized	21703.74	21703.74
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	98915.14	98915.14
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	98915.14	98915.14
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	98915.14	98915.14
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	98915.14	98915.14

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	156500.00	156500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	16950.00	16950.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	173450.00	173450.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	173450.00	173450.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	98915.14	98915.14
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	98915.14	98915.14
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 OF 66

(check only one)

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

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

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. CHRISTIAN, DENISE, H., ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Public and Senior Market

Name of Employer (for Individual)

Occupation (for Individual)
Americhoice, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2010

Transaction ID : 31425703

Amount of Each Receipt this Period

500.00

☐ Memo Item

15

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

B. ANDERSON, CHRISTINE, M., ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

MM / DD / YYYY
03 / 23 / 2010

Transaction ID : 31509520

Amount of Each Receipt this Period

2500.00

☐ Memo Item

15

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

C. MORAN, ELIZABETH, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)
UNITEDHEALTH GROUP, INC.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
03 / 23 / 2010

Transaction ID : 31509531

Amount of Each Receipt this Period

1000.00

☐ Memo Item

15

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 7 OF 66

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. Morreale, Kathy, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

03 / 30 / 2010

Transaction ID : 31528110

Amount of Each Receipt this Period

1000.00

☐ Memo Item

15

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

B. SAURO, PATRICIA R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Business Segment CAO

Name of Employer (for Individual)

Occupation (for Individual)
United HealthGroup, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

03 / 30 / 2010

Transaction ID : 31528115

Amount of Each Receipt this Period

1000.00

☐ Memo Item

15

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

C. WHITELY, WILLIAM P, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Senior Vice President

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1159812623578

Amount of Each Receipt this Period

1153.80

☐ Memo Item

15

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

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

3153.80

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

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

FOR LINE NUMBER: PAGE 8 OF 66

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. COOK, WAYNE F, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C President Insurance Solut

Name of Employer (for Individual)

Occupation (for Individual)
United HealthGroup

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1159812823578

Amount of Each Receipt this Period

360.00

☐ Memo Item

15

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

B. WICHMANN, DAVID S, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C EVP & Pres UHG Operati

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1159814723578

Amount of Each Receipt this Period

1153.80

☐ Memo Item

15

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

C. ERLANDSON, PATRICK J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C SVP Business Operations

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1159815923578

Amount of Each Receipt this Period

1153.80

☐ Memo Item

15

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

2667.60

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

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

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

FOR LINE NUMBER: PAGE 9 OF 66

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. SAURO, PATRICIA R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Business Segment CAO

Name of Employer (for Individual)

Occupation (for Individual)
United HealthGroup, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1360.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1159816423578

Amount of Each Receipt this Period

360.00

☐ Memo Item

15

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

B. MUNSELL, WILLIAM A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C EVP UnitedHealth Group

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1159816623578

Amount of Each Receipt this Period

600.00

☐ Memo Item

15

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

C. PENSHORN, JOHN S, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C SVP UnitedHealth Group

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1159816923578

Amount of Each Receipt this Period

600.00

☐ Memo Item

15

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

1560.00

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

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

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

FOR LINE NUMBER: PAGE 10 OF 66

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. KALLMEYER, PAUL D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Deputy General Counsel (

Name of Employer (for Individual)

Occupation (for Individual)
United HealthGroup

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1159817423578

Amount of Each Receipt this Period

300.00

☐ Memo Item

15

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

B. QUIRK, THOMAS J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Health Plan CEO

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1159819123578

Amount of Each Receipt this Period

230.76

☐ Memo Item

15

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

C. TUCKSON, REED V, , , M.D.

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C EVP Consumr Health & M

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

692.28

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1159819823578

Amount of Each Receipt this Period

692.28

☐ Memo Item

15

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

1223.04

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

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

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

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. TRACY, WILLIAM C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Health Plan CEO

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.20

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1159821523578

Amount of Each Receipt this Period

346.20

☐ Memo Item

15

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

B. MIGLIORI, RICHARD J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C SVP Bus Initiatives & Clin

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1159827423578

Amount of Each Receipt this Period

461.52

☐ Memo Item

15

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

C. RIVET, JEANNINE M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C EVP UnitedHealth Group

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1159830023578

Amount of Each Receipt this Period

1153.80

☐ Memo Item

15

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

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

1961.52

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

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

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. WINTERS, JILL, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C VP General Management

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2010

Transaction ID : PR1159840423578

Amount of Each Receipt this Period

324.00

☐ Memo Item

15

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

B. WELTERS, ANTHONY, , Mr.,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C EVP UnitedHealth Group

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2010

Transaction ID : PR1332013223578

Amount of Each Receipt this Period

1153.80

☐ Memo Item

15

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

C. DUGGIN, THELMA, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C SVP UnitedHealth Group

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1153.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2010

Transaction ID : PR1530799223578

Amount of Each Receipt this Period

1153.86

☐ Memo Item

15

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

2631.66

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

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

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

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. BOHNENKAMP, ROBERT J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Business Segment CIO

Name of Employer (for Individual)

Occupation (for Individual)

UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1551005623578

Amount of Each Receipt this Period

1153.80

☐ Memo Item

15

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

B. HEADY, TIMOTHY J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

SVP Pharmacy Benefit Mgr

Name of Employer (for Individual)

