Image# 13944246693				PAGE 1 / 222
	PORT OF R D DISBURS Other Than An Autho	EMENTS		(f
1. NAME OF TYP	E OR PRINT V	Example: If typing, ty		ffice Use Only
COMMITTEE (in full)		over the lines.	12FE4M5	
UnitedHealth Group Incor	porated PAC (Unite	d for Health)		
ADDRESS (number and street)	000 Bren Road East			
Check if different				
than previously reported. (ACC)	linnetonka			55343
2. FEC IDENTIFICATION NUMB			STATE 🔺	ZIP CODE
C C00274431	3. IS T REF	HIS X NEW ORT X (N)	OR AMEN (A)	IDED
 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 	b) Monthly Report Due On: Apr 20	(M3) Jun 20	20 (M5) Aug 20 D (M6) Sep 20 (M7) Oct 20	(M9) × Dec 20 (M12) (Non-Election (Non-Election Year Only)
Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3)	(c) 12-Day PRE-Election Report for the:	Primary (12P) Convention (12C)	General (12) Special (12)	
January 31 Year-End Report (YE)	Election c		D / Y Y Y Y Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST -Election Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	Election of	n / D	D / Y Y Y Y Y Y	in the State of
5. Covering Period	01 / Y Y Y Y Y 01 2013	through	11 30 / T	2013
I certify that I have examined this Re Type or Print Name of Treasurer S	eport and to the best of my	v knowledge and belief	it is true, correct and co	omplete.
Signature of Treasurer Susan Sher		[Electronically Filed	Date 12	/ D D / Y Y Y Y 20 2013
NOTE: Submission of false, erroneous,	or incomplete information m	ay subject the person si	gning this Report to the r	penalties of 2 U.S.C. §437a.
Office Use Only				FEC FORM 3X Rev. 12/2004

12/20/2013 13 : 39

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

FEC Form 3X (Rev. 02/2003) Write or Type Committee Name

UnitedHealth Group Incorporated PAC (United for Health)

R	eport Covering the Period: From:	M / D D / Y Y Y Y 01 2013 To	2013 x x x x x x x x x x x x x x x x x x x
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2013		220131.42
	(b) Cash on Hand at Beginning of Reporting Period	329460.95	
	(c) Total Receipts (from Line 19)	92743.27	677997.30
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	422204.22	898128.72
7.	Total Disbursements (from Line 31)	64060.00	539984.50
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	358144.22	358144.22
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

X

Image#	13944246695	
mayem	13344240033	

DETAILED SUMMARY PAGE

of Receipts

Page 3

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

UnitedHealth Group Incorporated PAC (United for Health)

Report Covering the Period: From: 11	/ 01 / 2013 To	: 11 / 30 / Y Y Y 2013
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	00050 47	554016.55
(i) Itemized (use Schedule A)	89956.17	554010.55
(ii) Unitemized	2787.10	123980.75
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)	92743.27	677997.30
Γ	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	92743.27	677997.30
2. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
	0.00	
Loan Repayments Received	0.00	0.00
5. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
6. Refunds of Contributions Made	1 1 /7 1 1 /7 1 1 /m 1	
to Federal Candidates and Other		
Political Committees	0.00	0.00
7. Other Federal Receipts	7 7	
(Dividends, Interest, etc.)	0.00	0.00
3. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
	0.00	0.00
(b) Levin Funds (from Schedule H5)		0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
). Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))►	92743.27	677997.30
	7 7	7 7
). Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	92743.27	677997.30

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)		Page 4
II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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	100.00
 (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) 	0.00	100.00
Transfers to Affiliated/Other Party	0.00	0.00
Committees Contributions to Federal Candidates/Committees		
and Other Political Committees	17500.00	449500.00
(use Schedule E) Coordinated Party Expenditures	0.00	0.00
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	248.00
(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	248.00
Other Disbursements	46560.00	90136.50
Federal Election Activity (2 U.S.C. §431(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
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	64060.00	539984.50
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	64060.00	539984.50

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I

DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Total Contributions (other than loans) (from Line 11(d), page 3) 	92743.27	677997.30
 Total Contribution Refunds (from Line 28(d)) 	0.00	248.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	92743.27	677749.30
 Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) 	0.00	100.00
 Offsets to Operating Expenditures (from Line 15, page 3) 	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	100.00

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 6 OF

ITEMIZED RECEIPTS		Detailed Summary Page	×	11a 13		11b 14		11c 15	12	17			
Any information copied from such Reports a or for commercial purposes, other than using						pose d		oliciting	g contrib	utions			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	rated PAC (I	United for Health)											
Full Name (Last, First, Middle Initial) A. JAMES EPPEL			[Date of Receipt									
	Mailing Address 4118 SUNNYSIDE ROAD							/ Y	ү ү 2013	Y			
City EDINA	State MN	Zip Code 55424-1214						672051					
FEC ID number of contributing federal political committee.	С			Amount	tot	Each	Red	ceipt th	nis Perioo 250	d 0.00			
Name of Employer United HealthCare Services Inc	Occupation Optum Exe												
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2500.00]										
Full Name (Last, First, Middle Initial) B. CHARLES THOMPSON				Date of	Re	eceipt							
Mailing Address 5217 EDGEWOOD ROAL		11 15 2013											
City LITTLE ROCK	State AR	Zip Code 72207-5413	A	Transaction ID : 36720524 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.			2500.00										
Name of Employer UnitedHealthcare Corporate	Occupation VP Regl Aff												
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2500.00]										
Full Name (Last, First, Middle Initial) C. MOLLIE CHAPMAN				Date of	Re	ceipt							
Mailing Address 226 BERNARD DR				м м 11	/	D 3		/ Y	у у 2013	Y			
City MONROE	State OH	Zip Code 45050-1510	A						7905317 nis Perio				
FEC ID number of contributing federal political committee.	ů l							7	2	0.00			
Name of Employer	Occupation	1											
United HealthCare Services Inc	Assc Dir Nt	twk Contrctng											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P/	′R Ded	uctio	on (\$1	0.0	0 Bi-We	eekly)				
			P/	K Dea		on (\$1	0.0	о BI-VV6	5020	0.00			

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 7 OF

171	EMIZED RECEIPTS		Use separate schedule(s)	(ch	(check only one)							
111			for each category of the Detailed Summary Page		< 11a		11b	11c		2	47	
An or	y information copied from such Reports and S for commercial purposes, other than using the	Statements mage name and a	l ay not be sold or used by any po ddress of any political committee	erson e to so	13 for the plicit cor	 pur htrib	14 pose of putions f	15 soliciting from sucl	g cont	ributic mittee	17 ons e.	
$\overline{\ }$	NAME OF COMMITTEE (In Full)											
/	UnitedHealth Group Incorporate	ed PAC (l	United for Health)									
Α.	Full Name (Last, First, Middle Initial) KEN HOVERMAN				Date of	Re	eceipt					
	Mailing Address 16221 SIERRA DE AVILA				M M	/	30) / Y	y 201			
	City TAMPA	State FL	Zip Code 33613-5222					PR1159			_	
	FEC ID number of contributing federal political committee.	С					5			20.0	0	
	Name of Employer United HealthCare Services Inc	Occupation VP Mktg										
	Receipt For: Primary General Other (specify) V	Aggregate	Year-to-Date ▼ 240.00		P/R Ded	uctio	on (\$10.	.00 Bi-We	eekly)			
в.	Full Name (Last, First, Middle Initial) DEBORAH STREB				Date of	Re	eceipt					
	Mailing Address 2201 NORTH STAR ROAD				M M	1	30) / Y	201	ү ү 3		
	City UPPER ARLINGTON	State OH	Zip Code 43221-3810					PR11597 Receipt th				
	FEC ID number of contributing federal political committee.	С					,	,		28.0	0	
	Name of Employer United HealthCare Services Inc	Occupation Dir Proj Mg										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	I P	P/R Dedu	uctio	on (\$14.	00 Bi-We	eekly)			
с.	Full Name (Last, First, Middle Initial)				Date of	Re	eceipt					
	Mailing Address 11 CARNIVAL TERRACE				M M 11	1	30		y 201			
	City WEST WARWICK	State RI	Zip Code 02893-1985					PR1159 Receipt th				
	FEC ID number of contributing federal political committee.	С					5			40.0	00	
	Name of Employer United HealthCare Services Inc	Occupation Sr Med Dir										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 460.00		P/R Ded	ucti	on (\$20	.00 Bi-We	eekly)			
s	UBTOTAL of Receipts This Page (optional)			•						88.0	0	
т	OTAL This Period (last page this line number	only)	b	•						-		

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

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 8 OF

			(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12							
Any information copied from such Reports a or for commercial purposes, other than usin										
NAME OF COMMITTEE (In Full)	-									
Full Name (Last, First, Middle Initial) A. CARLA MUGGIO			Date of Receipt							
Mailing Address 3533 FAIR OAKS LANE			11 30 2013	r						
City LONGBOAT KEY	State FL	Zip Code 34228-4121	Transaction ID : PR1159798231763 Amount of Each Receipt this Period	_						
FEC ID number of contributing federal political committee.	С		38.4	¥6						
Name of Employer United HealthCare Services Inc Receipt For:	Occupation Ntwk Contra Aggregate	act Dir Year-to-Date ▼								
Other (specify) ▼		461.52	P/R Deduction (\$19.23 Bi-Weekly)							
Full Name (Last, First, Middle Initial) B. SHARON SWAN			Date of Receipt							
Mailing Address 395 STEAMBOAT CROS	11 30 / Y Y Y Y Y									
City DRIPPING SPRINGS	State TX	Zip Code 78620-4342	Transaction ID : PR1159803231763							
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period	0						
Name of Employer United HealthCare Services Inc	Occupation SB Dir NAs	Acct Mgmt								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P/R Deduction (\$10.00 Bi-Weekly)							
Full Name (Last, First, Middle Initial) C. BRIAN BELLOWS			Date of Receipt							
Mailing Address 10 SHADOWOOD LANE	E		11 30 2013	ŕ						
City TRUMBULL	State CT	Zip Code 06611-4062	Transaction ID : PR1159803831763							
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period	00						
Name of Employer	Occupation		_							
United HealthCare Services Inc	Dir Bus Dvl	ρ								
Receipt For: Primary General Other (specify) v	Aggregate	Year-to-Date ▼ 360.00	P/R Deduction (\$15.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional	al)		88.4	6						
TOTAL This Period (last page this line nur	mber only)									

SCHEDULE A (FEC Form 3X)

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)							
IILIVIIZED RECEIPIS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
			person for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	prated PAC (I	Jnited for Health)								
Full Name (Last, First, Middle Initial) A. KEITH NOBLITT			Date of Receipt							
Mailing Address 122 SOUTH OAK POIN	TE DR		11 30 Y Y Y Y Y Y							
City SENECA	State SC	Zip Code 29672-6764	Transaction ID : PR1159805531763 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		40.00							
Name of Employer United HealthCare Services Inc	Occupation SCE 3 NAs									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 480.00	P/R Deduction (\$20.00 Bi-Weekly)							
Full Name (Last, First, Middle Initial) B. JAMES ELLISTON	·		Date of Receipt							
Mailing Address 302 S 52ND ST	11 / D D / Y Y Y Y Y 11 30 2013									
City OMAHA	State NE	Zip Code 68132-3544	Transaction ID : PR1159805931763 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		20.00							
Name of Employer United HealthCare Services Inc	Occupation Dir Finance									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P/R Deduction (\$10.00 Bi-Weekly)							
Full Name (Last, First, Middle Initial) C. JAMES WATSON			Date of Receipt							
Mailing Address 6520 SHENANDOAH D	R		11 30 Y Y Y Y Y 11 30 2013							
City LINCOLN	State NE	Zip Code 68510-5159	Transaction ID : PR1159806031763 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		50.00							
Name of Employer United HealthCare Services Inc	Occupation Assc Gen (
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 600.00	P/R Deduction (\$25.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (option	al)		, 110.00							
TOTAL This Period (last page this line nu	mber only)									

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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			Detailed Summary Page		11a		11b	11c		12							
An	y information copied from such Reports and S	Statements ma	w not be sold or used by any n	erson f	13 or the	pur	14 pose of	15 solicitin		16 ntributi	0ns						
	for commercial purposes, other than using the																
\setminus	NAME OF COMMITTEE (In Full)	//															
/	UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)														
۹.	Full Name (Last, First, Middle Initial) MARILYN NEVIN			[Date of	Re	eceipt										
	Mailing Address 7930 GOLDEN VALLEY ROA		M M	1	30	/ Y) 013	Y								
	City	State	Zip Code	Transaction ID : PR1159807431763													
	GOLDEN VALLEY	MN 55427-4490 Amount of Each Receipt this															
	FEC ID number of contributing federal political committee.	С					7			20.	00						
	Name of Employer																
	United HealthCare Services Inc																
	Receipt For:																
	Primary General		Year-to-Date ▼	P/	P/R Deduction (\$10.00 Bi-Weekly)												
	Other (specify)		240.00														
3.	Full Name (Last, First, Middle Initial) WAYNE COOK								Date of Receipt								
	Mailing Address 1200 PEBBLE HILL ROAD				M M / D D / Y Y Y Y												
-	City State Zip Code						11 30 2013										
	City		Transaction ID : PR1159812831763														
	DOYLESTOWN	/	Amount of Each Receipt this Period														
	FEC ID number of contributing federal political committee.																
	Name of Employer United HealthCare Services Inc																
	Receipt For:	Aggregate	Year-to-Date ▼														
	Primary General		4440.00	P/	P/R Deduction (\$60.00 Bi-Weekly)												
	Other (specify)		1440.00	4													
<u>.</u>	Full Name (Last, First, Middle Initial)				Date of	Re	eceipt										
	Mailing Address 7000 ANTRIM ROAD				м м 11	1	30	/ Y)13	Y						
	City	State	Zip Code		Trans	act	ion ID :	PR1159	8147	731763	3						
	EDINA	MN	55439-1708	/	Amount	of	Each R	eceipt tl	nis P	eriod							
	FEC ID number of contributing federal political committee.	С					7			384.	60						
	Name of Employer	Occupation		_													
	United HealthCare Services Inc	EVP Pres L	IHG Ops														
	Receipt For:	Aggregate	Year-to-Date ▼														
	Primary General	, iggi eguie		P	/R Ded	ucti	on (\$192	2.30 Bi-\	Veek	dy)							
	Other (specify)		4615.20	P/R Deduction (\$192.30 Bi-Weekly)													
5	IIBTOTAL of Receipts This Page (optional)					-				524.6	60						
	UBTOTAL of Receipts This Page (optional)			<u>}</u>	-	-	7		-	524.0							
	OTAL This Period (last page this line number		•••••••	-		1	7			1	-						

Use separate schedule(s)

FOR LINE NUMBER:

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
	for commercial purposes, other than using the			rson for the purpose of soliciting contributions to solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)						
Α.	Full Name (Last, First, Middle Initial) PATRICK ERLANDSON			Date of Receipt					
	Mailing Address 1000 OLD LONG LAKE ROA			11 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
	City WAYZATA	State MN	Zip Code 55391-9690	Transaction ID : PR1159815931763					
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period					
	Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify)	Occupation SVP Bus O Aggregate		P/R Deduction (\$192.30 Bi-Weekly)					
	Full Name (Last, First, Middle Initial) BRUCE MEAD Mailing Address 1232 GRAY BRANCH RD			Date of Receipt					
	City	11 30 2013 Transaction ID : PR1159816131763							
	MCKINNEY	ТХ	75071-6495	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	20.00							
	Name of Employer United HealthCare Services Inc	Occupation SVP SIs							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P/R Deduction (\$10.00 Bi-Weekly)					
с.	Full Name (Last, First, Middle Initial) PATRICIA SAURO			Date of Receipt					
	Mailing Address 8943 HIDDEN MEADOW R			11 30 2013					
	City WOODBURY	State MN	Zip Code 55125-9138	Transaction ID : PR1159816431763 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С							
	Name of Employer	Occupation	1	_					
	United HealthCare Services Inc	SVP United	HIthcare						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1440.00	P/R Deduction (\$60.00 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)		•	524.60					
т	OTAL This Period (last page this line number	only)	•						