Occupation (for Individual)

UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1551122523578

Amount of Each Receipt this Period

240.00

☐ Memo Item

15

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

C. OWENS, DAWN M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Business Segment CEO

Name of Employer (for Individual)

Occupation (for Individual)

UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1551160323578

Amount of Each Receipt this Period

600.00

☐ Memo Item

15

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

1993.80

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

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

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

FOR LINE NUMBER: PAGE 14 OF 66

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. VALERIUS, THOMAS J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C VP Recruitment Svcs

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1551161323578

Amount of Each Receipt this Period

461.52

☐ Memo Item

15

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

B. WEIHRAUCH, LOIS T, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C VP General Management

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1551161423578

Amount of Each Receipt this Period

324.00

☐ Memo Item

15

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

C. ENDERLE, JOHN O, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Regional Executive

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1554323523578

Amount of Each Receipt this Period

330.00

☐ Memo Item

15

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

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

1115.52

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

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

FOR LINE NUMBER: PAGE 15 OF 66

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. JELINEK, RICK M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Business Segment CEO

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1554323923578

Amount of Each Receipt this Period

1153.80

☐ Memo Item

15

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

B. RADU, MICHAEL, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C VP Operations

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1554324523578

Amount of Each Receipt this Period

324.00

☐ Memo Item

15

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

C. STAPLETON, KIRK E, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C VP Network Programs

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1554324723578

Amount of Each Receipt this Period

250.00

☐ Memo Item

15

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

1727.80

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

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

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

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. ERICKSON, KAREN L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C SVP Corporate Controller

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1575957623578

Amount of Each Receipt this Period

1153.80

☐ Memo Item

15

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

B. MONFILETTO, ERNEST, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Plan President

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1575958123578

Amount of Each Receipt this Period

461.52

☐ Memo Item

15

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

C. VALENTA, LEE D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Business Segment COO

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1575958523578

Amount of Each Receipt this Period

1153.80

☐ Memo Item

15

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

2769.12

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

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

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

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. KELLY, JOHN W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Tax Analysts

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1575959723578

Amount of Each Receipt this Period

1000.00

☐ Memo Item

15

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

B. PAUL, THOMAS S, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Business Segment COO

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1580864723578

Amount of Each Receipt this Period

230.76

☐ Memo Item

15

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

C. WEBB, ROBERT THOMAS, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C CEO Care Solutions

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1580865323578

Amount of Each Receipt this Period

1153.80

☐ Memo Item

15

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

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

2384.56

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

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

FOR LINE NUMBER: PAGE 18 OF 66
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. MASSEY, GAYE ADAMS, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Sr Deputy General Couns

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.28

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1596304523578

Amount of Each Receipt this Period

692.28

☐ Memo Item

15

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

B. MIKAN III, GEORGE L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C EVP CFO

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1596304823578

Amount of Each Receipt this Period

1153.80

☐ Memo Item

15

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

C. MORNESS, CAROL B, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Dir Underwriting

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.76

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1596304923578

Amount of Each Receipt this Period

230.76

☐ Memo Item

15

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

2076.84

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

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

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

FOR LINE NUMBER: PAGE 19 OF 66
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. LEWIS, THOMAS D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Health Plan CEO

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1596306923578

Amount of Each Receipt this Period

230.76

☐ Memo Item

15

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

B. OBERRENDER, ROBERT W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C SVP Treasurer

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1596307023578

Amount of Each Receipt this Period

300.00

☐ Memo Item

15

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

C. RODGERS, STEPHAN S, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C SVP Healthcare Strategie

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1596317123578

Amount of Each Receipt this Period

1153.80

☐ Memo Item

15

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

1684.56

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

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 OF 66
(check only one)

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

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

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. RUTH, KEVIN J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C SVP Enterprise Clinical AI

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1596317423578

Amount of Each Receipt this Period

450.00

☐ Memo Item

15

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

B. SANDY, LEWIS G, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C SVP Clinical Advancemen

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1600598723578

Amount of Each Receipt this Period

425.00

☐ Memo Item

15

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

C. PETERSON, MATTHEW W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Market Group CAO

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1602669923578

Amount of Each Receipt this Period

240.00

☐ Memo Item

15

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

1115.00

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

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

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

FOR LINE NUMBER: PAGE 21 OF 66
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. MALONEY, JEFFREY W., , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C VP Operations - Evercare

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.90

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1613243523578

Amount of Each Receipt this Period

576.90

☐ Memo Item

15

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

B. FINKELSTEIN, ALLEN LAWRENCE, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Sr Medical Director

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1620989023578

Amount of Each Receipt this Period

230.76

☐ Memo Item

15

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

C. KOOREN, STEVE R., , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Business Segment CFO

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

346.14

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1653443223578

Amount of Each Receipt this Period

346.14

☐ Memo Item

15

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

1153.80

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

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

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

FOR LINE NUMBER: PAGE 22 OF 66
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. BELLAMY, THOMAS J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C SB VP Sales and Account

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.20

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1653444323578

Amount of Each Receipt this Period

346.20

☐ Memo Item

15

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

B. LARKIN, JOYCE A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Govt Rel Dir

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1677771623578

Amount of Each Receipt this Period

461.52

☐ Memo Item

15

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

C. SNOWDEN, MILES S, , Mr.,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C SVP Health Advancement

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1746717823578

Amount of Each Receipt this Period

1153.80

☐ Memo Item

15

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

1961.52

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

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

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

FOR LINE NUMBER: PAGE 23 OF 66
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. KOUTSOUMPAS JR, JOHN T, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

VP Public Policy

Name of Employer (for Individual)

Occupation (for Individual)

UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2010

Transaction ID : PR1748514523578

Amount of Each Receipt this Period

769.20

☐ Memo Item

15

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

B. BAYER, GREGORY A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

CEO Behavioral Solutions

Name of Employer (for Individual)

Occupation (for Individual)

UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2010

Transaction ID : PR1806750223578

Amount of Each Receipt this Period

210.00

☐ Memo Item

15

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

C. EMERSON, PAUL M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Business Segment CFO

Name of Employer (for Individual)

Occupation (for Individual)

UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2010

Transaction ID : PR1806750323578

Amount of Each Receipt this Period

230.76

☐ Memo Item

15

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

1209.96

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

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 24 OF 66
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. LEDELL, MICHELLE D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Human Capital Partner

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1882850623578

Amount of Each Receipt this Period

240.00

☐ Memo Item

15

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

B. ANDERSON, CATHERINE K, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Dir Marketing Bus Dev

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.20

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1903550723578

Amount of Each Receipt this Period

346.20

☐ Memo Item

15

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

C. EDBERG, SUSAN B, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C VP Customer Service

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR1903578123578

Amount of Each Receipt this Period

600.00

☐ Memo Item

15

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

1186.20

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

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

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

FOR LINE NUMBER: PAGE 25 OF 66
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. BERKEL, SUSAN LYNN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C SVP Operations

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1152.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2119468123578

Amount of Each Receipt this Period

1152.00

☐ Memo Item

15

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

B. CARTER, LESLIE J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Dir Network Contracting

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2119470323578

Amount of Each Receipt this Period

576.00

☐ Memo Item

15

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

C. DILWEG, ANDREA E, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Govt Rel Dir

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

222.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2119472923578

Amount of Each Receipt this Period

222.00

☐ Memo Item

15

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

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

1950.00

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

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

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. GIAMBRONE, ANGELO, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C VP Network Contracting

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2119475123578

Amount of Each Receipt this Period

360.00

☐ Memo Item

15

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

B. HANSEN, DAVID M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Health Plan CEO

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2119476723578

Amount of Each Receipt this Period

810.00

☐ Memo Item

15

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

C. HO, SAMUEL W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Market Grp Chief Clinical

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2119477923578

Amount of Each Receipt this Period

600.00

☐ Memo Item

15

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

1770.00

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

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

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

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

UnitedHealth Group Incorporated PAC (United for Health)

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

A. JONES, JOHN D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C VP Govt Rel

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2119479223578

Amount of Each Receipt this Period

576.00

☐ Memo Item

15

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

B. MILBURN, CHARLEEN M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Govt Rel Dir

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2119483923578

Amount of Each Receipt this Period

390.00

☐ Memo Item

15

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

C. MONK, NANCY J, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C VP Govt Affairs & Compl

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2119484323578

Amount of Each Receipt this Period

300.00

☐ Memo Item

15

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

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

1266.00

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

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

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(check only one)
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. PITTMAN, AUSTIN T, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Chief Growth Officer

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2119486723578

Amount of Each Receipt this Period

810.00

☐ Memo Item

15

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

B. POLICH, CYNTHIA L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Chief Strategy Officer

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2119486823578

Amount of Each Receipt this Period

600.00

☐ Memo Item

15

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

C. TANIGAWA, CHERYL, , , MD

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Natl Medical Director/CMC

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2119491123578

Amount of Each Receipt this Period

300.00

☐ Memo Item

15

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

1710.00

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

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

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

FOR LINE NUMBER: PAGE 29 OF 66

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. TUCKER, STEVEN M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C VP Regulatory Affairs

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2119492023578

Amount of Each Receipt this Period

576.00

☐ Memo Item

15

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

B. VANASTEN, SUSAN, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Site Dir Medicare Inside S

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2119492623578

Amount of Each Receipt this Period

240.00

☐ Memo Item

15

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

C. HANSON, CHARLES W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C VP Underwriting

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

258.10

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2133133123578

Amount of Each Receipt this Period

258.10

☐ Memo Item

15

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

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

1074.10

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 30 OF 66
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. HULTGREN, BROR O, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Regional Executive

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2133133223578

Amount of Each Receipt this Period

230.76

☐ Memo Item

15

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

B. MILLER, ALLEN D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Regional Executive

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2133133623578

Amount of Each Receipt this Period

210.00

☐ Memo Item

15

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

C. MORISATO, SUSAN C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C VP Federal Prog-UHG Alli

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

900.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2133133823578

Amount of Each Receipt this Period

900.00

☐ Memo Item

15

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

1340.76

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

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 31 OF 66
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. PUTNAM, T JEFFREY, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C SVP Financial Plng & Ana