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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			Detailed Summary Page	X	11a		11b		11c		12	
					13		14		15		16	17
An or	y information copied from such Reports and s for commercial purposes, other than using the	Statements ma e name and a	ay not be sold or used by any penderess of any political committee	erson fo	or the	purp ntrib	pose outions	of s s fro	oliciting	j coi h co	ntribut	ions ee.
$\overline{)}$	NAME OF COMMITTEE (In Full)											
$\Big\rangle$	UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)									
Α.	Full Name (Last, First, Middle Initial) WILLIAM MUNSELL			C	Date of	Re	eceipt					
	Mailing Address 2119 WINDSONG CIRCLE				м м 11	/	D 3	D 30	/ Y		у 013	Y
	City	State	Zip Code		Trans	acti	ion IC) : P	R11598	8166	63176	3
	WAYZATA	MN	55391-2259	A	mount	of	Each	Re	ceipt th	is P	Period	
	FEC ID number of contributing federal political committee.	С				_	7		7	_	200	00
	Name of Employer	Occupation	1									
	United HealthCare Services Inc	EVP United	HIth Group									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify)		2400.00	P/	R Ded	uctio	on (\$´	100.0	00 Bi-W	/eek	dy)	
в.	Full Name (Last, First, Middle Initial) JOHN PENSHORN				Date of	Re	eceipt					
	Mailing Address 120 BLACK OAKS LANE				™ M 1_1	/	3	D 30	/ Y	ү 20)13	Y
	City	State	Zip Code		Trans	acti	on ID):P	R11598	3169	31763	5
	WAYZATA	MN	55391-1363	A	mount	of	Each	Re	ceipt th	is P	Period	
	FEC ID number of contributing federal political committee.	С					,		7	_	384.	60
	Name of Employer United HealthCare Services Inc	Occupation SVP United										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/	R Dedi	uctic	on (\$1	192.3	30 Bi-W	/eek	ly)	
с.	Full Name (Last, First, Middle Initial) PAUL KALLMEYER				Date of	Re	ceipt					
	Mailing Address 468 HERALD DR				м м 11	/		D 30	/ Y)13	Y
	City	State PA	Zip Code						R1159			3
	AMBLER	FA	19002-1530	A	mount	of	Each	Re	ceipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	С				_	7		7	_	100	00
	Name of Employer	Occupation	l									
	United HealthCare Services Inc	Deputy Ger	n Counsel Mgr									
	Receipt For:	Aggregate	Year-to-Date V									
	Other (specify)		1200.00	P/	'R Ded	uctio	on (\$	50.0	0 Bi-We	ekly	y)	
s	UBTOTAL of Receipts This Page (optional)		•				,				684.	60
Т	OTAL This Period (last page this line number	only)					,		,			

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IT.	EMIZED RECEIPTS		Use separate schedule(s)	(che	(check only one)								
11			for each category of the Detailed Summary Page		11a 13		11b 14	11c	12	Г	17		
	y information copied from such Reports and S for commercial purposes, other than using the				for the		oose of	soliciting	g contr	ibutio	ns		
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)										
Α.	Full Name (Last, First, Middle Initial)				Date of	f Re	ceipt						
	Mailing Address 4913 BRUCE AVE				M M	/	30) / Y	2013		1		
	City EDINA	State MN	Zip Code 55424-1113					PR1159 Receipt th					
	FEC ID number of contributing federal political committee.	С					7		1	194.0	0		
	Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼	-	nt Gen Counsel Year-to-Date ▼ 2328.00	P	/R Ded	uctio	on (\$97	.00 Bi-W	eekly)				
в.	Full Name (Last, First, Middle Initial) THOMAS QUIRK				Date of	f Re	ceipt						
	Mailing Address 4307 BEECHWOOD LANE	State	Zip Code		11 Trans		30		2013 819131	3			
	DALLAS	ТΧ	75220-1909				-	Receipt th					
	FEC ID number of contributing federal political committee.	С					,			00.00	0		
	Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify)	Occupation Hith Plan Cl Aggregate		P,	/R Ded	uctio	on (\$50.	.00 Bi-We	eekly)				
C.	Full Name (Last, First, Middle Initial) DAVID FALK				Date of	f Re	ceipt						
	Mailing Address 323 LAWRENCE AVE				^M ^M 11	/	30		2013		1		
	City HIGHLAND PARK	State NJ	Zip Code 08904-1851					PR1159 Receipt th					
	FEC ID number of contributing federal political committee.	С					7			28.0	0		
	Name of Employer United HealthCare Services Inc Receipt For: Primary General	Occupation Med Dir Aggregate	Year-to-Date ▼ 336.00		2/R Ded	luctio	on (\$14	.00 Bi-W	eekly)				
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number		<u>, , , , , , , , , , , , , , , , , , , </u>				y		3	22.00)		

SCHEDULE A (FEC Form 3X) DEAEI

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
Any information conied from such Rend	orts and Statements m		13 14 15 16 1 version for the purpose of soliciting contributions								
			e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)											
> UnitedHealth Group Inco	rporated PAC (United for Health)									
Full Name (Last, First, Middle Initial)											
A. WILLIAM TRACY Mailing Address 13016 CANTERBUI			Date of Receipt								
Maining Address 15010 CANTERBOI	XI.		11 30 _ 2013 _								
City	State	Zip Code	Transaction ID : PR1159821531763								
LEAWOOD	KS	66209-1768	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		115.40								
Name of Employer	Occupation	1									
United HealthCare Services Inc	Hith Plan C	EO									
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General Other (specify) ▼		1384.80	P/R Deduction (\$57.70 Bi-Weekly)								
		1 1	4								
Full Name (Last, First, Middle Initial) B. RICHARD MIGLIORI			Date of Receipt								
Mailing Address PO BOX 72			11 30 _2013 _								
City	State	Zip Code	Transaction ID : PR1159827431763								
WAYZATA	MN	55391-0072	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		200.00								
Name of Employer	Occupatior	1									
United HealthCare Services Inc	EVP Consu	Imr HIth Med Care									
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify) V		2400.00	P/R Deduction (\$100.00 Bi-Weekly)								
Full Name (Last, First, Middle Initial) C. BARBARA BUENEMANN			Date of Receipt								
Mailing Address 128 ROSEBROOK	DR		11 30 _2013 _								
City	State	Zip Code	Transaction ID : PR1159828731763								
FLORISSANT	MO	63031-8633	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		23.08								
Name of Employer	Occupatior	1									
United HealthCare Services Inc	Dir Cust Se	ervice									
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify)		276.96	P/R Deduction (\$11.54 Bi-Weekly)								
SUBTOTAL of Receipts This Page (or	otional)		338.48								
	,										
TOTAL This Period (last page this line	e number only)		• <u> </u>								

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

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
Any information copied from such Reports and		ay not be sold or used by any p									
or for commercial purposes, other than using t	ne name and a	address of any political committee	e to solicit contributions from such committee).							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (United for Health)									
Full Name (Last, First, Middle Initial) A. JEANNINE RIVET			Date of Receipt								
Mailing Address 4305 TRILLIUM WAY			11 30 2013	1							
City	State	Zip Code	Transaction ID : PR1159830031763								
MINNETRISTA	MN	55364-7708	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.6	0							
Name of Employer	Occupation	1									
United HealthCare Services Inc	EVP United	dHlth Grp									
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General Other (specify)		4615.20	P/R Deduction (\$192.30 Bi-Weekly)								
		1013.20	1								
Full Name (Last, First, Middle Initial) B. JOHN STEVENSON			Date of Receipt								
Mailing Address 5 BARBERRY DRIVE			11 30 / Y Y Y Y Y]							
City	State	Zip Code	Transaction ID : PR1159839331763								
BURLINGTON	СТ	06013-1529	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		19.6	0							
Name of Employer	Occupatior	1									
United HealthCare Services Inc	Sr Assc Ge	n Counsel									
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify)		, 235.20	P/R Deduction (\$9.80 Bi-Weekly)								
Full Name (Last, First, Middle Initial) C. Mr. ANTHONY WELTERS			Date of Receipt								
Mailing Address 919 SAIGON ROAD			11 30 / Y Y Y Y Y]							
City	State	Zip Code	Transaction ID : PR1332013231763								
MCLEAN	VA	22102-2116	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.6	0							
Name of Employer	Occupation	1									
United HealthCare Services Inc	EVP United	dHlth Group									
	Aggregate	Year-to-Date ▼									
Other (specify)		4422.90	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional).			788.80	2							
TOTAL This Period (last page this line number	er only)	······									

SCHEDULE A (FEC Form 3X)

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		for each category of the Detailed Summary Page	X 11a	11b 11	c 12	
or for commercial purposes, other than using	d Statements ma the name and a	l ay not be sold or used by any p ddress of any political committe	erson for the p e to solicit cont	14 15 urpose of solic ributions from	iting contribut	tions ee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora						
Full Name (Last, First, Middle Initial) A. ROBERT BOHNENKAMP			Date of	Receipt		
Mailing Address 4925 WOODS COURT			M M	/ D D / 30	2013	Y
City GREENWOOD	State MN	Zip Code 55331-9291	Transa	ction ID : PR1	55100563176	3
FEC ID number of contributing federal political committee.	С			7	78	.00
Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼	Occupation Bus Segme Aggregate		P/R Dedu	ction (\$39.00 B	i-Weekly)	
Full Name (Last, First, Middle Initial) MICHAEL BRESOLIN Mailing Address 121 W VIEW STREET			Date of	Receipt	Y Y Y	Y
City	State	Zip Code	11 Transa	30 ction ID : PR1	2013 55100573176	3
LOMBARD	IL	60148-1659	Amount	of Each Receip	ot this Period	
FEC ID number of contributing federal political committee.	С			7	40.	.00
Name of Employer United HealthCare Services Inc	Occupation					
Receipt For:	Dir Care Ad					
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 480.00	P/R Dedu	ction (\$20.00 Bi	-Weekly)	
Full Name (Last, First, Middle Initial) C. CHRISTOPHER HOCK			Date of	Receipt		
Mailing Address 215 WINDMILL HILL			M M 11	/ D D / 30	2013	Y
City WETHERSFIELD	State CT	Zip Code 06109-2746		ction ID : PR1		3
FEC ID number of contributing federal political committee.	С				23	.08
Name of Employer	Occupation	l				
United HealthCare Services Inc	Dir Gen Mg	ımt				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 276.96	P/R Dedu	ction (\$11.54 B	i-Weekly)	
SUBTOTAL of Receipts This Page (optional)					141.	08

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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		Detailed Summary Page		11a 13		11b		11c 15	12	17
Any information copied from such Report or for commercial purposes, other than u				or the		pose		oliciting	contribu	tions
NAME OF COMMITTEE (In Full)	porated PAC (I	United for Health)								
Full Name (Last, First, Middle Initial) A. MICHAEL MATTEO				Date of	Re	eceipt	t			
Mailing Address 25 JEREMIAHS WAY				м м 11	/		30	/ Y	ууу 2013	Y
City	State	Zip Code		Trans	acti	ion I	D : P	R15511	13343176	3
SOUTH GLASTONBURY	СТ	06073-3621	A	Amount	of	Each	n Ree	ceipt th	is Period	
FEC ID number of contributing federal political committee.	C					7		7	536	6.46
Name of Employer	Occupation	1								
United HealthCare Services Inc	Chief Grow	th Off								
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General Other (specify) ▼		2453.52	P/	'R Dedi	uctio	on (\$	268.2	23 Bi-W	/eekly)	
Full Name (Last, First, Middle Initial) B. ERIKA A ROGERS				Date of	Re	eceipt	t			
Mailing Address 2449 GUYNN AVENU	E			M M	/		30	/ Y	ү ү 2013	Y
City	State	Zip Code		Transa	acti	ion II	D : P	R15511	6073176	3
CHICO	CA	95926-2012	/	Amount	of	Each	n Red	ceipt th	is Period	
FEC ID number of contributing federal political committee.	C					7		7	20	.00
Name of Employer United HealthCare Services Inc	Occupation Sr Acct Mg									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P/	R Dedu	uctic	on (\$	10.00) Bi-We	ekly)	
Full Name (Last, First, Middle Initial) C. THOMAS VALERIUS				Date of	Re	eceipt	t			
Mailing Address 2820 DEER RUN TRA	AIL			м м 11	/		30	/ Y	2013	Y
City LONG LAKE	State MN	Zip Code 55356-9690							1613317(is Period	
FEC ID number of contributing federal political committee.	C					7		,	15:	3.84
Name of Employer	Occupation	1	_							
United HealthCare Services Inc	VP Recruit	ing								
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General Other (specify) ▼		1846.08] P/	/R Ded	uctio	on (\$	576.9	2 Bi-We	ekly)	
SUBTOTAL of Receipts This Page (optic	onal)								710	.30
TOTAL This Period (last page this line r	number only)					,		7		

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			Detailed Summary Page		11a		11b	11c		12	<u> </u>
Δn	y information copied from such Reports and S	Statemente m	av not be sold or used by any n	erson f	13 or the	DU1	14	15 soliciting		16 htributi	000S
	for commercial purposes, other than using the										
\setminus	NAME OF COMMITTEE (In Full)										
\sum	UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)								
Α.	Full Name (Last, First, Middle Initial) LOIS WEIHRAUCH				Date of	f Re	eceipt				
	Mailing Address 10392 SHERMAN DRIVE				M M	/	D D 30	/ Y) 13	Y
	City	State	Zip Code		Trans	act	ion ID : F	PR1551	1614	31763	5
	EDEN PRAIRIE	MN	55347-4452	A	mount	t of	Each Re	ceipt th	iis Pe	eriod	
	FEC ID number of contributing federal political committee.	С					,	7		120.	00
	Name of Employer	Occupation									
	United HealthCare Services Inc	VP Gen Mg	mt								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		1440.00	P/	'R Ded	ucti	on (\$60.0	0 Bi-We	ekly)	')	
в.	Full Name (Last, First, Middle Initial) JOHN ENDERLE				Date of	f Re	eceipt				
	Mailing Address 31 ANDREIS TRAIL				M M 11	/	30	/ Y	201	ү 13	Y
	City	State	Zip Code		Trans	acti	on ID : P	R15543	32353	31763	
	SOUTH WINDSOR	СТ	06074-2142	A	mount	t of	Each Re	eceipt th	iis Pe	eriod	
	FEC ID number of contributing federal political committee.	С					,	9	_	110.	00
	Name of Employer	Occupation									
	United HealthCare Services Inc	Regn Exec	Dir								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1320.00	P/	R Ded	uctio	on (\$55.0	0 Bi-We	ekly))	
с.	Full Name (Last, First, Middle Initial) CHRISTINE HARRIS				Date of	f Re	eceipt				
	Mailing Address 25 JUSTIN LANE				м м 11	/	D D 30	/ Y	20 ⁻	ү 13	Y
	City	State	Zip Code		Trans	act	ion ID : F	PR1554	3236	31763	3
	WETHERSFIELD	СТ	06109-2542	A	mount	t of	Each Re	ceipt th	is Pe	eriod	
	FEC ID number of contributing federal political committee.	С						3		20.	00
	Name of Employer	Occupation									
	United HealthCare Services Inc	Dir Clms									
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify)		240.00	P/	R Ded	lucti	on (\$10.0	00 Bi-We	ekly	')	
			/5								
s	UBTOTAL of Receipts This Page (optional)						7	7		250.0	00
Т	OTAL This Period (last page this line number	only)						,			

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
			, ,	13 14 15 16
or	for commercial purposes, other than using the	Statements ma e name and a	ay not be sold or used by any p ddress of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)	
<u>م</u>	Full Name (Last, First, Middle Initial) CATHERINE SPILLANE			Date of Receipt
	Mailing Address 3807 PLEASANT VALLEY DI	RIVE		1.1 30 _ 2013 _
	City	State	Zip Code	Transaction ID : PR1554324631763
	MISSOURI CITY	ТХ	77459-4111	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		38.46
	Name of Employer	Occupation		_
	United HealthCare Services Inc	Dir Bus Pro	cess	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		461.52	P/R Deduction (\$19.23 Bi-Weekly)
	Full Name (Last, First, Middle Initial) KAREN ERICKSON			Date of Receipt
	Mailing Address 15348 RED OAKS ROAD SE			11 30 2013
	City	State	Zip Code	Transaction ID : PR1575957631763
	PRIOR LAKE	MN	55372-1834	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		384.60
	Name of Employer United HealthCare Services Inc	Occupation Optum Exec		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)
	Full Name (Last, First, Middle Initial) ERNEST MONFILETTO			Date of Receipt
	Mailing Address 3062 COMFORT ROAD			M M / D D / Y Y Y Y Y 11 30 2013
	City	State	Zip Code	Transaction ID : PR1575958131763
	NEW HOPE	PA	18938-5622	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		153.84
	Name of Employer	Occupation		—
	United HealthCare Services Inc	VP Ntwk Pr	gms	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		1846.08	P/R Deduction (\$76.92 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)			576.90

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
Any information copied from such Reports ar or for commercial purposes, other than using				butions							
NAME OF COMMITTEE (In Full)		duress of any political committee		intee.							
UnitedHealth Group Incorpor	ated PAC (I	United for Health)									
Full Name (Last, First, Middle Initial) A. LEE VALENTA			Date of Receipt								
Mailing Address 4701 GOLF TERRACE			11 30 2013								
City EDINA	State MN	Zip Code 55424-1514	Transaction ID : PR1575958531 Amount of Each Receipt this Peri	763							
FEC ID number of contributing federal political committee.	С			84.60							
Name of Employer United HealthCare Services Inc Receipt For:	Occupation Pres Lif Sci										
Primary General Other (specify) ▼		4615.20	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name (Last, First, Middle Initial) B. THOMAS PAUL			Date of Receipt								
Mailing Address 2006 QUEEN AVENUE S			11 30 / Y Y Y Y								
City MINNEAPOLIS	State MN	Zip Code 55405-2350	Transaction ID : PR1580864731 Amount of Each Receipt this Peri								
FEC ID number of contributing federal political committee.	С			00.00							
Name of Employer United HealthCare Services Inc	Occupation UHC Chief		_								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2400.00	P/R Deduction (\$100.00 Bi-Weekly)								
Full Name (Last, First, Middle Initial) C. ROBERT WEBB			Date of Receipt								
Mailing Address 4516 DREXEL AVENUE			11 30 _2013								
City EDINA	State MN	Zip Code 55424-1130	Transaction ID : PR1580865331								
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Peri-	od 84.60							
Name of Employer	Occupation	1	_								
United HealthCare Services Inc	SVP United	HIth Grp									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)		91	69.20							
TOTAL This Period (last page this line num	ber only)										