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2133134223578

Amount of Each Receipt this Period

1153.80

☐ Memo Item

15

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

B. FALKENBERG, ROBERT C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Health Plan CEO

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2145728423578

Amount of Each Receipt this Period

230.76

☐ Memo Item

15

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

C. FARAHANI, ROB, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Dir IT

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.76

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2145728523578

Amount of Each Receipt this Period

230.76

☐ Memo Item

15

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

1615.32

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

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

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

FOR LINE NUMBER: PAGE 32 OF 66
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. SCHWARZ, MICHAEL P, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Dir IT

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2145729723578

Amount of Each Receipt this Period

210.00

☐ Memo Item

15

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

B. SMITH, DANNETTE L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Sr Deputy General Couns

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.28

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2145729923578

Amount of Each Receipt this Period

692.28

☐ Memo Item

15

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

C. WEAR, MARGARET W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C VP Actuarial Services

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2145730223578

Amount of Each Receipt this Period

300.00

☐ Memo Item

15

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

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

1202.28

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

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

FOR LINE NUMBER: PAGE 33 OF 66
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. SPIVACK, DAVID A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Business Segment CFO

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2162867623578

Amount of Each Receipt this Period

1153.80

☐ Memo Item

15

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

B. GIBSON, CHRISTINE W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Market Grp Chief Mktg Of

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.28

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2225166723578

Amount of Each Receipt this Period

692.28

☐ Memo Item

15

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

C. BEAULE, JEAN-FRANCOIS, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C VP Actuarial Services

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

346.20

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2225813623578

Amount of Each Receipt this Period

346.20

☐ Memo Item

15

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

2192.28

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

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

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

FOR LINE NUMBER: PAGE 34 OF 66
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. RANGEN, ERIC S, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C SVP Chief Accounting Off

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2225819323578

Amount of Each Receipt this Period

1153.80

☐ Memo Item

15

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

B. RYAN, JOHN D, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C RVP Client Mgmt & Svc

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2225819623578

Amount of Each Receipt this Period

230.76

☐ Memo Item

15

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

C. SAILOR, ROY T, ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Dir General Management

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

461.52

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2225819723578

Amount of Each Receipt this Period

461.52

☐ Memo Item

15

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

1846.08

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

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

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

FOR LINE NUMBER: PAGE 35 OF 66
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. DROZDA, JEFFERY A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Govt Rel Assoc Dir

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2231347423578

Amount of Each Receipt this Period

240.00

☐ Memo Item

15

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

B. RICHEY, DARRELL S, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Deputy General Counsel (

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2231352323578

Amount of Each Receipt this Period

480.00

☐ Memo Item

15

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

C. CONNLY, MICHAEL R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Chief Technology Officer

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2247625823578

Amount of Each Receipt this Period

240.00

☐ Memo Item

15

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

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

960.00

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

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

FOR LINE NUMBER: PAGE 36 OF 66
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. RUDDOCK, JOYCE M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C VP

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
 03 / 31 / 2010

Transaction ID : PR2247626423578

Amount of Each Receipt this Period

250.00

☐ Memo Item

15

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

B. CARCIONE JR, JOSEPH R, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Medical Director

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.20

Date of Receipt

MM / DD / YYYY
 03 / 31 / 2010

Transaction ID : PR2247626823578

Amount of Each Receipt this Period

346.20

☐ Memo Item

15

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

C. O'BRIEN, DENNIS P, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C RVP Network Mgmt

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

346.20

Date of Receipt

MM / DD / YYYY
 03 / 31 / 2010

Transaction ID : PR2247627323578

Amount of Each Receipt this Period

346.20

☐ Memo Item

15

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

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

942.40

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

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

FOR LINE NUMBER: PAGE 37 OF 66

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. VERNEY, JEFFERY RICHARD, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C VP General Management

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.20

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2247627423578

Amount of Each Receipt this Period

346.20

☐ Memo Item

15

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

B. BROOKS, DARRELL, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C VP Information Technolog

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.20

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2247627623578

Amount of Each Receipt this Period

346.20

☐ Memo Item

15

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

C. GARODIA, SANJAY, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C COO

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.76

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2247627823578

Amount of Each Receipt this Period

230.76

☐ Memo Item

15

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

923.16

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

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

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

FOR LINE NUMBER: PAGE 38 OF 66

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. KOSECOFF, JACQUELINE B, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Business Segment CEO

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2247627923578

Amount of Each Receipt this Period

1153.80

☐ Memo Item

15

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

B. PRINCE, JOHN M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Business Segment COO

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2259738423578

Amount of Each Receipt this Period

240.00

☐ Memo Item

15

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

C. CRONN, CHRIS, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Govt Rel Dir

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.76

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2270522923578

Amount of Each Receipt this Period

230.76

☐ Memo Item

15

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

1624.56

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

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

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

FOR LINE NUMBER: PAGE 39 OF 66
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. MYERS, WILLIAM F, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Govt Rel Dir

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2359784123578

Amount of Each Receipt this Period

240.00

☐ Memo Item

15

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

B. STEVENS, SIMON L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C EVP UnitedHealth Group

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2364863223578

Amount of Each Receipt this Period

1153.80

☐ Memo Item

15

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

C. DE SA, JEANNE M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Govt Rel Dir

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2402315923578

Amount of Each Receipt this Period

300.00

☐ Memo Item

15

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

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

1693.80

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

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

FOR LINE NUMBER: PAGE 40 OF 66
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. HENDERSON, SCOTT E, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Govt Rel Dir

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2402317023578

Amount of Each Receipt this Period

210.00

☐ Memo Item

15

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

B. SOUZA, DIANE D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C CEO Specialty Benefits

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.90

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2402320023578

Amount of Each Receipt this Period

4999.90

☐ Memo Item

15

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

C. SWEERE, LORI K, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C EVP Human Capital

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2402320223578

Amount of Each Receipt this Period

210.00

☐ Memo Item

15

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

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

5419.90

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 41 OF 66
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. TUFTE, MYLYNN K, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Dir Medical & Clinical Ops

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2402320323578

Amount of Each Receipt this Period

430.00

☐ Memo Item

15

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

B. RAVELO, GUIDO, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C Management

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2402444523578

Amount of Each Receipt this Period

1000.00

☐ Memo Item

15

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

C. DONOVAN, JAMES D, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C SVP Bus Dev and Marketi

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

390.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2402445323578

Amount of Each Receipt this Period

390.00

☐ Memo Item

15

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

1820.00

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

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

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

FOR LINE NUMBER: PAGE 42 OF 66

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. PETRELLA, RUSSELL C, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C President Americhoice

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2402446423578

Amount of Each Receipt this Period

510.00

☐ Memo Item

15

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

B. ALEXANDER, CORY, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C VP Gov't Relations

Name of Employer (for Individual)

Occupation (for Individual)
UnitedHealth Group, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2405428823578

Amount of Each Receipt this Period

1153.80

☐ Memo Item

15

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

C. ARMSTEAD, RODNEY CHARLES, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C VP Operations

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2405430223578

Amount of Each Receipt this Period

240.00

☐ Memo Item

15

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

1903.80

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

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

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

FOR LINE NUMBER: PAGE 43 OF 66
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. ELLISON, NANCY M, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2408544623578

Amount of Each Receipt this Period

600.00

☐ Memo Item

15

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

B. KOZIARA BOUDREAUX, GAIL, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.90

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2437119523578

Amount of Each Receipt this Period

4999.90

☐ Memo Item

15

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

C. HAGAN, WILLIAM A, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2437120023578

Amount of Each Receipt this Period

2000.00

☐ Memo Item

15

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

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

7599.90

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

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

FOR LINE NUMBER: PAGE 44 OF 66
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

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

A. CLARK, KELLY L, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2437121323578

Amount of Each Receipt this Period

230.76

☐ Memo Item

15

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

B. COSGRIFF, JOHN W, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2437121623578

Amount of Each Receipt this Period

250.00

☐ Memo Item

15

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

C. LIPPERT, ROBIN E, , ,

Mailing Address 9900 Bren Road East

City
Minnetonka

State
MN

Zip Code
55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 31 / 2010

Transaction ID : PR2439928023578

Amount of Each Receipt this Period

300.00

☐ Memo Item

15

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

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

780.76

77211.40

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 45 OF 66

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Alamo PACMailing Address 919 Congress Ave
Suite 1400City
AustinState
TXZip Code
78701

Purpose of Disbursement

Candidate Name

C00387464

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	9			2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31200938

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bluegrass Committee

Mailing Address 400 North Capitol Street NW #585

City
WashingtonState
DCZip Code
20001

Purpose of Disbursement

Candidate Name

C00235655

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	5			2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31219368

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Friends Of John Thune

Mailing Address 200 North Phillips Avenue Ste L101

City
Sioux FallsState
SDZip Code
57104

Purpose of Disbursement

Candidate Name

S2SD00068, Thune, John, R., Sen.

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: S

District: SD

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	5			2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31219407

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

8500.00

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

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 46 OF 66

☐ 21b ☐ 22 ☒ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Mike Pence Committee

Mailing Address P. O. Box 408

City
Anderson

State
IN

Zip Code
46015

Purpose of Disbursement

Candidate Name

H8IN02060, Pence, Michael, R., Rep.

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: H District: IN

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 02 / 2010

FEC Identification Number

C 011

Transaction ID : 31271438

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. McCotter Congressional Committee

Mailing Address PO Box 530788

City
Livonia

State
MI

Zip Code
48153

Purpose of Disbursement

Candidate Name

H2MI00037, McCotter, Thaddeus, G., Rep.

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: H District: MI

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 02 / 2010

FEC Identification Number

C 011

Transaction ID : 31271440

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Patrick Murphy For Congress

Mailing Address P.O. Box 868

City
Levittown

State
PA

Zip Code
19058

Purpose of Disbursement

Candidate Name

H6PA08194, Murphy, Patrick, J., Rep.

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: H District: PA

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 02 / 2010

FEC Identification Number

C 011

Transaction ID : 31271447

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

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

4000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 47 OF 66

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Nelson 2012

Mailing Address PO Box 8666

City
OmahaState
NEZip Code
68108

Purpose of Disbursement

Candidate Name

S6NE00095, Nelson, Ben, , Sen.

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

State: S

District: NE

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	2			2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31271448

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Coburn For Senate 2010

Mailing Address Post Office Box 977

City
MuskogeeState
OKZip Code
74402

Purpose of Disbursement

Candidate Name

S4OK00174, Coburn, Thomas, Allen, Sen.