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			Detailed Summary Page		11a		11b		11c		12	
					13		14		15		16	17
or	y information copied from such Reports and S for commercial purposes, other than using the											
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	Jnited for Health)									
Α.	Full Name (Last, First, Middle Initial) RICHARD HUGHES				Date of	Re	eceipt					
	Mailing Address 735 SAINT MORITZ				M M	/	D 3(/ Y		013	Y
	City VICTORIA	State MN	Zip Code 55386-3706						R15963 ceipt th			3
	FEC ID number of contributing federal political committee.	С					7			_	200.	00
	Name of Employer United HealthCare Services Inc	Occupation SVP Huma	n Capital Dev									
	Receipt For: Primary General Other (specify) v	Aggregate	Year-to-Date ▼ 2400.00	P	/R Ded	uctio	on (\$1	00.(00 Bi-W	/eek	dy)	
	Full Name (Last, First, Middle Initial) THAD JOHNSON				Date of	Re	eceipt					
	Mailing Address 16848 STIRRUP LN				M M	/	3		/ Y	20	у 013	Y
	City EDEN PRAIRIE	State MN	Zip Code 55347-3339						R15963 ceipt th			3
	FEC ID number of contributing federal political committee.	С					7		7	_	200.	00
	Name of Employer United HealthCare Services Inc	Occupation Mkt Group	Gen Counsel									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2400.00	P	/R Dedu	uctio	on (\$10	<u></u> 0.00	00 Bi-W	/eek	:ly)	
	Full Name (Last, First, Middle Initial)				Date of	Re	eceipt					
	Mailing Address 1 EDEN HILL LANE				M M	1	3		/ Y) 13	Y
	City SOUTHWICK	State MA	Zip Code 01077						R1596: ceipt th			3
	FEC ID number of contributing federal political committee.	С					7		,	_	20	.00
	Name of Employer	Occupation	l	_								
	United HealthCare Services Inc	Natl Acct R	VP SIs									
	Receipt For: Primary General Other (specify) v	Aggregate	Year-to-Date ▼ 240.00	P	/R Ded	ucti	on (\$1	0.0	0 Bi-We	ekl	y)	
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number			• •			7		7	-	420.	00

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

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11b	11c	12			
Any information copied from such Reports and or for commercial purposes, other than using										
						III SUCI	Commu			
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	Jnited for Health)								
Full Name (Last, First, Middle Initial) A. JAY MATUSHAK			Date	of Re	ceipt					
Mailing Address 9346 SHETLAND ROAD			11		D D 30	/ Y	2013	Y		
City EDEN PRAIRIE	State MN	Zip Code 55347-3749			i on ID : P Each Ree		30463176: is Period	3		
FEC ID number of contributing federal political committee.	С				7	7	78.	.00		
Name of Employer United HealthCare Services Inc	Occupation VP Finance									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 936.00	P/R De	ductio	on (\$39.0	0 Bi-We	ekly)			
Full Name (Last, First, Middle Initial) B. CAROL MORNESS			Date	of Re	ceipt					
Mailing Address 6844 FLEUR DE LANE	01-1-	7. 0.4	11		D D D 30	/ Y	2013	Y		
City STONE LAKE	State WI	Zip Code			-		04931763	3		
	VVI	54876	Amou	nt of	Each Re	ceipt th	is Period			
FEC ID number of contributing federal political committee.	С				· · ·	7	76.	92		
Name of Employer United HealthCare Services Inc	Occupation Dir Underw									
Receipt For:	Aggregate	Year-to-Date V								
Primary General Other (specify) ▼		923.04	P/R De	ductio	on (\$38.46	6 Bi-We	ekly)			
Full Name (Last, First, Middle Initial) C. DANIEL SCHUMACHER	•		Date	of Re	ceipt					
Mailing Address 11582 RASPBERRY HILL	ROAD		M 11		30	/ Y	2013	Y		
City EDEN PRAIRIE	State MN	Zip Code 55344-3268			i on ID : P Each Ree		30543176 is Period	3		
FEC ID number of contributing federal political committee.	С				7	7	676	.66		
Name of Employer	Occupation									
United HealthCare Services Inc	Mkt Group	CFO	_							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4323.31	P/R De	ductio	on (\$338.	33 Bi-W	/eekly)			
SUBTOTAL of Receipts This Page (optional).							831.	58		
TOTAL This Period (last page this line numb						7				

Use separate schedule(s)

FOR LINE NUMBER:

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TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (L	Jnited for Health)	
Full Name (Last, First, Middle Initial) SCOTT THEISEN			Date of Receipt
Mailing Address 1950 MEADOWWOODS T			M = M / D = D / Y = Y = Y Y 11 30 2013
	State MN	Zip Code	Transaction ID : PR1596305631763
LONG LAKE FEC ID number of contributing federal political committee.	С	55356-9312	Amount of Each Receipt this Period 38.46
Name of Employer	Occupation		
United HealthCare Services Inc	Bus Segme	nt CFO	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.52	P/R Deduction (\$19.23 Bi-Weekly)
Full Name (Last, First, Middle Initial) 3. THOMAS LEWIS			Date of Receipt
Mailing Address 306 CHIPPEWA AVENUE			11 30 2013
City	State	Zip Code	Transaction ID : PR1596306931763
ТАМРА	FL	33606-3614	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		76.92
Name of Employer United HealthCare Services Inc	Occupation HIth Plan CE	EO	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)
Full Name (Last, First, Middle Initial) C. ROBERT OBERRENDER	1		Date of Receipt
Mailing Address 4505 MOORLAND AVENU	E		11 30 / Y Y Y Y Y
City EDINA	State MN	Zip Code 55424-1158	Transaction ID : PR1596307031763
	IVIIN	JJ424-11JO	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		220.00
Name of Employer	Occupation		
United HealthCare Services Inc Receipt For:	SVP Treasu		_
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2640.00	P/R Deduction (\$110.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional).			335.38

Use separate schedule(s)

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PAGE 24 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page		11a 13		11		11c	12	17
An or	y information copied from such Reports and S for commercial purposes, other than using the	Statements ma e name and a	ay not be sold or used by any p ddress of any political committee	erson t e to so	for the	pur ntrib	pos	se of s	soliciting	g contribu	itions
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)								
Α.	Full Name (Last, First, Middle Initial) MICHAEL ANDERSON				Date o	f Re	ecei	ipt			
	Mailing Address 17907 INVERNESS CURVE				M M	1		30	/ Y	ү ү 2013	Y
	City EDEN PRAIRIE	State MN	Zip Code 55347-2155							30933176	
	FEC ID number of contributing federal political committee.	С	33347-2133		Amoun	t of	Ea	ch Re	ceipt th	nis Period 28	3.00
	Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼	Occupation Dir Med Clin Aggregate		 P	/R Dec	luctio	ion ((\$14.0	0 Bi-We	ekly)	
в.	Full Name (Last, First, Middle Initial) DIANE FLYNN Mailing Address 3318 FOXRIDGE CIRCLE			_	Date o	_		ipt	/ Y	YY	Ŷ
	City TAMPA	State FL	Zip Code 33618-2149							2013 30973176 nis Period	
	FEC ID number of contributing federal political committee.	С					7		,	78	8.00
	Name of Employer United HealthCare Services Inc	Occupation Regn Exec									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 936.00	P	/R Ded	uctio	on ((\$39.0	0 Bi-We	∍ekly)	
с.	Full Name (Last, First, Middle Initial) JEFFREY DOOLEY				Date o	f Re	ecei	ipt			
	Mailing Address 1142 GREENBROOK DRIVE				M M	/	ľ	30	/ Y	2013	Y
	City DANVILLE	State CA	Zip Code 94526-4306							31213176	
	FEC ID number of contributing federal political committee.	C			Amoun	t of	Ea	ch Re	ceipt tr	nis Period 23	3.08
	Name of Employer	_	-								
	United HealthCare Services Inc	KA VP SIs	Acct Mgmt								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 276.96		P/R Dec	lucti	ion	(\$11.5	i4 Bi-W	eekly)	
s	UBTOTAL of Receipts This Page (optional)						3		-1	129	.08
Т	OTAL This Period (last page this line number	only)		•							

SCHEDULE A (FEC Form 3X)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11b	11c	12							
Any information conied from such Descrit	and Statements -		13		14	15	16	17						
Any information copied from such Report or for commercial purposes, other than u														
NAME OF COMMITTEE (In Full)														
> UnitedHealth Group Incorr	borated PAC (United for Health)												
Full Name (Last, First, Middle Initial)														
A. RICHARD DUNLOP Mailing Address 2964 WYSE COURT			Date			_								
Maining Address 2964 WYSE COURT			11	M /	30) / Ү	2013	Y						
City	State	Zip Code	Tran	sact	ion ID :	PR1596	31233176	3						
LEWIS CENTER	OH	43035-8253	Amou	nt of	Each F	leceipt th	is Period							
FEC ID number of contributing federal political committee.	С				7		20	.00						
Name of Employer	Occupation	1												
United HealthCare Services Inc	VP Gen Mg	gmt												
Receipt For:	Aggregate	Year-to-Date ▼		duct'	00 /040		okh (
Other (specify)		240.00	P/R De	aucu	011 (\$10	.00 Bi-We	екіу)							
		7 7	-											
Full Name (Last, First, Middle Initial) B. STEVAN GARCIA			Date	of Re	eceipt									
Mailing Address 28115 BOULDER BRI	DGE DRIVE) / Y	Y Y	Y						
			11		30		2013							
City EXCELSIOR	State Zip Co ELSIOR MN 55331				Transaction ID : PR1596312931763 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С				Lacit		38.	46						
Name of Employer	Occupation	1	_		,	,								
United HealthCare Services Inc	SVP Ops	-												
Receipt For:	Aggregate	Year-to-Date ▼												
Primary General Other (specify) ▼		, 461.52	P/R De	ducti	on (\$19.	23 Bi-We	ekly)							
Full Name (Last, First, Middle Initial) C. KURT HEUMANN			Date	of Re	eceipt									
Mailing Address 9825 GERALD DR			11	M /	30		2013	Y						
City	State MO	Zip Code	Tran	isact	ion ID :	PR1596	31373176	3						
SAINT LOUIS	MO	63128-1767	Amou	nt of	Each F	leceipt th	is Period							
FEC ID number of contributing federal political committee.	С				7		40	.00						
Name of Employer	Occupatior	1												
United HealthCare Services Inc Receipt For:	VP Finance	-												
Primary General	Aggregate	Year-to-Date ▼	P/R De	ducti	ion (\$20	.00 Bi-We	eeklv)							
Other (specify)		480.00			φ20		ooniy)							
SUBTOTAL of Receipts This Page (opti	,	,		-	7		98.	46						
TOTAL This Period (last page this line r	number only)	······			7									

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ITEMIZED RECEIPTS	Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
or for commercial purposes, other than using th	Statements may not be sold or used by a e name and address of any political comm	ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (United for Health)	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 4304 SOUTH 167 AVENUE		11 30 / Y Y Y Y 2013
City OMAHA	State Zip Code NE 68135-1353	Transaction ID : PR1596315431763
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer United HealthCare Services Inc	Occupation Exec Dir	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	P/R Deduction (\$125.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) B. JOHN RENNICK		Date of Receipt
Mailing Address 3220 LAKEWOOD EDGE DF		11 30 Y Y Y Y Y
City CHARLOTTE	StateZip CodeNC28269-7705	Transaction ID : PR1596316831763 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.46
Name of Employer United HealthCare Services Inc	Occupation Med Dir	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 461.52	2 P/R Deduction (\$19.23 Bi-Weekly)
Full Name (Last, First, Middle Initial) C. DANIEL ROSENTHAL		Date of Receipt
Mailing Address 109 SLEEPY HOLLOW LAN		11 30 / Y Y Y Y Y 11 30 2013
City ORINDA	StateZip CodeCA94563-1340	Transaction ID : PR1596317331763 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	838.46
Name of Employer	Occupation	
United HealthCare Services Inc	Regn CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1661.52	P/R Deduction (\$419.23 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)		1126.92
TOTAL This Period (last page this line number	r only)	

SCHEDULE A (FEC Form 3X) DEAEI

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c } \hline X & 11a & 11b & 11c & 12 \\ \hline 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$									
Any information copied from such Reports or for commercial purposes, other than usi	and Statements mang the name and a	I ay not be sold or used by any p address of any political committed	erson for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	prated PAC (United for Health)										
Full Name (Last, First, Middle Initial) A. KEVIN RUTH			Date of Receipt									
Mailing Address 16621 ALEXANDER M	ANOR DRIVE		M M / D D / Y Y Y Y Y 11 30 2013									
City SILVER SPRING	State MD	Zip Code 20905-5028	Transaction ID : PR1596317431763 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		333.34									
Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify)		Advancement Year-to-Date ▼ 2166.68	P/R Deduction (\$166.67 Bi-Weekly)									
Full Name (Last, First, Middle Initial) B. DAVID STURKEY			Date of Receipt									
Mailing Address 1625 CONE FLOWER	VAY State	Zin Code	11 30 2013 Transaction ID - PP1506318431763									
City SUWANEE	GA	Zip Code 30024-8576	Transaction ID : PR1596318431763 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		78.00									
Name of Employer United HealthCare Services Inc	Occupation SB KA VP	ו SIs Acct Mgt	-									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 936.00	P/R Deduction (\$39.00 Bi-Weekly)									
Full Name (Last, First, Middle Initial) C. ROXANNE THOMAS			Date of Receipt									
Mailing Address 720 COUNTRY LAKES	DR		11 30 2013									
City CIRCLE PINES	State MN	Zip Code 55014-5488	Transaction ID : PR1596318931763 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		23.08									
Name of Employer	Occupatior	1	-									
United HealthCare Services Inc Receipt For: Primary General Other (specify)	Dir Prod Aggregate	Year-to-Date ▼ 276.96	P/R Deduction (\$11.54 Bi-Weekly)									
SUBTOTAL of Receipts This Page (option	nal)		434.42									
TOTAL This Period (last page this line nu	mber only)											

SCHEDULE A (FEC Form 3X)

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ITEMIZED RECEIPTS	for each category of Detailed Summary Pa	Page X 11a 11b 11c 12
Any information copied from such Repo	rts and Statements may not be sold or used b	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	using the name and address of any political e	
	rporated PAC (United for Health))
Full Name (Last, First, Middle Initial) A. JEFFREY TODD		Date of Receipt
Mailing Address 467 PRAIRIE WAY	SOUTH	M M / D D / Y Y Y Y Y 11 30 2013
City BAYPORT	StateZip CodeMN55003-1607	Transaction ID : PR1596319031763 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify)	Occupation VP Underwriting Aggregate Year-to-Date ▼ 60	P/R Deduction (\$25.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) B. CHRIS TURNAU Mailing Address PO BOX 43216		Date of Receipt
3741 DUNBAR KNC	LL State Zip Code	11 30 2013 Transaction ID : PR1596319131763
BROOKLYN PARK	MN 55443-0216	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	20.00
Name of Employer United HealthCare Services Inc	Occupation Dir Tax	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 24	P/R Deduction (\$10.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) C. FRANK VIERLING		Date of Receipt
Mailing Address N5021 GREENS CO	DULEE	M = M / D = D / Y = Y = Y = Y Y 11 30 2013
City ONALASKA	State Zip Code WI 54650	Transaction ID : PR1596319431763
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	
United HealthCare Services Inc	Dir Gen Mgmt	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 24	P/R Deduction (\$10.00 Bi-Weekly)
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SCHEDULE A (FEC Form 3X)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12									
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may the name and a	A not be sold or used by any p address of any political committee	13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorpor	rated PAC (United for Health)										
Full Name (Last, First, Middle Initial) A. MLAURIE WASSERSTEIN			Date of Receipt									
Mailing Address 92 GOODWIN CIRCLE			M = M / D = D / Y = Y = Y = Y									
City	State	Zip Code	11302013 Transaction ID : PR1596319531763									
HARTFORD	СТ	06105-5205	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		38.46									
Name of Employer	Occupation	1										
United HealthCare Services Inc	PS NA VP	CInt Mgmt										
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify) ▼		461.52	P/R Deduction (\$19.23 Bi-Weekly)									
Full Name (Last, First, Middle Initial) B. MYRON WERLEY			Date of Receipt									
Mailing Address 4260 FOXBERRY COUR	Т		11 30 2013									
City MEDINA	State MN	Zip Code	Transaction ID : PR1596319631763									
		55340-9390	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		40.00									
Name of Employer United HealthCare Services Inc	Occupation											
Receipt For:	Dir Underw	0	P/R Deduction (\$20.00 Bi-Weekly)									
Primary General	Aggregate	Year-to-Date ▼										
Other (specify) V		480.00										
Full Name (Last, First, Middle Initial) C. WILLIAM WILSON			Date of Receipt									
Mailing Address 7 CLIFFORD AVENUE			M M / D D / Y Y Y Y 11 30 2013									
City TOLLAND	State CT	Zip Code 06084-2535	Transaction ID : PR1596320031763									
	01	00004-2335	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		20.00									
Name of Employer	Occupatior											
United HealthCare Services Inc Receipt For:	Dir Underw	0										
Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$10.00 Bi-Weekly)									
Other (specify)		240.00										
SUBTOTAL of Receipts This Page (optiona	l)		98.46									
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	-	Use separate schedule(s)	(check only one)								
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
			13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)	ig the name and a										
UnitedHealth Group Incorpo	orated PAC (L	Jnited for Health)									
Full Name (Last, First, Middle Initial)			Date of Receipt								
Mailing Address 7310 WELLS RD			M M / D D / Y Y Y Y Y 11 30 2013								
City PLAIN CITY	State OH	Zip Code 43064-9337	Transaction ID : PR1596320131763 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		20.00								
Name of Employer United HealthCare Services Inc	Occupation Mgr IT										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P/R Deduction (\$10.00 Bi-Weekly)								
Full Name (Last, First, Middle Initial) 3. JOHN DODDY	·		Date of Receipt								
Mailing Address 1 ROXITICUS VIEW			11 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y								
City CHESTER	State NJ	Zip Code 07930-3020	Transaction ID : PR1600597331763 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		78.00								
Name of Employer United HealthCare Services Inc	Occupation VP Info Tec	h									
Receipt For: Primary General Other (specify) ▼	ceipt For: Primary General Aggregate Year-to-Date ▼										
Full Name (Last, First, Middle Initial)			Date of Receipt								
Mailing Address 742 GOODRICH AVE			11 30 2013								
City SAINT PAUL	State MN	Zip Code 55105-3343	Transaction ID : PR1600598531763 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		200.00								
Name of Employer United HealthCare Services Inc	Occupation VP GM PCI	M									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2400.00	P/R Deduction (\$100.00 Bi-Weekly)								