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: S

District: OK

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	2			2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31379280

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Making Business Excel Political Action Committee

Mailing Address PO Box 3241

City
CheyenneState
WYZip Code
82001

Purpose of Disbursement

Candidate Name

C00392134

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	2			2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31379283

Amount of Each Disbursement this Period

1500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 48 OF 66

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. The Freedom Project

Mailing Address 111 C Street SE

City
WashingtonState
DCZip Code
20003

Purpose of Disbursement

Candidate Name

C00305805

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	2			2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31379284

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Lisa Murkowski For Us Senate

Mailing Address PO Box 100847

City
AnchorageState
AKZip Code
99510

Purpose of Disbursement

Candidate Name

S4AK00099, Murkowski, Lisa, , Sen.

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: S

District: AK

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	2			2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31379285

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Michael Burgess For Congress

Mailing Address PO Box 2334

City
DentonState
TXZip Code
76202

Purpose of Disbursement

Candidate Name

H2TX26093, Burgess, Michael C., , Mr.

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: H

District: TX

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	2			2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31379286

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

5500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 49 OF 66

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Bennett Election Committee Inc

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2010

Mailing Address 175 South West Temple Suite 650

City
Salt Lake CityState
UTZip Code
84101

Purpose of Disbursement

FEC Identification Number

C 011

Transaction ID : 31379288

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Candidate Name

S2UT00104, Bennett, Robert, F., Sen.

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: S

District: UT

Category/
Type

Full Name (Last, First, Middle Initial)

B. Democratic Senatorial Campaign Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2010

Mailing Address 430 S Capitol

City
WashingtonState
DCZip Code
20003

Purpose of Disbursement

FEC Identification Number

C 011

Transaction ID : 31379290

Amount of Each Disbursement this Period

15000.00

☐ Memo Item

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Full Name (Last, First, Middle Initial)

C. Mike McMahon For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2010

Mailing Address 66 Arnold Street

City
Staten IslandState
NYZip Code
10301

Purpose of Disbursement

FEC Identification Number

C 011

Transaction ID : 31379293

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Candidate Name

H8NY13077, McMahon, Michael, , Mr.

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: H

District: NY

Category/
Type**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

18500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 50 OF 66

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Leading Us In Success PAC (LUIS PAC)Mailing Address 7315 Wisconsin Avenue
Suite 310 EastCity
BethesdaState
MDZip Code
20814

Purpose of Disbursement

Candidate Name

C00408054

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	2		2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31379398

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends Of John Barrasso

Mailing Address PO Box 52008

City
CasperState
WYZip Code
82605

Purpose of Disbursement

Candidate Name

S6WY00068, Barrasso, John, , Mr.

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: S

District: WY

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	2		2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31379399

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Republican Party of Wisconsin - FEDERAL

Mailing Address 148 E. Johnson Street

City
MadisonState
WIZip Code
53703

Purpose of Disbursement

Candidate Name

C00074450

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	5		2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31394574

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

9500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. National Republican Senatorial Committee

Mailing Address 425 Second Street NE

City
WashingtonState
DCZip Code
20002

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	01	/	2010

FEC Identification Number

C 011

Transaction ID : 31406327

Amount of Each Disbursement this Period

15000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Orrin PACMailing Address 175 S. West Temple
Suite 650City
Salt Lake CityState
UTZip Code
84101

Purpose of Disbursement

Candidate Name

C00235572

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	03	/	2010

FEC Identification Number

C 011

Transaction ID : 31409547

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. The Grassley Committee, Inc.

Mailing Address P.O. Box 6193

City
AlexandriaState
VAZip Code
22306-0193

Purpose of Disbursement

Candidate Name

, Grassley, Charles E., ,

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: S District: IA

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	03	/	2010

FEC Identification Number

C 011

Transaction ID : 31409548

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

20000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 52 OF 66

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Friends Of Erik PaulsenMailing Address P.O. Box 44369
250 Prairie Center DriveCity
Eden PrairieState
MNZip Code
55344

Purpose of Disbursement

Candidate Name

H8MN03077, Paulsen, Erik, , Mr.

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: H District: MN

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	3			2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31409567

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bennett Election Committee Inc

Mailing Address 175 South West Temple Suite 650

City
Salt Lake CityState
UTZip Code
84101

Purpose of Disbursement

Candidate Name

S2UT00104, Bennett, Robert, F., Sen.

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

State: S District: UT

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	3			2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31409570

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Democratic Congressional Campaign Committee

Mailing Address 430 S. Capital St. 2nd Fl

City
WashingtonState
DCZip Code
20003

Purpose of Disbursement

Candidate Name

C00000935

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	3			2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31409574

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Wasserman-Schultz For Congress

Mailing Address 1071 Twin Branch Ln

City
WestonState
FLZip Code
33326

Purpose of Disbursement

Candidate Name

H4FL20023, Schultz Debbie, Wasserman, ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: H District: FL

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	3			2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31409577

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Montanans For Tester

Mailing Address PO Box 1135

City
HelenaState
MTZip Code
59624

Purpose of Disbursement

Candidate Name

S6MT00162, Tester, Jon, , Mr.

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: S District: MT

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	3			2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31409578

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Long Leaf Pine PACMailing Address 607 14th Street, NW
Suite 800City
WashingtonState
DCZip Code
20005

Purpose of Disbursement

Candidate Name

C00459305

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	3			2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31409585

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Friends Of John Thune

Mailing Address 200 North Phillips Avenue Ste L101

City
Sioux FallsState
SDZip Code
57104

Purpose of Disbursement

Candidate Name

S2SD00068, Thune, John, R., Sen.