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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Any information copied from such Reports and Statements may not be sold or used by any person for the purposes, other than using the name and address of any political committee to solicit contributions of commercial purposes, other than using the name and address of any political committee to solicit contributions. NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC (United for Health) Full Name (Last, First, Middle Initial) Date of Rec A. LEWIS SANDY Mailing Address 4800 SUNNYSLOPE ROAD E Date of Rec City State Zip Code FEC. ID number of contributing federal political committee. Occupation Name of Employer United HealthCare Services Inc SVP Clin Advancement Pr/R Deduction Receipt For: General Qiregate Year-to-Date ▼ P/R Deduction Mailing Address 20595 SPENCER LANE MN 55331-4523 Date of Rec FEC. ID number of contributing federal political committee. Occupation Date of Rec 11 Transactic Aggregate Year-to-Date ▼ P/R Deduction 11 Transactic Aggregate Year-to-Date ▼ Qiccupation P/R Deduction 11 Transactic Aggregate Year-to-Date ▼ P/R Deduction P/R Deduction 11 Transactic </th <th>14 15</th> <th></th> <th></th>	14 15										
or for commercial purposes, other than using the name and address of any political committee to solicit contributions (Incorporated PAC (United for Health) NAME OF COMMITTEE (in Full) UnitedHealth Group Incorporated PAC (United for Health) Full Name (Last, First, Middle Initial) A. LEWIS SANDY Malling Address 4800 SUNNYSLOPE ROAD E City State EDINA MN S5424-1163 FEC ID number of contributing federal political committee. Name of Employer Unied HealthCare Services Inc SVP Clin Advancement Receipt For: Primary General Other (specify) ▼ State Zip Code KatthCare Services Inc Name of Employer Other (specify) ▼ Pull Name (Last, First, Middle Initial) B. MATTHEW PETERSON Mailing Address 2059 SPENCER LANE City State Pic CiD number of contributing federal political committee. Occupation Mailing Address 18076 CLEAR SPRING LANE City State Zip Code P/R Deductior Other (s	nose of solic		17 Itions								
UnitedHealth Group Incorporated PAC (United for Health) Full Name (Last, First, Middle Initial) A. LEWIS SANDY Mailing Address 4800 SUNNYSLOPE ROAD E City State EDINA Mailing Address 4800 SUNNYSLOPE ROAD E City State EDINA MN S5424-1163 FEC ID number of contributing federal political committee. Name of Employer Occupation United HealthCare Services Inc SVP Clin Advancement Receipt For: Aggregate Year-to-Date ▼ P/R Deduction Date of Rec Bull Name (Last, First, Middle Initial) Date of Rec B. MATTHEW PETERSON Date of Rec Mailing Address 20596 SPENCER LANE C City State Zip Code EXCELSIOR MN 55331-4523 Name of Employer Occupation Transactic Name of Employer Aggregate Year-to-Date ▼ P/R Deduction Transactic Transactic Transactic Aggregate Year-to-Date ▼ P/R Deduction P/R Deduction City General Occupation Date of Rec </td <td></td> <td></td> <td></td>											
Full Name (Last, First, Middle Initial) Date of Rec A. LEWIS SANDY Date of Rec Mailing Address 4800 SUNNYSLOPE ROAD E Transactic City State Zip Code EDINA MN 55424-1163 FEC ID number of contributing federal political committee. C Amount of E Name of Employer Occupation Aggregate Year-to-Date ▼ P/R Deduction Initial Address 20596 SPENCER LANE Aggregate Year-to-Date ▼ P/R Deduction B. MATTHEW PETERSON MN 55331-4523 Amount of E Mailing Address 20596 SPENCER LANE C Transactic Mnount of E City State Zip Code Transactic Amount of E C Mailing Address 20596 SPENCER LANE Date of Rec City State Zip Code Transactic Name of Employer Occupation Bus Segment CAO P/R Deduction Receipt For:											
A. LEWIS SANDY Date of Rec Mailing Address 4800 SUNNYSLOPE ROAD E Image: Constraint of Engloyer Image: Constraint of Engloyer City State Zip Code Image: Constraint of Engloyer Amount of Engloyer United HealthCare Services Inc SVP Clin Advancement P/R Deduction Primary General Other (specify) ▼ Image: Constraint of Engloyer City State Zip Code P/R Deduction Full Name (Last, First, Middle Initial) Mattrieve PETERSON Date of Rec Mailing Address 20595 SPENCER LANE City State Zip Code EXECLSIOR MN 55331-4523 Amount of E FEC ID number of contributing federal political committee. Occupation MN 55331-4523 Name of Employer Occupation Bus Segment CAO Aggregate Year-to-Date ▼ P/R Deduction Name of Employer Occupation Bus Segment CAO E Image: Constraint of Rec Image:											
City State Zip Code EDINA MN 55424-1163 FEC ID number of contributing C idearal political committee. C Name of Employer Occupation United HealthCare Services Inc SVP Clin Advancement Receipt For: Primary Primary General Other (specify) Question B. MATTHEW PETERSON Mailing Address 20595 SPENCER LANE Date of Receipt For: City State Zip Code EXCLSIOR MN 55331-4523 FEC ID number of contributing C Interaction Ideath Care Services Inc Bus Segment CAO Aggregate Year-to-Date ▼ P/R Deduction Occupation Bus Segment CAO P/R Deduction Receipt For: Occupation Bus Segment CAO P/R Deduction Receipt For: Other (specify) ▼ Question P/R Deduction C. JEFFREY MALONEY Date of Receipt For: P/R Deduction Mailing Address 18076 CLEAR SPRING LANE Transactic Interaction Mailing Address 18076 CLEAR SPRING LANE	ceipt										
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\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)										
	Full Name (Last, First, Middle Initial) WILLIAM KENNEDY			Date of Receipt									
	Mailing Address 14 MYRA LN			11 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y									
		State CT	Zip Code 06013-1327	Transaction ID : PR1653443131763									
	BURLINGTON FEC ID number of contributing rederal political committee.	C		Amount of Each Receipt this Period									
	Name of Employer Jnited HealthCare Services Inc	Occupation Dir IT											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 480.00	P/R Deduction (\$20.00 Bi-Weekly)									
	Full Name (Last, First, Middle Initial) STEVE KOOREN			Date of Receipt									
	Mailing Address 4444 ELLSWORTH DRIVE			11 30 2013									
	City EDINA	State MN	Zip Code 55435-4150	Transaction ID : PR1653443231763 Amount of Each Receipt this Period									
	EC ID number of contributing ederal political committee.	С		384.60									
	Name of Employer Jnited HealthCare Services Inc	Occupation Bus Segme											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)									
	Full Name (Last, First, Middle Initial) THOMAS BELLAMY			Date of Receipt									
	Mailing Address 2743 THOMAS AVENUE SO	UTH		M M / D D / Y Y Y Y 11 30 2013									
	City MINNEAPOLIS	State MN	Zip Code 55416-4346	Transaction ID : PR1653444331763 Amount of Each Receipt this Period									
	FEC ID number of contributing rederal political committee.	С		115.40									
	Name of Employer	mployer Occupation											
	United HealthCare Services Inc	SB RVP											
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1384.80	P/R Deduction (\$57.70 Bi-Weekly)									
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	y information copied from such Reports and S for commercial purposes, other than using the				or the		pose o		bliciting		ntributi	ons				
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	Jnited for Health)													
A.	Full Name (Last, First, Middle Initial) ROBERT HOLMAN				Date of	Re	ceipt									
	Mailing Address N12464 HORSESHOE BEND	RD		M m / D m / Y m												
	City MINONG	State WI	Zip Code 54859-8026				-					5				
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period												
	Name of Employer United HealthCare Services Inc	Occupation Dir Prov Re														
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в.	Full Name (Last, First, Middle Initial)				Date of Receipt											
	Mailing Address 645 OLD LONG LAKE ROAD				м м 11	/	D 30		/ Y	ү 20	ү 13	Y				
	City WAYZATA	State MN	Zip Code 55391-9684		Transaction ID : PR1653445231763 Amount of Each Receipt this Period											
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	Name of Employer United HealthCare Services Inc	Occupation Bus Segme														
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	Mailing Address 57 QUORN HUNT ROAD				м м 11	/	D 30		/ Y	y 20	ү 13	Y				
	City WEST SIMSBURY	State CT	Zip Code 06092-2524	A					R16534 eipt thi			3				
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	United HealthCare Services Inc Receipt For: Primary General Other (specify)	VP IT Aggregate	Year-to-Date ▼ 276.96		/R Ded	uctio	on (\$11	.54	4 Bi-We	ekly	/)					
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of sol or for commercial purposes, other than using the name and address of any political committee to solicit contributions from NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC (United for Health) Full Name (Last, First, Middle Initial) ELIZABETH CORBIN Mailing Address 7985 LEA CIRCLE Date of Receipt City State Zip Code BLOOMINGTON MN 55438-1286 FEC ID number of contributing federal political committee. Occupation Name of Employer Occupation United HealthCare Services Inc VP HIth Care Initiv Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 2100.00	
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A. ELIZABETH CORBIN Date of Receipt Mailing Address 7985 LEA CIRCLE Image: Clip Code Image: Clip Code City State Zip Code BLOOMINGTON MN 55438-1286 FEC ID number of contributing federal political committee. C Amount of Each Receipt Name of Employer Occupation VP Hith Care Initiv Receipt For: Aggregate Year-to-Date ▼ P/R Deduction (\$100.00 Other (specify) ▼ Aggregate Year-to-Date ▼ P/R Deduction (\$100.00 B. Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address 3412 KNOLLWOOD DRIVE Date of Receipt Image: Clip Code City State Zip Code Image: Clip Code Transaction ID : PR Transaction ID : PR Image: Clip Code	
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Name of Employer Occupation United HealthCare Services Inc Chief Med Off	
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 4615.20) Bi-Weekly)
Full Name (Last, First, Middle Initial) C. ANN DESTWOLINSKI Date of Receipt	
Mailing Address 4247 ROSE PETAL COURT 11 30	2013
CityStateZip CodeTransaction ID : PRELLICOTT CITYMD21043-4973Amount of Each Rece	
FEC ID number of contributing federal political committee.	22.00
Name of Employer Occupation	
United HealthCare Services Inc Dir Preservice Review	
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 264.00	Bi-Weekly)
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$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate													
A.	Full Name (Last, First, Middle Initial) JASON DUDASH				Date of	Re	ecei	ipt						
	Mailing Address 2918 BACHMAN RD				M M	/	Ľ	30	/ Y)13	Y		
	City	State	Zip Code						R1806			3		
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	United HealthCare Services Inc	Mgr IT												
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В.	Full Name (Last, First, Middle Initial)				Date of	Re	ecei	ipt						
	Mailing Address 11618 ROLLING MEADOW D	R			M M	/	_	30	/ Y	_ 20	ү 13	Y		
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	Mailing Address 2781 SADDLE CLUB ROAD				M M 11	1	Ľ	30	/ Y	ү 20	13	Y		
	City GREENWOOD	State IN	Zip Code 46143-9211		Trans Amount				PR1806			3		
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		Shiled for Health)									
Full Name (Last, First, Middle Initial)											
A. PAUL EMERSON			[Date of Receipt							
Mailing Address 18855 MEADOW VIEW BLVD				11 30 2013							
City State Zip Code											
PRIOR LAKE		MN 55372-3133			Transaction ID : PR1806750331763 Amount of Each Receipt this Period						
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B. SHERRI PINOTTI				Date of Receipt							
Mailing Address 416 BEAR AVE S				M M / D D / Y Y Y Y							
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Full Name (Last, First, Middle Initial)											
CATHERINE ANDERSON					f Re	eceipt					
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	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)										
۹.	Full Name (Last, First, Middle Initial) KATHLEEN BISHOP-HEROUX				Date of Receipt								
	Mailing Address 145 COTTAGE RD				11 30 2013								
	City	State CT	Zip Code		Transaction ID : PR1903560831763								
	ENFIELD	CI	06082-2208		_ Amount of Each Receipt this Period								
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	Primary General Other (specify) ▼		P/R Deduction (\$20.00 Bi-Weekly)										
	Full Name (Last, First, Middle Initial) ROBERT DUFEK	BERT DUFEK											
	Mailing Address 816 PROMONTORY PLACE				M M	/		30	/ Y	201:			
-	City	State	Zip Code		Trans	acti	ion I	D : P	R19035	7713 [,]	1763		
	EAGAN	MN	55123-2297		Amoun	t of	Eac	h Ree	ceipt th	is Per	iod		
	FEC ID number of contributing federal political committee.				,		7		50.0	0			
	Name of Employer United HealthCare Services Inc												
	Receipt For: Primary General Other (specify) ▼	Year-to-Date ▼ 600.00		P/R Ded	uctic	on (\$	25.00) Bi-We	ekly)				
	Full Name (Last, First, Middle Initial) SUSAN EDBERG				Date of Receipt								
	Mailing Address 9727 WELLINGTON RIDGE				м м 11	/	D	30	/ Y	201:		Y I	
	City	State	Zip Code		Trans	sacti	ion I	D : P	R19035	57813	1763		
	WOODBURY	MN	55125-9592		Amoun	t of	Eac	h Ree	ceipt th	is Per	iod		
	FEC ID number of contributing federal political committee.	С					7		7		200.0	00	
	Name of Employer	Occupation	1										
	United HealthCare Services Inc	Bus Segme	ent COO										
	Receipt For:	Aggregate	Year-to-Date ▼										
	Primary General Other (specify) ▼		D	P/R Deduction (\$100.00 Bi-Weekly)									
s	JBTOTAL of Receipts This Page (optional)			▶			7		7	2	290.0	0	
т	OTAL This Period (last page this line number	only)		🕨			7		7				

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

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 38 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)							
ILIVIIZED REVEI r 13		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorp	orated PAC (I	United for Health)								
Full Name (Last, First, Middle Initial) A. CHRISTOPHER JOHNSON			Date of Receipt							
Mailing Address 12880 53RD STREET	NORTH		M M / D D / Y Y Y Y Y 11 30 2013							
City STILLWATER	State MN	Zip Code 55082-1063	Transaction ID : PR1903591131763 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		78.00							
Name of Employer United HealthCare Services Inc	Occupation VP Gen Mg									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 936.00	P/R Deduction (\$39.00 Bi-Weekly)							
Full Name (Last, First, Middle Initial) B. STEVEN PENN			Date of Receipt							
Mailing Address 6766 IDLEWOOD WAY	,		11 30 2013							
City EDEN PRAIRIE	State MN	Zip Code 55346-3506	Transaction ID : PR1903612931763 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		28.00							
Name of Employer United HealthCare Services Inc	Occupation VP Finance									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P/R Deduction (\$14.00 Bi-Weekly)							
Full Name (Last, First, Middle Initial) C. JOHN SANTELLI			Date of Receipt							
Mailing Address 20030 EXCELSIOR BL	VD		11 30 2013							
City EXCELSIOR	State MN	Zip Code 55331-8727	Transaction ID : PR1903622031763 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		200.00							
Name of Employer	Occupation	1	—							
United HealthCare Services Inc	SVP CIO									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2400.00	P/R Deduction (\$100.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optio	nal)		306.00							
TOTAL This Period (last page this line n	umber only)									

Use separate schedule(s)

FOR LINE NUMBER:

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of the Page X 11a 11b 11c 12 13 14 15 16 17 d by any person for the purpose of soliciting contributions I committee to solicit contributions from such committee. th) Date of Receipt 11 30 2013 Transaction ID : PR1903628631763 Amount of Each Receipt this Period 28.00
th) Date of Receipt Transaction ID : PR1903628631763 Amount of Each Receipt this Period
Date of Receipt 11 30 2013 Transaction ID : PR1903628631763 Amount of Each Receipt this Period
Date of Receipt 11 30 2013 Transaction ID : PR1903628631763 Amount of Each Receipt this Period
Mm / D / Y
11 30 2013 Transaction ID : PR1903628631763 Amount of Each Receipt this Period
Transaction ID : PR1903628631763 Amount of Each Receipt this Period
P/R Deduction (\$14.00 Bi-Weekly)
Date of Receipt
11 30 Y Y Y Y Y 2013
Transaction ID : PR1903636931763 Amount of Each Receipt this Period
38.46
461.52 P/R Deduction (\$19.23 Bi-Weekly)
Date of Receipt
11 30 2013
Transaction ID : PR1910417431763 Amount of Each Receipt this Period
23.08
P/R Deduction (\$11.54 Bi-Weekly)

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

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			Detailed Summary Page		11a 13		11b 14	11c	12	17				
	y information copied from such Reports and S for commercial purposes, other than using the				or the		pose of	soliciting	contribu	tions				
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate													
A.	Full Name (Last, First, Middle Initial) BRADLEY ALLEN				Date of	Re	eceipt							
	Mailing Address 1046 THORNBERRY CREEK	DR			11 30 / Y Y Y Y Y									
	ONEIDA	State WI	Zip Code 54155-8632	A				PR21194 eceipt th						
	FEC ID number of contributing federal political committee.	С					,		40	0.00				
	Name of Employer United HealthCare Services Inc	Occupation Sr Assc Ge												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 420.00	P/R Deduction (\$20.00 Bi-Weekly)										
в.	Full Name (Last, First, Middle Initial) JON BEATY	First, Middle Initial)												
	Mailing Address 15110 SE 126TH AVE				™ ■ M 1_1	1	30	/ Y	үүү 2013	Y				
	CLACKAMAS	State OR	Zip Code 97015-9257					PR21194 eceipt th						
	FEC ID number of contributing federal political committee.				,		20	.00						
	Name of Employer United HealthCare Services Inc													
	Receipt For: Primary General Other (specify) ▼	P/R Deduction (\$10.00 Bi-Weekly)												
с.	Full Name (Last, First, Middle Initial) RUSSELL BENNETT				Date of	Re	eceipt							
	Mailing Address 4 HALSEY AVE				м м 11	1	30	/ Y	үүү 2013	Y				
	City LAGUNA NIGUEL	State CA	Zip Code 92677-5327	A				PR21194 eceipt th						
	FEC ID number of contributing federal political committee.	С					,	7	40	0.00				
	Name of Employer	Occupation												
	United HealthCare Services Inc Receipt For: Primary General Other (specify) v	Dir Mktg Bu	Year-to-Date ▼ 480.00	P/	'R Ded	ucti	on (\$20	.00 Bi-We	eekly)					
s	UBTOTAL of Receipts This Page (optional)						7		100	.00				

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

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 41 OF

n using the name and ac prporated PAC (L) N State CA C Occupation SVP Ops Aggregate V		X 11a 11b 11c 12 13 14 15 16 17 person for the purpose of soliciting contributions is to solicit contributions from such committee. Date of Receipt 11 10 10 10 10 10 10 10 11 10						
n using the name and ac prporated PAC (L) N State CA C Occupation SVP Ops Aggregate V	Inited for Health) Zip Code 92620-0204 Year-to-Date ▼	Date of Receipt Transaction ID : PR2119468131763 Amount of Each Receipt 184.00						
orporated PAC (L	Jnited for Health) Zip Code 92620-0204 Year-to-Date ▼	Date of Receipt						
) State CA C C Occupation SVP Ops Aggregate	Zip Code 92620-0204 Year-to-Date ▼	Mm / D / Y						
N State CA C Occupation SVP Ops Aggregate	92620-0204 Year-to-Date ▼	Mm / D / Y						
State CA Occupation SVP Ops Aggregate	92620-0204 Year-to-Date ▼	11 30 2013 Transaction ID : PR2119468131763 Amount of Each Receipt this Period 384.00						
CA C Occupation SVP Ops Aggregate	92620-0204 Year-to-Date ▼	Amount of Each Receipt this Period 384.00						
C Occupation SVP Ops Aggregate	Year-to-Date ▼	384.00						
Occupation SVP Ops Aggregate								
SVP Ops Aggregate		P/R Deduction (\$192.00 Bi-Weekly)						
Aggregate		P/R Deduction (\$192.00 Bi-Weekly)						
		P/R Deduction (\$192.00 Bi-Weekly)						
)	4608.00	P/R Deduction (\$192.00 Bi-Weekly)						
)	7 7							
)		-						
Full Name (Last, First, Middle Initial) KATHIE BRYAN Mailing Address 912 JOSHUA PLACE								
		11 30 2013						
		Transaction ID : PR2119469431763						
CA	92154-2537	Amount of Each Receipt this Period						
С		50.00						
Occupation								
Assc Dir Mrk	ting Comm							
Aggregate	Year-to-Date ▼							
	, 600.00	P/R Deduction (\$25.00 Bi-Weekly)						
)		Date of Receipt						
TH AVENUE		11 30 2013						
State	Zip Code	Transaction ID : PR2119469831763						
AZ	85310-3647	Amount of Each Receipt this Period						
С		20.00						
Occupation								
URS MGR (CLNT MGMT							
Aggregate	Year-to-Date ▼	P/R Deduction (\$10.00 Bi-Weekly)						
Primary General Other (specify) ▼ 240.00								
ptional)		454.00						
	CE State CA C C Occupation Assc Dir Mrk Aggregate TH AVENUE State AZ C Occupation URS MGR C Aggregate	CE State Zip Code CA 92154-2537 C Occupation Assc Dir Mrkting Comm Aggregate Year-to-Date ▼ 600.00 TH AVENUE State Zip Code AZ 85310-3647 C Occupation URS MGR CLNT MGMT Aggregate Year-to-Date ▼ 240.00						

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	11b	11c	12							
Any information copied from such Reports a													
or for commercial purposes, other than usin	ig the name and a	address of any political committe	e to solicit cor	ntributions fror	m such	committe	÷e.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (United for Health)											
Full Name (Last, First, Middle Initial) COLLEEN CAMPBELL			Date of	Receipt									
Mailing Address 5515 W 73RD AVENUE			M M / D D / Y Y Y Y Y 11 30 2013										
City WESTMINSTER	State CO	Zip Code 80003-3311	Transaction ID : PR2119469931763 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С			5	7	30.	00						
Name of Employer United HealthCare Services Inc	Occupation Assc Dir Cl												
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 360.00	P/R Deduction (\$15.00 Bi-Weekly)										
Full Name (Last, First, Middle Initial) B. DAVID CARLSON			Date of	Receipt									
Mailing Address 13130 WESTPORT ST			M M	/ D D 30	/ Y	y y 2013	Y						
City	State CA	Zip Code		action ID : PR			\$						
MOORPARK	CA	93021-2958	Amount	of Each Rec	eipt thi	s Period							
FEC ID number of contributing federal political committee.	С				7	40.	00						
Name of Employer United HealthCare Services Inc	Occupation Dir Mktg Rs												
Receipt For:	Aggregate	Year-to-Date ▼											
Primary General Other (specify) ▼		480.00	P/R Dedu	uction (\$20.00	Bi-We	ekly)							
Full Name (Last, First, Middle Initial) C. LESLIE CARTER			Date of	Receipt									
Mailing Address 19021 POPPY HILL CIR	CLE		M M 11	/ D D 30	/ Y	у 2013	Y						
City HUNTINGTON BEACH	State CA	Zip Code 92648-6710		action ID : PF			3						
FEC ID number of contributing federal political committee.	C				7	192.	00						
Name of Employer	Occupation	1											
United HealthCare Services Inc	Dir Ntwk C	-											
Receipt For: Primary General Other (specify) v	Aggregate	P/R Deduction (\$96.00 Bi-Weekly)											
SUBTOTAL of Receipts This Page (option	al)					262.0	00						
TOTAL This Period (last page this line nur	,												

Use separate schedule(s)

FOR LINE NUMBER:

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IT?	EMIZED RECEIPTS		Use separate schedule(s)	(che	(check only one)									
116			for each category of the Detailed Summary Page		11a		11b	1	1c	12	_	_		
	y information copied from such Reports and								citing					
<u> </u>	for commercial purposes, other than using the	ne name and a	aaress of any political committee	e to sol	ICIT COL	ntrib	utions	from	such	comm	ittee.			
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (l	Jnited for Health)											
	Full Name (Last, First, Middle Initial) RICHARD CROSS				Date of	Re	ceipt							
	Mailing Address 11361 DONOVAN ROAD				м м 11	/	30		Y	2013	Y	1		
	City	State	Zip Code		1194	718317	63							
	ROSSMOOR	CA	90720-2931	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		50.00										
	Name of Employer	Occupation												
	United HealthCare Services Inc	Deputy Ger	Counsel Mgr											
		Aggregate	Year-to-Date ▼											
	Primary General Other (specify) ▼		600.00	P/	'R Ded	uctio	on (\$25	5.00 B	i-We	ekly)				
				- 1										
	Full Name (Last, First, Middle Initial) KENNETH DAVIS	I			Date of	Re	ceipt							
	Mailing Address 315 N 71ST ST				м м 11	/	30		Y	y y 2013	Y			
	City	State WA	Zip Code				-			725317				
-	SEATTLE	VVA	98103-5019	A	Amount	t of	Each	Recei	pt th	is Perio	d	_		
	FEC ID number of contributing federal political committee.	С			_	,		7	4	0.00				
	Name of Employer United HealthCare Services Inc	Occupation												
		Med Dir												
	Receipt For:	Aggregate	Year-to-Date ▼				(0.0.0							
	Other (specify) ▼		480.00		R Dedi	uctio	on (\$20).00 B	I-We	ekly)				
	Full Name (Last, First, Middle Initial) LINDA DAYAN				Date of	Re	ceipt							
	Mailing Address 5364 E ABBEYFIELD ST				M M	/	30		Y	ү ү 2013	Y	1		
	City	State	Zip Code		Trans	act	ion ID	: PR2	1194	726317	763			
	LONG BEACH	CA	90815-3023	A	mount	of	Each	Recei	pt th	is Perio	d			
	FEC ID number of contributing federal political committee.	С					,		7	3	38.00)		
	Name of Employer	Occupation		_										
	United HealthCare Services Inc	Chief of Sta	ff											
		Aggregate	Year-to-Date ▼											
	Other (specify)	P/R Deduction (\$19.00 Bi-Weekly)												
_		1			_							_		

Use separate schedule(s)

FOR LINE NUMBER:

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			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 11							
or	for commercial purposes, other than using the	Statements ma e name and a	ay not be sold or used by any poddress of any political committee	erson for the purpose of soliciting contributions							
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)								
Α.	Full Name (Last, First, Middle Initial) TODD DEMBROSKI			Date of Receipt							
	Mailing Address 1390 FINCH LN	04-4	7in Code	Mmm / P D / Y Y Y Y 11 30 2013 Transaction ID : PR2119472831763							
	City GREEN BAY	State WI	Zip Code 54313-6400								
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period							
	Name of Employer United HealthCare Services Inc	Occupation Dir Act Svs									
	Receipt For: Primary General Other (specify) ▼	Year-to-Date ▼ 360.00	P/R Deduction (\$15.00 Bi-Weekly)								
	Full Name (Last, First, Middle Initial) TARA DUNGAN			Date of Receipt							
	Mailing Address 619 HIGH COUNTRY RIDGE			11 30 2013							
	City SAN ANTONIO	State TX	Zip Code 78260-1829	Transaction ID : PR2119473231763 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		20.00							
	Name of Employer United HealthCare Services Inc	Occupation Assc Dir Me									
	Receipt For: Primary General Other (specify) ▼	P/R Deduction (\$10.00 Bi-Weekly)									
	Full Name (Last, First, Middle Initial) AMY GILDERNICK			Date of Receipt							
	Mailing Address 2709 WILLIAMS GRANT			11 30 2013							
	City DE PERE	State WI	Zip Code 54115-9456	Transaction ID : PR2119475231763 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		40.00							
	Name of Employer	Occupation	 	-							
	United HealthCare Services Inc										
	Receipt For: Primary General Other (specify) ▼	P/R Deduction (\$20.00 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)			90.00							
т	OTAL This Period (last page this line number	only)									

SCHEDULE A (FEC Form 3X) DEACH

Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c	12								
Any information copied from such Reports a or for commercial purposes, other than usir												
NAME OF COMMITTEE (In Full)	iy the name and a			minilee.								
UnitedHealth Group Incorpo	orated PAC (I	United for Health)										
Full Name (Last, First, Middle Initial) A. SANDRA GLICKMAN			Date of Receipt									
Mailing Address 5135 RIO BRAVO DR			M M / D D / Y Y Y Y Y 11 30 2013									
City	State	Zip Code	Transaction ID : PR21194753									
BANNING	CA	92220-6648	Amount of Each Receipt this F	Period								
FEC ID number of contributing federal political committee.	С			20.00								
Name of Employer	Occupation											
United HealthCare Services Inc	Dir Case M	gmt										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P/R Deduction (\$10.00 Bi-Weekl	y)								
Full Name (Last, First, Middle Initial) B. DAVID HANSEN			Date of Receipt									
Mailing Address 33 VIA CONOCIDO)13								
City	State	Zip Code	Transaction ID : PR21194767									
SAN CLEMENTE	CA	92673-7044	Amount of Each Receipt this F	Period								
FEC ID number of contributing federal political committee.	С		270.									
Name of Employer United HealthCare Services Inc	Occupation Hlth Plan C											
Receipt For:	Aggregate	Year-to-Date ▼										
Primary General Other (specify) ▼		3240.00	P/R Deduction (\$135.00 Bi-Week	sly)								
Full Name (Last, First, Middle Initial) C. ANNE HARVEY			Date of Receipt									
Mailing Address 4916 THOR WAY				013								
City	State CA	Zip Code	Transaction ID : PR2119477									
CARMICHAEL	CA	95608-5650	Amount of Each Receipt this F	Period								
FEC ID number of contributing federal political committee.	C			20.00								
Name of Employer	Occupation											
United HealthCare Services Inc	Assc Dir Pr	ov Svc										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P/R Deduction (\$10.00 Bi-Weekly)									
SUBTOTAL of Receipts This Page (option TOTAL This Period (last page this line nur	,			310.00								

SCHEDULE A (FEC Form 3X) DEAL

Use separate schedule(s)

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тс	MIZED RECEIPTS		Use separate schedule(s)	(che	eck onl	y or	ıe)							
			for each category of the Detailed Summary Page		11a 13		11b 14	11c		12 16	17			
Any or f	v information copied from such Reports and S or commercial purposes, other than using the	Statements ma e name and a	ay not be sold or used by any p ddress of any political committe	erson f e to so	or the	pur ntrib	pose o	f soliciti from su	ng c ich d	ontribu	tions ee.			
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)											
A .	Full Name (Last, First, Middle Initial) PAULINE HAYES			[Date o	f Re	eceipt							
ſ	Mailing Address PO BOX 839				M M	/	30			y y 2013	Y			
	City HUNTINGTON BEACH	State CA	Zip Code 92648-0839	Transaction ID : PR2119477431763 Amount of Each Receipt this Period										
	FEC ID number of contributing ederal political committee.	С					,			20	.00			
ι	Name of Employer Jnited HealthCare Services Inc Receipt For: Primary General	Occupation Assc Dir Fir Aggregate												
	Other (specify)		P/R Deduction (\$10.00 Bi-Weekly)											
	Full Name (Last, First, Middle Initial) SAMUEL HO				Date o	f Re	eceipt							
-	Mailing Address 4220 OCEAN DR	01-1-1-	7. 0.1		M M	/	30			y y 2013	Y			
	City MANHATTAN BEACH	State CA	Zip Code 90266-3059					PR211 Receipt	-		3			
F	FEC ID number of contributing ederal political committee.	С		anoun		,	,	u iio	307	.60				
ι	Name of Employer Jnited HealthCare Services Inc Receipt For: Primary General Other (specify) ▼	Occupation Mkt Grp Chi Aggregate] P/	′R Ded	uctio	on (\$15	3.80 Bi-	Wee	ekly)				
С.	Full Name (Last, First, Middle Initial)				Date o									
-	Mailing Address 14617 GRANT ST				м м 11	1	30			2013	Y			
	City OVERLAND PARK	State KS	Zip Code 66221-2283	-				: PR211 Receipt			3			
	FEC ID number of contributing rederal political committee.	С					, ,	. ,		40	.00			
	Name of Employer United HealthCare Services Inc Receipt For:	Occupation VP Pharm (Ops											
	Primary General Other (specify) ▼		Year-to-Date ▼ 480.00	P/R Deduction (\$20.00 Bi-Weekly)						kly)				
9	JBTOTAL of Receipts This Page (optional)								-	367.	60			

Use separate schedule(s)

FOR LINE NUMBER:

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IT.			Use separate schedule(s)	(check only one)								
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
	y information copied from such Reports and for commercial purposes, other than using th											
	NAME OF COMMITTEE (In Full)											
$\Big\rangle$	UnitedHealth Group Incorporat	ed PAC (l	Jnited for Health)									
Α.	Full Name (Last, First, Middle Initial) DONNA L HUSER			Date of Receipt								
	Mailing Address 406 SKYTRAIL DR			M M / D D / Y Y Y Y 11 30 2013	Y							
	City NEW BRAUNFELS	State TX	Zip Code 78130-9010	Transaction ID : PR211947863176 Amount of Each Receipt this Period	3							
	FEC ID number of contributing federal political committee.	C			.00							
	Name of Employer United HealthCare Services Inc Receipt For:	Occupation Clms Bus P	roc Anlyst									
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P/R Deduction (\$10.00 Bi-Weekly)								
	Full Name (Last, First, Middle Initial) BRIAN JEFFREY			Date of Receipt								
	Mailing Address 9 RIMROCK	21.1		11 0 0 / Y Y Y Y 11 30 2013	Y							
	City IRVINE	State CA	Zip Code 92603-3604	Transaction ID : PR211947913176: Amount of Each Receipt this Period	3							
	FEC ID number of contributing federal political committee.	С		50.	00							
	Name of Employer United HealthCare Services Inc	Occupation Regn Pres I										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	P/R Deduction (\$25.00 Bi-Weekly)								
	Full Name (Last, First, Middle Initial) JOHN JONES	I		Date of Receipt								
	Mailing Address 3562 REDWOOD			M M / D D / Y Y Y Y 11 30 2013	Υ							
	City IRVINE	State CA	Zip Code 92606-2124	Transaction ID : PR211947923176 Amount of Each Receipt this Period	3							
	FEC ID number of contributing federal political committee.	С		192	.00							
	Name of Employer United HealthCare Services Inc	Occupation VP Govt Re	9									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2304.00	P/R Deduction (\$96.00 Bi-Weekly)								
	UBTOTAL of Receipts This Page (optional)	1		262.	00							

SCHEDULE A (FEC Form 3X) DEAEI

Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check d	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	a 🗌	11b	11c	12						
			13		14	15	16	17					
Any information copied from such Reports ar or for commercial purposes, other than using													
NAME OF COMMITTEE (In Full)													
UnitedHealth Group Incorpor	ated PAC (I	United for Health)											
Full Name (Last, First, Middle Initial) A. MARK KNUTSON			Date	of B	eceipt								
Mailing Address 19312 FAIRHAVEN EXT						D / Y	Y Y	Y					
			1		30		2013						
City	State	Zip Code	Tra	insac	tion ID :	PR2119	48023176	3					
SANTA ANA	CA	92705-6310	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С				7	7	30	.00					
Name of Employer	Occupation	1											
United HealthCare Services Inc	VP Cust Se	ervice											
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Primary General			P/R D	educt	ion (\$15	.00 Bi-We	eekly)						
Other (specify)		360.00											
Full Name (Last, First, Middle Initial) B. SANDY M LUEDKE			Date	of B	eceipt								
Mailing Address 1208 COPRINUS DR			1	M	30		2013	Y					
City	State	Zip Code					48223176	3					
GREEN BAY	WI				-	nis Period							
FEC ID number of contributing federal political committee.	С				y	7	30	.00					
Name of Employer	Occupation	1	_										
United HealthCare Services Inc	IT Database	e Cnslt											
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Other (specify)		, 360.00	P/R D	educt	ion (\$15	.00 Bi-We	eekly)						
Full Name (Last, First, Middle Initial) C. HEATHER MACE-MEADOR			Date	of R	eceipt								
Mailing Address 13531 CARLTON OAKS			M	М	30		2013	Y					
City	State	Zip Code					48253176	3					
SAN ANTONIO	ТХ	78232-4902					nis Period	•					
FEC ID number of contributing federal political committee.	С				5	7	40	.00					
Name of Employer	Occupation	1											
United HealthCare Services Inc	Dir Med Cli	in Ops											
Receipt For:	Aggregate	Year-to-Date ▼											
Other (specify)													
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SCHEDULE A (FEC Form 3X) _ _ _ _

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or for commercial purposes, other than us								
NAME OF COMMITTEE (In Full)	orated PAC (Ur	nited for Health)						
Full Name (Last, First, Middle Initial) A. JEFFREY MASON			Date of	Receipt				
Mailing Address 5670 SHEMIRAN ST			1_1	/ D D / 30	2013	Y		
City LA VERNE	State CA	Zip Code 91750-2380		ction ID : PR21 of Each Receip		3		
FEC ID number of contributing federal political committee.	С					.00		
Name of Employer United HealthCare Services Inc	Occupation Sr Med Dir							
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 360.00	P/R Dedu	ction (\$15.00 Bi	-Weekly)			
Full Name (Last, First, Middle Initial) CAROLYN MURRAY			Date of	Receipt				
Mailing Address 834 WOODTACK COV		Zip Code	M M 11	/ D D / 30	y y y 2013	Y		
City HENDERSON	State NV		ction ID : PR21		3			
FEC ID number of contributing federal political committee.	С	89002-8294	Amount	of Each Receip		.00		
Name of Employer Health Plan of Nevada	Occupation SB Mgr Acct M	Лgmt						
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 240.00	P/R Dedu	ction (\$10.00 Bi	Weekly)			
Full Name (Last, First, Middle Initial) C. SCOTT NEURURER			Date of	Receipt				
Mailing Address 23822 VIA MONTE			M M 11	/ D D / 30	Y Y Y Y 2013	Y		
City COTO DE CAZA	State CA	Zip Code 92679-4001		of Each Receip				
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Name of Employer United HealthCare Services Inc	Occupation VP Gen Mgm	t						
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or	for commercial purposes, other than using the	e name and a	ddress of any political committee	e to s	olicit cor	ntrib	utions f	rom such	h comm	ittee.	
\backslash	NAME OF COMMITTEE (In Full)										
	UnitedHealth Group Incorporate	ed PAC (l	United for Health)								
	Full Name (Last, First, Middle Initial)										
Α.	KEITH E NYGARD				Date of	Re	ceipt				
	Mailing Address 1139 E OCEAN BOULEVARE #106)			M M	/	30	/ Y	2013	Y	
	City	State	Zip Code			acti		PR2119		63	
	LONG BEACH	CA	90802-6521		Amount	of	Each R	eceipt th	nis Perio	d	
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	United HealthCare Services Inc	Compli Cns	lt								
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	Other (specify)		480.00	111	P/R Ded	uctio	on (\$20.	00 Bi-We	eekly)		
в.	Full Name (Last, First, Middle Initial) TRACY L OLLMANN-WAGNER				Date of	. Po	coint				
D .	Mailing Address 2839 TIMBER LANE			_				/ .	Y Y	V	
					11	Ľ	30	7 1	2013		
	City	State	Zip Code		Trans	acti	on ID :	PR21194	4852317	63	
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J .	Mailing Address 1825 GALINDO AVE APT 410	6				/		/ V	Y Y	Y	
					11	Ľ	30	L	2013		
	City CONCORD	State CA	Zip Code 94520-2696					PR2119			
			94520-2090		Amount	of	Each R	eceipt th	nis Perio	d	_
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	United HealthCare Services Inc	Med Dir									
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SCHEDULE A (FEC Form 3X)

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		lse separate schedule(s)	(check only one)
TEMIZED RECEIPTS		or each category of the etailed Summary Page	X 11a 11b 11c 12
Any information copied from such Repor			erson for the purpose of soliciting contributions
			e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	porated PAC (Unit	ted for Health)	
Full Name (Last, First, Middle Initial) LYNDA A PAXSON			Date of Receipt
Mailing Address 3924 E GARNET PL			M M / D D / Y Y Y Y 11 30 2013
City HIGHLANDS RANCH	State CO	Zip Code 80126-5044	Transaction ID : PR2119485831763 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer United HealthCare Services Inc Receipt For:	Occupation Sr Field Acct Mg Aggregate Year	,	
Primary General Other (specify) ▼	Aggregate Year	600.00	P/R Deduction (\$25.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) B. DIANA PETE			Date of Receipt
Mailing Address 9010 MORNINGSTA			11 30 2013
City SUGAR LAND	State TX	Zip Code 77479-3316	Transaction ID : PR2119486331763 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		, 24.00
Name of Employer United HealthCare Services Inc	Occupation Dir Utilization Mg	gmt	
Receipt For: Primary General Other (specify) ▼	Aggregate Year	-to-Date ▼ 288.00	P/R Deduction (\$12.00 Bi-Weekly)
Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address 1128 COUNTRYSID	E DR		11 30 2013
City DE PERE	State WI	Zip Code 54115-1040	Transaction ID : PR2119486431763 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer	Occupation		—
United HealthCare Services Inc	Dir Act Svs		
Receipt For:	Aggregate Year	r-to-Date ▼	P/R Deduction (\$15.00 Bi-Weekly)
Other (specify) ▼		360.00	

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

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		FIDTS Use separate schedule(s) for each category of the				y or	L			
			for each category of the Detailed Summary Page		11a		11b	11c	12	
			y not be sold or used by any r							
		ig the name and a	ddress of any political committe	e to sol	ICIT COI	ntrib	utions f	rom suc	h commit	ttee.
	COMMITTEE (In Full) Health Group Incorpo	orated PAC (l	Jnited for Health)							
	(Last, First, Middle Initial) PITTMAN				Date of	f Re	ceipt			
Mailing Add	dress 14 LOCH RIDGE DRIVE				M M	/	30	/ Y	2013	Y
City GREENSB	20P0	State NC	Zip Code 27408-3868						48673176	
			27400-3000	/	Amount	t of	Each R	eceipt ti	nis Perioc	k
	mber of contributing itical committee.	C				_	, .	7	270	0.00
Name of E	mployer	Occupation								
	IthCare Services Inc	Pres Ntwks								
Receipt Fo Prima Other		Aggregate	Year-to-Date ▼ 3240.00	P/	'R Ded	uctio	on (\$13	5.00 Bi-V	Veekly)	
			, , , , , , , , , , , , , , , , , , , ,	_						
Full Name B. CYNTH	(Last, First, Middle Initial) IA POLICH			[Date of	f Re	ceipt			
	dress 3401 E VIA PALOMITA				м м 11	/	30	/ Y	у у 2013	Y
City		State AZ	Zip Code				-	-	48683176	
TUCSON		AZ	85718-3371	/	Mount	t of	Each R	eceipt tl	nis Perioc	ł
	mber of contributing itical committee.	С			_		,		200	0.00
Name of E		Occupation								
	IthCare Services Inc	SVP Strat Ir	nitiv							
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Other	ary General r (specify) ▼		2400.00	P/	R Ded	uctio	on (\$100).00 Bi-V	Veekly)	
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Mailing Add	dress 143 RUSTIC OAK DRIV	E			м м 11	/	30	/ Y	2013	Y
City		State	Zip Code		Trans	sact	ion ID :	PR2119	4872317	63
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	mber of contributing itical committee.	C					5	7	28	8.00
Name of E	mployer	Occupation								
United Hea	IthCare Services Inc	Dir Finance								
Receipt Fo		Aggregate	Year-to-Date 🔻							
Other	ary General r (specify) v		336.00	P/	'R Ded	luctio	on (\$14.	.00 Bi-W	eekly)	
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		Detailed Summary Page		(11a		11b		11c		12		
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	y information copied from such Reports and for commercial purposes, other than using the											
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	Jnited for Health)									
Α.	Full Name (Last, First, Middle Initial) DEBBIE E ROGERS				Date of	f Re	eceip	t				
	Mailing Address 413 DOE RUN RD				M M	/		30	/ Y) 013	Y
	City SEQUIM	State WA	Zip Code 98382-4704		Trans Amount				R2119 ceipt th			3
	FEC ID number of contributing federal political committee.	С					7		y	_	20.	00
	Name of Employer United HealthCare Services Inc	Occupation Sr Proj Mgr										
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В.	Full Name (Last, First, Middle Initial)	1			Date of	f Re	eceip	t				
	Mailing Address 14848 LANDERWOOD DR				M M	1		30	/ Y)13	Y
	City EASTVALE	State CA	Zip Code 92880-3992		Trans Amount				R21194 ceipt th			;
	FEC ID number of contributing federal political committee.	С					7	_	7	_	20.	00
	Name of Employer United HealthCare Services Inc	Occupation KA New Bu										
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c.	Full Name (Last, First, Middle Initial) MARTIN SING				Date of	f Re	eceip	t				
	Mailing Address 9407 LLANO VERDE				M M 11	/		о 30	/ Y)13	Y
	City HELOTES	State TX	Zip Code 78023-4156		Trans Amount				R2119 ceipt th			3
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	Name of Employer	Occupation	I									
	United HealthCare Services Inc	Dir Cust Se	ervice									
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1	poses, other than using	d Statements ma the name and a	ay i addi	not be sold or used by ar ress of any political comm	ny person nittee to	n f so	for the licit co	pur ntrib	rpo out	ions	of s frc	olicitin om suc	g co ch co	ontribu	tions ee.
	ITTEE (In Full) Group Incorpora	ated PAC (l	Un	ited for Health)											
-	First, Middle Initial) TTLER						Date o	f Re	ece	eipt					
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	ⁱ contributing mmittee.	С							7			7		20	.00
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;	Services Inc	VP HIthcare	e E	con											
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	contributing mmittee.	С							,			7		40	.00
r	Services Inc	Occupation VP Med Clir		ps											
f	General (y) ▼	Aggregate	Ye	ar-to-Date ▼ 480.00		P	/R Ded	luctio	on	(\$2	0.00	0 Bi-W	eekl	y)	
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		CA		90803-4018		,	Amoun	t of	Ea	ach	Re	ceipt t	his F	Period	
	ⁱ contributing mmittee.	С							7			- 7		550	.00
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		Aggregate	Ye	ar-to-Date ▼											
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			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 11
or	for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)	
Α.	Full Name (Last, First, Middle Initial) CHERYL THOMSON			Date of Receipt
	Mailing Address 222 FOREST DR	-		M = M / D = D / Y = Y = Y Y 11 30 2013
	City SOBIESKI	State WI	Zip Code 54171-9748	Transaction ID : PR2119491631763
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer United HealthCare Services Inc	Occupation Dir Compli	1	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 360.00	P/R Deduction (\$15.00 Bi-Weekly)
	Full Name (Last, First, Middle Initial) STEVEN TUCKER			Date of Receipt
	Mailing Address 12331 COUNTRY LANE			11 30 2013
	City SANTA ANA	State CA	Zip Code 92705-3330	Transaction ID : PR2119492031763 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		192.00
	Name of Employer United HealthCare Services Inc	Occupation VP Regl Aff		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2304.00	P/R Deduction (\$96.00 Bi-Weekly)
	Full Name (Last, First, Middle Initial) SUSAN VANASTEN			Date of Receipt
	Mailing Address W313 GOLDEN GLOW RD			M M / D D / Y Y Y Y 11 30 2013
	City KAUKAUNA	State WI	Zip Code 54130-7809	Transaction ID : PR2119492631763 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		80.00
	Name of Employer	Occupation	1	
	United HealthCare Services Inc	Site Dir Me	dicr Ins SIs	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 960.00	P/R Deduction (\$40.00 Bi-Weekly)
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	Jnited for Health)							
Full Name (Last, First, Middle Initial) SCOTT WESTPHAL			Da	te of	Receipt	t			
Mailing Address 4536 ROCKY RUN LN			M	M 11		30	y y 201		1
City OCONTO	State WI	Zip Code 54153-9268				D : PR211 n Receipt			
FEC ID number of contributing federal political committee.	С				3			23.0	8
Name of Employer United HealthCare Services Inc Receipt For: Primary General	Occupation Dir Act Svs Aggregate	Year-to-Date ▼		Dadu	ation (ff				
Other (specify)		276.96	P/R	Dedu	ction (\$	11.54 Bi-V	veeкiy)		
Full Name (Last, First, Middle Initial) B. <u>LINDA DAUGHERTY</u>			Da	te of	Receipt	t			
Mailing Address 15442 NORTH 19TH WA	Y State	Zip Code	_ L	[™] 11		30 [/]	Y Y 201	3	
PHOENIX	AZ	85022-3329) : PR211 n Receipt			
FEC ID number of contributing federal political committee.	С				3			40.0	0
Name of Employer United HealthCare Services Inc	Occupation Assc Gen C								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 480.00	P/R	Dedu	ction (\$	20.00 Bi-V	Veekly)		
Full Name (Last, First, Middle Initial) C. GREGORY WRIGHT			Da	te of	Receipt	t			
Mailing Address 13901 MAUVE DRIVE			M	м 11		30 /	y y 201		
City SANTA ANA	State CA	Zip Code 92705-2649				D : PR211 n Receipt			
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Name of Employer	Occupation		_						
United HealthCare Services Inc	Regn Pres								
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<u> </u>	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate							_				-
Α.	Full Name (Last, First, Middle Initial) GEORGE YOUNG				Date of	Re	eceipt					
	Mailing Address 36296 N 98TH WAY				M M	_	30		/ Y) 13	Y
	City	State	Zip Code		Trans	act	ion ID	: P	R21194			;
	SCOTTSDALE	AZ	85262-3138	/	Amount	t of	Each	Re	ceipt th	is Pe	eriod	
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	Name of Employer	Occupation										
	United HealthCare Services Inc	Regn Exec										
	Receipt For:	Aggregate	Year-to-Date ▼									
	Other (specify)		360.00	P.	/R Ded	uctio	on (\$15	5.0	0 Bi-We	ekly	')	
	Full Name (Last, First, Middle Initial) STEVEN C YOUNG				Date of	Re	eceipt					
	Mailing Address 10765 QUAIL CREEK DRIVE	EAST			M M 11	/	30		/ Y	20 ⁻	ү 13	Y
	City	State	Zip Code		Trans	acti	ion ID	: P	R21194	945	31763	
	PARKER	CO	80138-3064	/	Amount	t of	Each	Re	ceipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	С					7		7	_	20.	00
	Name of Employer United HealthCare Services Inc	Occupation SB Acct Exe										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P/	/R Ded	uctio	on (\$10).00	0 Bi-We	ekly)	
	Full Name (Last, First, Middle Initial) FORREST BURKE				Date of	Re	eceipt					
	Mailing Address 380 LEAF STREET				M M 11	1	30		/ Y	ү 20	ү 13	Y
	City	State	Zip Code						R2133			3
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	FEC ID number of contributing federal political committee.	С					7		7	_	200.	00
	Name of Employer	Occupation										
	United HealthCare Services Inc	Pres PS La	bor Trust									
	Receipt For:	Aggregate	Year-to-Date 🔻									
	Other (specify)		2400.00] P.	/R Ded	ucti	on (\$1(00.	00 Bi-W	/eek	ly)	
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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X	11a 13		11b		11c 15	12 16	17
Ar or	y information copied from such Reports and for commercial purposes, other than using the	Statements mane name and a	ay not be sold or used by any ddress of any political committ	person f tee to sol	or the	purp ntrib	pose outior	e of s ns fro	oliciting	g contribu	utions
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ted PAC (l	Jnited for Health)								
Α.	Full Name (Last, First, Middle Initial) WILLIAM COLEMAN			[Date of	f Re	eceip	ot			
	Mailing Address 831 RATLEY ROAD				M M 1_1	L.		30		у у 2013	
	City WEST SUFFIELD	State CT	Zip Code 06093-2400							1325317	
	FEC ID number of contributing federal political committee.	C			Amount	t ot	Eac	n Re	ceipt th	nis Perioo 24	4.00
	Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼	Occupation Dir Clms Aggregate	Year-to-Date ▼ 288.00	P/	'R Ded	uctio	on (\$	\$12.0	0 Bi-We	∍ekly)	
в.	Full Name (Last, First, Middle Initial) DANIEL CUMMINGS Mailing Address 1929 FAIRMOUNT AVE				Date of	f Re		ot D	/ Y	Y Y	Y
	City SAINT PAUL	State MN	Zip Code 55105-1539	A			ion I			2013 1 326317(his Period	
	FEC ID number of contributing federal political committee.	С					7		7	3(0.00
	Name of Employer United HealthCare Services Inc	Occupation Dir Finance									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 360.00	P/	R Ded	uctic	on (\$	615.0	0 Bi-We	ekly)	
<u>с.</u>	Full Name (Last, First, Middle Initial) BROR HULTGREN	1			Date of	f Re	eceip	ot			
	Mailing Address 408 22ND ST				м м 11	/	D	о 30	/ Y	у у 2013	Y
	City GOLDEN	State CO	Zip Code 80401-2452							1332317	
	FEC ID number of contributing federal political committee.	С			Amount	t of	Eac	n Re	ceipt th	nis Perioo 7	6.92
	Name of Employer	Occupation	1								
	United HealthCare Services Inc	Regn Pres									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P	/R Ded	luctio	on (\$	\$38.4	6 Bi-We	∋ekly)	
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	y information copied from such Reports and for commercial purposes, other than using the											
$\overline{)}$	NAME OF COMMITTEE (In Full)											
\rangle	UnitedHealth Group Incorporat	ted PAC (I	Jnited for Health)									
Α.	Full Name (Last, First, Middle Initial) ALLEN MILLER			[Date of	Re	ceipt					
	Mailing Address 6209 CRESCENT DRIVE				м – м 11	/	30	/ Y	2013	Y		
	City	State	Zip Code		Trans	acti		PR2133	13363176	3		
	EDINA	MN	55436-2530	A	Amount	of	Each Re	eceipt th	is Period			
	FEC ID number of contributing federal political committee.	С					7	7	70	.00		
	Name of Employer	Occupation	I									
	United HealthCare Services Inc	Regn Exec	Dir									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General		840.00	P/	R Dedu	uctio	on (\$35.0	00 Bi-We	eekly)			
	Other (specify)		7 7									
В.	Full Name (Last, First, Middle Initial) SUSAN MORISATO				Date of	Re	ceipt					
	Mailing Address 238 ARDMORE ROAD				м м 11	/	30	/ Y	2013	Y		
	City	State	Zip Code		Transa	acti	on ID : F	PR21331	13383176	3		
	DES PLAINES	IL	60016-2119	A	Amount	of	Each Re	eceipt th	is Period			
	FEC ID number of contributing federal political committee.	С					7	7	386	.00		
	Name of Employer	Occupation		_								
	United HealthCare Services Inc	Pres Insura	nce Sols									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		4632.00	P/	R Dedu	uctic	on (\$193	.00 Bi-W	/eekly)			
<u>с</u> .	Full Name (Last, First, Middle Initial) KIMBERLY NETTLETON				Date of	Re	ceipt					
	Mailing Address 5003 DARNELL				м м 11	/	30	/ Y	2013	Y		
	City	State	Zip Code		Trans	acti	on ID :	PR2133	13393176	3		
	HOUSTON	ТХ	77096-1510	A	Amount	of	Each Re	eceipt th	is Period			
	FEC ID number of contributing federal political committee.	С					7	7	30	.00		
	Name of Employer	Occupation										
	United HealthCare Services Inc	Dir Gen Mg	ımt									
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	UBTOTAL of Receipts This Page (optional)						y		486.	00		