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: S

District: SD

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	3			2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31409588

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SKI PAC

Mailing Address P.O. Box 83142

City
GaithersburgState
MDZip Code
20883

Purpose of Disbursement

Candidate Name

C00470666

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	3			2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31409936

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SKI PAC

Mailing Address P.O. Box 83142

City
GaithersburgState
MDZip Code
20883

Purpose of Disbursement

Candidate Name

C00470666

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31464801

Amount of Each Disbursement this Period

- 2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Matheson For CongressMailing Address P O Box 521048
Suite ACity
Salt Lake CityState
UTZip Code
84152

Purpose of Disbursement

Candidate Name

H0UT02096, Matheson, James, D., Rep.

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

State: H District: UT

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31464802

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Democratic Congressional Campaign Committee

Mailing Address 430 S. Capital St. 2nd Fl

City
WashingtonState
DCZip Code
20003

Purpose of Disbursement

Candidate Name

C00000935

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31465520

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bright For Congress

Mailing Address P.O.Box 2106

City
MontgomeryState
ALZip Code
36102

Purpose of Disbursement

Candidate Name

H8AL02130, Bright, Bobby, , Mr.

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: H District: AL

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	6			2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31467682

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

8500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Stephanie Herseth Sandlin For South Dakota

Mailing Address PO Box 2009

City
Sioux FallsState
SDZip Code
57101

Purpose of Disbursement

Candidate Name

H2SD00092, Herseth Sandlin, Stephanie, , Rep.

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: H District: SD

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	6			2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31467686

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Joe Donnelly For Congress

Mailing Address PO Box 1961

City
South BendState
INZip Code
46634

Purpose of Disbursement

Candidate Name

H4IN02101, Donnelly, Joseph, , Rep.

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: H District: IN

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	7			2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31509211

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Gingrey For Congress

Mailing Address PO Box U

City
MariettaState
GAZip Code
30060

Purpose of Disbursement

Candidate Name

H2GA11149, Gingrey, Phil, , Rep.

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: H District: GA

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	2			2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31509306

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

7000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 57 OF 66

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. National Republican Congressional Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	22	/	2010

Mailing Address 320 First Street, SE

City
WashingtonState
DCZip Code
20003

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C 011

Transaction ID : 31509307

Amount of Each Disbursement this Period

15000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERIPAC: The Fund for a Greater America

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	23	/	2010

Mailing Address 607 14th Street, NW
Suite 800City
WashingtonState
DCZip Code
20005

Purpose of Disbursement

Candidate Name

C00271338

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C 011

Transaction ID : 31509866

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Volunteers For Shimkus

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	23	/	2010

Mailing Address PO Box 5458

City
SpringfieldState
ILZip Code
62705

Purpose of Disbursement

Candidate Name

H2IL20042, Shimkus, John, M., Rep.

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: H

District: IL

FEC Identification Number

C 011

Transaction ID : 31509867

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

18500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 58 OF 66

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Committee for the Preservation of Capitalism

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2010

Mailing Address P.O. Box 22614

City
AlexandriaState
VAZip Code
22304

Purpose of Disbursement

FEC Identification Number

C 011

Transaction ID : 31509868

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Candidate Name

C00328468

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Prosperity PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2010

Mailing Address 429 North Saint Asaph

City
AlexandriaState
VAZip Code
22314

Purpose of Disbursement

FEC Identification Number

C 011

Transaction ID : 31509869

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Candidate Name

C00377689

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. Wally Herger For Congress Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2010

Mailing Address PO Box 1007

City
WillowsState
CAZip Code
95988

Purpose of Disbursement

FEC Identification Number

C 011

Transaction ID : 31509870

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Candidate Name

H6CA02010, Herger, Wally, , Rep.

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: H

District: CA

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

3000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 59 OF 66

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Mikulski for SenateMailing Address 711 West 40th Street
Suite 460City
BaltimoreState
MDZip Code
21211

Purpose of Disbursement

Candidate Name

, Mikulski, Barbara A., ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: S

District: MD

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	3			2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31509873

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Nebraska Leadership PAC (NELPAC)

Mailing Address P.O. Box 3325

City
OmahaState
NEZip Code
68103

Purpose of Disbursement

Candidate Name

C00366419

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	4			2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31510241

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Committee for the Preservation of Capitalism

Mailing Address P.O. Box 22614

City
AlexandriaState
VAZip Code
22304

Purpose of Disbursement

Candidate Name

C00328468

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	4			2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31510841

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Patrick Murphy For Congress

Mailing Address P.O. Box 868

City
LevittownState
PAZip Code
19058

Purpose of Disbursement

Void - F

Candidate Name

H6PA08194, Murphy, Patrick, J., Rep.

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: H District: PA

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2010

FEC Identification Number

C 011

Transaction ID : 31511193

Amount of Each Disbursement this Period

- 1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Price For Congress

Mailing Address P.O. Box 425

City
RoswellState
GAZip Code
30077

Purpose of Disbursement

Category/
Type

Candidate Name

H4GA06087, Price, Thomas, Edmunds, Rep.

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: H District: GA

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	25	/	2010

FEC Identification Number

C 011

Transaction ID : 31516772

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Democratic Congressional Campaign Committee

Mailing Address 430 S. Capital St. 2nd Fl

City
WashingtonState
DCZip Code
20003

Purpose of Disbursement

Category/
Type

Candidate Name

C00000935

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	25	/	2010

FEC Identification Number

C 011

Transaction ID : 31516799

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 61 OF 66

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Effective Leadership PAC

Mailing Address 309 LaFayette Avenue #13M

City
BrooklynState
NYZip Code
11238

Purpose of Disbursement

Candidate Name

C00442590

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	6			2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31524623

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Committe To Re-Elect Ed Towns

Mailing Address 438 Lewis Avenue

City
BrooklynState
NYZip Code
11233

Purpose of Disbursement

Candidate Name

H2NY11017, Towns, Edolphus, , Rep.

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: H

District: NY

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	6			2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31524626

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Rogers For CongressMailing Address PO Box 581
Post Office Box 581City
BrightonState
MIZip Code
48116

Purpose of Disbursement

Candidate Name

H0MI08042, Rogers, Michael, J., Rep.

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: H

District: MI

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	0			2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31527677

Amount of Each Disbursement this Period

2000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

9500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. NewPAC

Mailing Address P.O. Box 7480

City
VisaliaState
CAZip Code
93290

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				3	0		2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31527680

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Citizens for Arlen SpecterMailing Address 300 I Street N.E.
Suite 100BCity
WashingtonState
DCZip Code
20002

Purpose of Disbursement

Candidate Name

, Specter, Arlen, ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☐ Primary ☒ General
☐ Other (specify)

State: S

District: PA

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				3	0		2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31527684

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. The Great Land PAC

Mailing Address 426 C Street, NE

City
WashingtonState
DCZip Code
20002

Purpose of Disbursement

Candidate Name

C00457747

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				3	0		2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31531672

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 63 OF 66

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Long Leaf Pine PACMailing Address 607 14th Street, NW
Suite 800City
WashingtonState
DCZip Code
20005

Purpose of Disbursement

Candidate Name

C00459305

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				3	0		2	0	1	0		

FEC Identification Number

C 011**Transaction ID : 31531683**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JAZZ PACMailing Address 10 G Street, NE
Suite 470City
WashingtonState
DCZip Code
20002

Purpose of Disbursement

Candidate Name

C00405290

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				3	1		2	0	1	0		

FEC Identification Number

C 011**Transaction ID : 31536518**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bill Nelson For U S Senate

Mailing Address 500 Red Sail Way

City
Satellite BeachState
FLZip Code
32937

Purpose of Disbursement

Candidate Name

S8FL00166, Nelson, Bill, , Mr.

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: S

District: FL

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				3	1		2	0	1	0		

FEC Identification Number

C 011**Transaction ID : 31538560**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

7500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 64 OF 66

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Democratic Congressional Campaign Committee

Mailing Address 430 S. Capital St. 2nd Fl

City
WashingtonState
DCZip Code
20003

Purpose of Disbursement

Void - C

Candidate Name

C00000935

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	1			2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31544194

Amount of Each Disbursement this Period

- 5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol St. SE

City
WashingtonState
DCZip Code
20003

Purpose of Disbursement

Category/
Type

Candidate Name

C00000935

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	1			2	0	1	0		

FEC Identification Number

C 011

Transaction ID : 31544195

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

156500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 65 OF 66

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. United for Health of Texas (UnitedHealth Group Inc, PAC of Texas)

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	D	D	D	Y	Y	Y	Y	Y	Y
0	1		1	4		2	0	1	0		

FEC Identification Number

C 011**Transaction ID : 31173040**

Amount of Each Disbursement this Period

900.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Senate Republican Campaign Committee

Mailing Address P.O. Box 12023

City
LansingState
MIZip Code
48901

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	D	D	D	Y	Y	Y	Y	Y	Y
0	2		2	5		2	0	1	0		

FEC Identification Number

C 011**Transaction ID : 31394573**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Arizona Democratic Party

Mailing Address 2910 North Central Avenue

City
PhoenixState
AZZip Code
85012

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	D	D	D	Y	Y	Y	Y	Y	Y
0	2		2	5		2	0	1	0		

FEC Identification Number

C 011**Transaction ID : 31394580**

Amount of Each Disbursement this Period

3000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

8900.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 66 OF 66

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Friends of John McComish

Mailing Address 4463 East Desert View Drive

City
PhoenixState
AZZip Code
85044

Purpose of Disbursement

Void - F

Candidate Name

, McComish, John, , AZ Rep.

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: H

District: AZ

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	25	/	2010

FEC Identification Number

C 011

Transaction ID : 31394586

Amount of Each Disbursement this Period

- 200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. UnitedHealth Group Inc PAC of PA

Mailing Address 9900 Bren Road East

City
MinnetonkaState
MNZip Code
55343

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2010

FEC Identification Number

C 011

Transaction ID : 31509865

Amount of Each Disbursement this Period

8000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Pennsylvania Bureau of Elections

Mailing Address 210 North Office Building

City
HarrisburgState
PAZip Code
17120-0029

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2010

FEC Identification Number

C 001

Transaction ID : 31524643

Amount of Each Disbursement this Period

250.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8050.00

16950.00