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PAGE 60 OF

		Detailed Summary Page					11k	b	11c	12	□
or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	y not be sold or used by any pe ddress of any political committee	erson f to so	13 or the licit cor	purp ntrib	pose	e of s	15 oliciting m sucl	16 contribu commit	17 Itions tee.
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)								
	Full Name (Last, First, Middle Initial) T JEFFREY PUTNAM				Date of	Re	eceip	ot			
	Mailing Address 303 ELMWOOD PLACE WES				M M	1	D	30	/ Y	ү ү 2013	Y
	City MINNEAPOLIS	State MN	Zip Code 55419-1349				-			13423176	
	FEC ID number of contributing federal political committee.	С		/	Amount	of	Eac	ch Re	ceipt th	is Perioc 384	1.60
	Name of Employer United HealthCare Services Inc	Occupation SVP Finance	ial Plng Anlys								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P	/R Ded	uctio	on (\$192.	30 Bi-V	/eekly)	
	Full Name (Last, First, Middle Initial) DIANE SCHIMMELBUSCH				Date of	Re	eceip	ot			
	Mailing Address 2203 RIVER FALLS DRIVE				M M	/	D	30	/ Y	2013	Y
	City KINGWOOD	State TX	Zip Code 77339-3124							3463176 is Perioc	-
	FEC ID number of contributing federal political committee.	С					,		9	50	0.00
	Name of Employer United HealthCare Services Inc	Occupation Exec Dir									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	P/	ſR Dedu	uctic	on (S	\$25.0) Bi-We	ekly)	
	Full Name (Last, First, Middle Initial)				Date of	Re	eceip	ot			
	Mailing Address 7729 KENSINGTON MANOR	LANE			м м 11	/	D	30	/ Y	ү ү 2013	Y
	City WAKE FOREST	State NC	Zip Code 27587-3909							13473170 is Perioc	
	FEC ID number of contributing federal political committee.	С					,		9	20	0.00
	Name of Employer	Occupation									
	United HealthCare Services Inc	VP Gen Mg	mt								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P	/R Ded	uctio	on (\$10.0	0 Bi-We	eekly)	
s	JBTOTAL of Receipts This Page (optional)						7		3	454	.60

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		Detailed Summary Page		11a 13		11b 14	11c		12	<u> </u>	
	y information copied from such Reports and S for commercial purposes, other than using the				or the		pose of				
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)								
<u> </u>	Full Name (Last, First, Middle Initial) DANIEL COLE			_ [Date of	Re	eceipt				
	Mailing Address 9790 FOXWORTH DRIVE				M M 11	1	30	/		2013	Y
		State GA	Zip Code 30022-6259	-			ion ID :				3
	JOHNS CREEK	GA	30022-0239	_ /	Amount	t of	Each R	eceipt	this	Period	
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	United HealthCare Services Inc	UHC SIs R	/Р КА								
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	Other (specify)		240.00		R Ded	uctio	on (\$10.	00 BI-\	/Veek	ily)	
	Full Name (Last, First, Middle Initial) ROBERT FALKENBERG				Date of	Re	eceipt				
	Mailing Address 6069 WEATHERED OAK CT				™ M 1_1	1	30	/		013	Y
	City	State	Zip Code				ion ID :				3
	WESTERVILLE	OH	43082-8304	A	Amount	t of	Each R	eceipt	this	Period	
	FEC ID number of contributing federal political committee.	С				_	7			76.	92
	Name of Employer United HealthCare Services Inc										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)							
с.	Full Name (Last, First, Middle Initial) WILLIAM MICKLE				Date of	Re	eceipt				
	Mailing Address 8 DURANGO COURT				M M 11	1	30	/		2013	Y
	City ALISO VIEJO	State CA	Zip Code 92656-8068				ion ID :				3
			32030-0000	4	۱mount	tof	Each R	eceipt	this	Period	
	FEC ID number of contributing federal political committee.	С			-		7	1	_	20	.00
	Name of Employer	Occupation									
	United HealthCare Services Inc	Bus Segme	ent CAO								
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		/D D - '		(****	00 5. 1	Ma - '		
	Other (specify) ▼		240.00] ^{P/}	K Ded	uctio	on (\$10.	00 BI-1	veek	uy)	
s	UBTOTAL of Receipts This Page (optional)						,			116.	92
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SCHEDULE A (FEC Form 3X)

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116	EMIZED RECEIPTS		for each category of the Detailed Summary Page		< 11a		11b	11c	12	
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	y information copied from such Reports and S for commercial purposes, other than using the									
	NAME OF COMMITTEE (In Full)									
	UnitedHealth Group Incorporate	ea PAC (l	United for Health)							
	Full Name (Last, First, Middle Initial)									
	WAYNE MILLER Mailing Address 19521 SIERRA SOTO RD				Date of	Re		_		_
	Maining Address 19521 SIERRA SOTO RD				M M	1	30) / Y	2013	Y
	City	State	Zip Code		Trans	acti		PR2145	72923176	3
-	IRVINE	CA	92603-3840		Amount	of	Each F	Receipt th	is Period	
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	Name of Employer	Occupation	alationahin							
	United HealthCare Services Inc Receipt For:	SVP CInt R	•							
	Primary General	Aggregate	Year-to-Date ▼	I F	P/R Dedu	uctio	on (\$20	.00 Bi-We	ekly)	
	Other (specify)		480.00						• /	
	Full Name (Last First Middle Initial)									
	Full Name (Last, First, Middle Initial) LEAH RUMMEL				Date of	Re	ceipt			
	Mailing Address 12100 TRAUTWEIN ROAD				M M	/	D I) / Y	Y Y	Y
	City	Ctoto	Zin Code	_	11		30		2013	
	City AUSTIN	State TX	Zip Code 78737-9358				-		72953176 iis Period	3
-	FEC ID number of contributing				Amount		Lacini			_
	federal political committee.	С					7	J	30	.00
	Name of Employer	Occupation		_						
	United HealthCare Services Inc	Dir Govt Re	l							
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General Other (specify)		360.00	F	P/R Dedu	uctio	on (\$15	.00 Bi-We	ekly)	
						_				
	DANNETTE SMITH Mailing Address 5414 BYSCANE LANE				Date of	Re	ceipt		Y Y	V
	Maining Address 5414 BISCANE LANE				11	Ĺ	30		2013	Y
		State MN	Zip Code						72993176	3
	MINNETONKA	IVIIN	55345-5601	_	Amount	of	Each F	Receipt th	is Period	
	FEC ID number of contributing federal political committee.	С						1.40	386	.00
	Name of Employer	Occupation					,	,		
	United HealthCare Services Inc		Gen Counsel							
	Receipt For:	Aggregate								
	Primary General	33 - 3	1 1	P/R Ded	ucti	on (\$19	3.00 Bi-V	Veekly)		
	Other (specify)		4632.00	4						
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	Detailed Summary Page		-		11b		11c		2	<u> </u>							
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or for commercial purposes, other that NAME OF COMMITTEE (In Full)	in using the name and a	loaress of any political committe	e to sol	ICIT COL	ntrib	outions	Tro	m such	i com	mitte	e.						
UnitedHealth Group Inc	orporated PAC (Jnited for Health)															
Full Name (Last, First, Middle Initia RANDALL SMITH	al)		[Date of	Re	eceipt											
Mailing Address 20607 BROADWA	TER DRIVE			м м 11	/	D 3(/ Y	y 201	3	Y						
	State FL	Zip Code 34638-8328						R21457									
LAND O LAKES	FL.	34030-0320	A	Amount	of	Each	Re	ceipt th	is Per	riod							
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United HealthCare Services Inc	VP Gen Mg	·															
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Other (specify)		276.96		R Dea	uctio	on (\$1	1.54	4 Bi-We	екіу)								
Full Name (Last, First, Middle Initia B. MARGARET SPARKS	al)			Date of	Re	eceipt											
Mailing Address 44 TOPANGA			11 30 2013								Y						
City	State	Zip Code		Trans	acti	ion ID	: P	R21457	3023	1763							
IRVINE	CA	92602-2422	A	Amount	of	Each	Re	ceipt th	is Per	riod							
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Name of Employer United HealthCare Services Inc	Occupation VP Actuary																
Receipt For:	Aggregate	Aggregate Year-to-Date ▼						P/R Deduction (\$50.00 Bi-Weekly)									
Other (specify)		1200.00	_														
Full Name (Last, First, Middle Initia MARYNELL BENSON			[Date of	Re	eceipt											
Mailing Address 222 IRON WORK				м м 11	/	D 3(/ Y	201:		Y						
City WAYNE	State PA	Zip Code 19087-4213						R21628									
			<i>P</i>	Amount	to t	Each	Re	ceipt th	is Per	riod							
FEC ID number of contributing federal political committee.	C				_	y	_	7		20.0	00						
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United HealthCare Services Inc	Exec Dir																
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or	for commercial purposes, other than using the	tatements ma name and a	y not be sold or used by any poddress of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Inited for Health)	
۹.	Full Name (Last, First, Middle Initial) DAVID SPIVACK			Date of Receipt
	Mailing Address 37 HIDDEN TRAIL	Otata	Zin Cod-	11 30 Y Y Y Y Y 2013
	City IRVINE	State CA	Zip Code 92603-0212	Transaction ID : PR2162867631763
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 384.60
	Name of Employer United HealthCare Services Inc	Occupation SVP Bus Op	DS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20	P/R Deduction (\$192.30 Bi-Weekly)
	Full Name (Last, First, Middle Initial) KURT LEWIS			Date of Receipt
	Mailing Address 961 RIVER FOREST DRIVE		11 30 2013	
	City MAINEVILLE	State OH	Zip Code 45039-7720	Transaction ID : PR2203967531763 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		23.08
	Name of Employer United HealthCare Services Inc	Occupation KA VP SIs A	Acct Mgmt	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 276.96	P/R Deduction (\$11.54 Bi-Weekly)
<u> </u>	Full Name (Last, First, Middle Initial) CHRISTINE GIBSON			Date of Receipt
	Mailing Address 8516 29TH AVE N			11 30 2013
	City NEW HOPE	State MN	Zip Code 55427-2622	Transaction ID : PR2225166731763 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer	Occupation		_
	United HealthCare Services Inc			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2769.12	P/R Deduction (\$115.38 Bi-Weekly)
S	JBTOTAL of Receipts This Page (optional)			638.44

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or for commercial purposes, other than using									
NAME OF COMMITTEE (In Full)	ated PAC (I	United for Health)							
Full Name (Last, First, Middle Initial) A. JEAN-FRANCOIS BEAULE			Date o	f Receipt					
Mailing Address 7 STRATFORD RD			M M	30) / Y	2013	Y		
City FARMINGTON	State CT	Zip Code 06032-1444		saction ID : It of Each F			3		
FEC ID number of contributing federal political committee.	C			7		115	.40		
Name of Employer United HealthCare Services Inc Receipt For:		dvancement	_						
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1384.80	P/R Dec	duction (\$57	.70 Bi-We	ekly)			
Full Name (Last, First, Middle Initial) B. NANCY CARRUTH			Date o	f Receipt					
Mailing Address 10140 26TH AVENUE NO	RTH		M = M 11	30	/ Y	2013	Y		
City PLYMOUTH	State MN	Zip Code 55441-3226		saction ID :			3		
FEC ID number of contributing federal political committee.	С			it of Each F		30.	.00		
Name of Employer United HealthCare Services Inc	Occupation Dir IT	1	_						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 360.00	P/R Dec	luction (\$15.	5.00 Bi-Weekly)				
Full Name (Last, First, Middle Initial) C. MICHAEL MCGUIRE			Date o	f Receipt					
Mailing Address 437 DRURY LANE			11	/ D 1 30		2013	Y		
City WYCKOFF	State NJ	Zip Code 07481-2204		saction ID : it of Each F			3		
FEC ID number of contributing federal political committee.	С						.00		
Name of Employer	Occupation	1							
United HealthCare Services Inc	Hith Plan C								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 480.00	P/R Deduction (\$20.00 Bi-We						
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SCHEDULE A (FEC Form 3X) _ _ _ _

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17	EMIZED RECEIPTS		Use separate schedule(s)	(check	only	one)				
			for each category of the Detailed Summary Page	X 11	a	11b		11c	12	
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	y information copied from such Reports and s for commercial purposes, other than using the									
$\overline{)}$	NAME OF COMMITTEE (In Full)									
$\Big\rangle$	UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)							
Α.	Full Name (Last, First, Middle Initial) ERIC RANGEN			Date	e of F	leceip	t			
	Mailing Address 15348 RED OAKS ROAD SE				M	/ D	20	/ Y	2012	Y
	City	State	Zip Code		1 ansac	tion I	30 D : Pf	22258	2013 3 1933176	63
	PRIOR LAKE	MN	55372-1834	Amo	ount c	f Eac	h Rec	eipt th	is Period	ł
	FEC ID number of contributing federal political committee.	С				J		7	384	4.60
	Name of Employer	Occupation								
	United HealthCare Services Inc	SVP Chief	Accting Off							
	Receipt For:	Aggregate	Year-to-Date ▼					_		
	Primary General Other (specify) ▼		4615.20	P/R [Deduc	tion (§	5192.3	0 Bi-W	/eekly)	
в.	Full Name (Last, First, Middle Initial) JOHN RYAN			Date	e of F	leceip	t			
	Mailing Address 45 WESTMORELAND LN				™ 1	/ D	30	/ Y	у у 2013	Y
	City	State	Zip Code	Tra	ansac	tion I	D : PF	22258	1963176	63
	NAPERVILLE	IL	60540-5817	Amo	ount c	f Eac	h Rec	eipt th	is Period	ł
	FEC ID number of contributing federal political committee.	С			_	7		7	76	6.92
	Name of Employer	Occupation								
	United HealthCare Services Inc	RVP CInt M	gmt Svc							
	Receipt For:	Aggregate	Year-to-Date ▼) o du o	tion (f	20 40		aldu)	
	Other (specify) ▼		923.04		Peauc	tion (\$	38.46	Bi-We	екіу)	
C.	Full Name (Last, First, Middle Initial) ROY SAILOR			Date	e of F	Receip	t			
	Mailing Address 276 COYOTE WILLOW DRIV	/E			M		- - D	/ Y	Y Y	Y
		04-44	Zin Code		1		30	L	2013	
	City COLORADO SPRINGS	State CO	Zip Code 80921-7631						31973176 is Period	
	FEC ID number of contributing	0								_
	federal political committee.	С				7		7	153	3.84
	Name of Employer	Occupation								
	United HealthCare Services Inc	Dir Clnt Svo	Acct Mgt							
	Receipt For:	Aggregate	Year-to-Date ▼							
	Other (specify)		1846.08	P/R Deduction (\$76.92 Bi-Weekly)						
					-	_		-		.36

Use separate schedule(s)

FOR LINE NUMBER:

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			for each category of the Detailed Summary Page		11a 13		11b		11c 15	12	17			
or for commercial	purposes, other than using	nd Statements ma the name and a	ay not be sold or used by any p ddress of any political committee	erson f e to so	for the	purp ntrib	pose	e of s ns fro	oliciting	contribu	tions			
	MMITTEE (In Full) alth Group Incorpoi	ated PAC (l	Jnited for Health)											
Full Name (La A. MICHAEL (st, First, Middle Initial) CORNE				Date of	Re	eceip	ot						
	55 12642 CHIEFS COURT				M M 11	/	D	о 30	/ Y	ү ү 2013	Y			
City FISHERS		State IN	Zip Code 46037-9553				-			34693176				
	er of contributing I committee.	С			Amount	: of	Eac	n Re	ceipt th	is Period 28	3.00			
Receipt For: Primary	oyer Care Services Inc General pecify) ▼	Occupation VP Regl Aff Aggregate			/R Dedi	uctio	on (S	\$14.0) Bi-We	eekly)				
Full Name (La B. KAREN DI	st, First, Middle Initial)				Date of	[:] Re		ot	/ Y	Y Y	Y			
City INDIANAPOLI	S	State IN	Zip Code 46256-8408		11 30 2013 Transaction ID : PR2231347231763 Amount of Each Receipt this Period									
FEC ID number federal politica	er of contributing I committee.	C					,		7	60	.00			
Name of Empl Golden Rule Fi	•	Occupation Dir Ntwk Pr												
Receipt For: Primary Other (s	General pecify) ▼	Aggregate	Year-to-Date ▼ 720.00	P/	P/R Deduction (\$30.00 Bi-Weekly)									
Full Name (La C. DARRELL	st, First, Middle Initial)				Date of	Re	eceip	ot						
	is 10823 MOORS END CIR				M M 11	/	D	30	/ Y	ү ү 2013	Y			
City FISHERS		State IN	Zip Code 46038-2612							35233176				
	er of contributing I committee.	С			Amount	OT	Eac	n Re	ceipt th	is Period 160	0.00			
Name of Empl	oyer	Occupation												
Golden Rule F	inancial Corp.	Deputy Ger	n Counsel Mgr											
Receipt For: Primary Other (s	General pecify) ▼	Aggregate	Year-to-Date ▼ 1920.00	P/R Deduction (\$80.00 Bi-Weekly)						∍ekly)				
SUBTOTAL of F	Receipts This Page (optiona	l)		•			,		7	248	.00			
TOTAL This Per	iod (last page this line num	ber only)					,							

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			Detailed Summary Page	X	11a		11b		11c		12			
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An or	y information copied from such Reports and S for commercial purposes, other than using the	Statements ma e name and a	ay not be sold or used by any pendoress of any political committee	erson fo to sol	or the icit coi	purp ntrib	oose o utions	of s fro	oliciting m sucl	g cou n co	ntribut mmitte	ions ee.		
	NAME OF COMMITTEE (In Full)							-						
\rangle	UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)											
Α.	Full Name (Last, First, Middle Initial) MICHAEL CONNLY				Date of Receipt									
	Mailing Address 570 MONTCALM PL				M M	/	D 3		/ Y		013	Y		
	City	State	Zip Code		Trans	acti	ion ID	: P	R2247	6258	33176	3		
	SAINT PAUL	MN	55116-1730	A	mount	t of	Each	Re	ceipt th	is P	Period			
	FEC ID number of contributing federal political committee.	С					,		7		200	00		
	Name of Employer	Occupation	1	_										
	United HealthCare Services Inc	Chief Tech	Off											
	Receipt For:	Aggregate	Year-to-Date V											
	Primary General Other (specify)		2400.00	P/	R Ded	uctio	on (\$1	00.0	00 Bi-W	/eek	dy)			
в.	Full Name (Last, First, Middle Initial) SHANKAR RAO				Date of	Re	ceipt							
	Mailing Address 10622 EQUESTRIAN DR			11 30 / Y Y Y Y 2013								Y		
	City	State	Zip Code		Trans	acti	on ID	: P	R22476	6263	31763	3		
	COWAN HEIGHTS	CA	92705-2426	A	mount	t of	Each	Re	ceipt th	is P	Period			
	FEC ID number of contributing federal political committee.	С					,		7		19.	22		
	Name of Employer United HealthCare Services Inc	Occupation VP Gen Mg												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.64	P/	P/R Deduction (\$9.61 Bi-Weekly)									
c.	Full Name (Last, First, Middle Initial) JOSEPH CARCIONE				Date of	Re	ceipt							
	Mailing Address 11 CARRIAGE WAY				м м 11	/	D 3		/ Y)13	Y		
		State	Zip Code						R2247			3		
	WHITE PLAINS	NY	10605-5424	A	mount	t of	Each	Re	ceipt th	is P	Period			
	FEC ID number of contributing federal political committee.	С					,		J		115	.40		
	Name of Employer	Occupation	1											
	United HealthCare Services Inc	Med Dir												
	Receipt For:	Aggregate	Year-to-Date ▼											
	Other (specify)		1384.80	P/	'R Ded	uctio	on (\$5	7.7	0 Bi-We	eekly	y)			
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number				-		7		7		334.	62		

Use separate schedule(s)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
Any information conied from such Reports	and Statements ma	av not be sold or used by any n	erson for the purpose of soliciting contributions
			e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
UnitedHealth Group Incorport	brated PAC (l	United for Health)	
Full Name (Last, First, Middle Initial)			
A. KEVIN KANTOLA			Date of Receipt
Mailing Address 7031 HALSTEAD DRIV	E		11 30 _ 2013 _
City	State	Zip Code	Transaction ID : PR2247627031763
MINNETRISTA	MN	55364-3201	Amount of Each Receipt this Period
FEC ID number of contributing	С		78.00
federal political committee.	C		7 7 7
Name of Employer	Occupation		
United HealthCare Services Inc Receipt For:	VP IT		_
Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$39.00 Bi-Weekly)
Other (specify)		936.00	T / C Deddction (\$39.00 Di-Weekly)
		, , , , , , , , , , , , , , , , , , , ,	
Full Name (Last, First, Middle Initial) B. DENNIS O'BRIEN			Date of Receipt
Mailing Address 61 LOUGHLIN AVE			11 30 2013
City	State	Zip Code	Transaction ID : PR2247627331763
COS COB	СТ	06807-2621	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		365.36
Name of Employer	Occupation		
United HealthCare Services Inc	Regn Pres I		_
Receipt For:	Aggregate	Year-to-Date ▼	P/R Deduction (\$182.68 Bi-Weekly)
Other (specify)		2134.68	F/R Deduction (\$162.06 Di-Weekly)
Full Name (Last, First, Middle Initial) C. JEFFERY VERNEY			Date of Receipt
Mailing Address 266 WESTLEDGE ROA	D		M M / D D / Y Y Y Y
	04-1-	Zin Code	11 30 2013
City WEST SIMSBURY	State CT	Zip Code 06092-2017	Transaction ID : PR2247627431763
FEC ID number of contributing			Amount of Each Receipt this Period
federal political committee.	С		115.40
Name of Employer	Occupation		
United HealthCare Services Inc	VP Gen Mg		
Receipt For:		Year-to-Date ▼	
Primary General			P/R Deduction (\$57.70 Bi-Weekly)
Other (specify)		1384.80	1
SUBTOTAL of Receipts This Page (option	al)	······]	558.76
TOTAL This Period (last page this line nu	mber only)		

FOR LINE NUMBER:

(check only one)

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or for commercial purposes, other than using NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora Full Name (Last, First, Middle Initial) A. SANJAY GARODIA Mailing Address 282 MIDDAUGH City	he name and address of any politi ted PAC (United for Heat State Zip Code IL 60514-1067	Date of Receipt
UnitedHealth Group Incorpora Full Name (Last, First, Middle Initial) SANJAY GARODIA Mailing Address 282 MIDDAUGH City	State Zip Code IL 60514-1067	Date of Receipt
A. SANJAY GARODIA Mailing Address 282 MIDDAUGH City	IL 60514-1067	M M / D / Y
City	IL 60514-1067	11 30 2013 Transaction ID : PR2247627831763
	IL 60514-1067	
CLARENDON HILLS		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	76.92
Name of Employer United HealthCare Services Inc	Occupation COO IBS	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	P/R Deduction (\$38.46 Bi-Weekly) 923.04
Full Name (Last, First, Middle Initial) B. DANIEL OHMAN		Date of Receipt
Mailing Address 8970 MOOR PARK RUN		11 30 2013
City DULUTH	StateZip CodeGA30097-6621	Transaction ID : PR2247628031763 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	773.88
Name of Employer United HealthCare Services Inc	Occupation Regn CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	P/R Deduction (\$386.94 Bi-Weekly)
Full Name (Last, First, Middle Initial) C. JEFFREY CRUMBAUGH		Date of Receipt
Mailing Address 12946 SNOW LAKE DR		11 30 2013
City FRISCO	State Zip Code TX 75035-0454	Transaction ID : PR2259635231763 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer	Occupation	
United HealthCare Services Inc	M R SIs Dir	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	P/R Deduction (\$14.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional).	1	

SCHEDULE A (FEC Form 3X) DEAEI

Use separate schedule(s)

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	-	Use separate schedule(s)	(check or	nly o	ne)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11b	11c	12					
Any information copied from such Reports	and Statements ma		erson for the	e pur	14 pose of	15 soliciting	16 g contribut	ions				
or for commercial purposes, other than us												
NAME OF COMMITTEE (In Full)	oorated PAC (I	United for Health)										
Full Name (Last, First, Middle Initial) A. JOHN PRINCE			Date	of Re	eceipt							
Mailing Address 546 HARRINGTON R	DAD		M 11	M /	/ D D / Y Y Y Y Y 30 2013							
City WAYZATA	State MN	Zip Code 55391-1550					73843176 his Period	3				
FEC ID number of contributing federal political committee.	C				7		194.	.00				
Name of Employer United HealthCare Services Inc	Occupation Optum Exe											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2328.00	P/R De	ducti	on (\$97.	.00 Bi-We	∍ekly)					
Full Name (Last, First, Middle Initial) B. CHRISTOPHER CRONN			Date	of Re	eceipt							
Mailing Address 901 RED RIVER #121			11		/ D D / Y							
City AUSTIN	State TX	Zip Code 78701-2799			-		522931763 his Period	3				
FEC ID number of contributing federal political committee.	C				7		76.	92				
Name of Employer United HealthCare Services Inc	Occupation Govt Rel Di											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 923.04	P/R De	ducti	on (\$38.	46 Bi-We	ekly)					
Full Name (Last, First, Middle Initial) C. SIMON STEVENS			Date	of Re	eceipt							
Mailing Address 1716 EMERSON AVE	NUE SOUTH		M 11		30) / Y	2013	Y				
City MINNEAPOLIS	State MN	Zip Code 55403-2906					86323176	3				
FEC ID number of contributing federal political committee.	С				7		217	.40				
Name of Employer	Occupation	1										
United HealthCare Services Inc	EVP United	HIth Group										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2608.80	P/R De	educti	ion (\$10	8.70 Bi-V	√eekly)					
SUBTOTAL of Receipts This Page (option	nal)			-	y 1		488.	32				
TOTAL This Period (last page this line r	umber only)				7							

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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		Detailed Summary Page		11a 13		11b 14		11c 15		12 16	17			
	nation copied from such Reports and S nmercial purposes, other than using the				or the		pose o		oliciting	, con	ntributi	ons		
NAME	of committee (In Full) edHealth Group Incorporate													
	ame (Last, First, Middle Initial) OLE CURRY			[Date of	Re	eceipt							
Mailing	Address 411 FLEECE FLOWER DRIV	E			M M	1	30		/ Y)13	Y		
City		State	Zip Code	_					R24023			\$		
	IERSBURG	MD	20878-2646	/	Amount	t of	Each I	Red	ceipt th	is Pe	eriod			
	D number of contributing political committee.	С					7	_	7	_	28.	00		
	of Employer	Occupation												
United Receip	HealthCare Services Inc	Sr Proj Mgr												
	Primary General	Aggregate	Year-to-Date ▼		/R Dod		on (¢1,	1 04	n Bi Ma	okhu	d)			
	Other (specify) ▼		336.00		/R Dea	uctio	on (\$12	+.00	0 Bi-We	екіу)			
	ame (Last, First, Middle Initial) NNE DE SA				Date of	Re	eceipt							
Mailing	Address 3000 TILDEN STREET NW #	204-1		11 30 2013 Transaction ID : PR2402315931763										
City		State	Zip Code											
	IINGTON	DC	20008-3017	/	Amount	t of	Each I	Red	ceipt th	is Pe	eriod			
	D number of contributing political committee.	С					7	_	7	_	100.0	00		
United	of Employer HealthCare Services Inc	Occupation VP Rsch												
	ot For: Primary General Dther (specify) ▼	Aggregate	Year-to-Date ▼ 1200.00	P/	/R Ded	uctio	on (\$50).00) Bi-We	ekly)			
	ame (Last, First, Middle Initial) FRASCINO				Date of	Re	eceipt							
	Address 7 PIONEER DRIVE				M M 11	1	30		/ Y	20 [°]	ү 13	Y		
City	IGTON	State CT	Zip Code 06029-3221						R24023			3		
			00023-3221	/	Amount	t of	Each I	Red	ceipt th	is Pe	eriod	_		
	D number of contributing political committee.	С				_	7		7	_	28.	00		
Name	of Employer	Occupation												
	HealthCare Services Inc	Dir Mktg												
Receip	Primary General	Aggregate	Year-to-Date ▼	_ _			(\$4	4.0						
	Dther (specify) ▼		, 336.00		/K Deu	ucu	οn (\$1 ²	4.0	0 Bi-We	зекту	')			
SUBTOT	AL of Receipts This Page (optional)						7		7		156.0	00		
TOTAL 1	This Period (last page this line number	only)					7		,					

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

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check on	ly one)			
ILEWIZED KECEIPIS		for each category of the Detailed Summary Page	X 11a	11b	11c	12	
Any information copied from such Reports a	and Statements m		erson for the	purpose of	15 soliciting	16 contribut	17 ions
or for commercial purposes, other than usin							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	orated PAC (I	United for Health)					
Full Name (Last, First, Middle Initial) A. DONALD JACOBS			Date o	f Receipt			
Mailing Address 19495 VINE RIDGE ROA	AD		M M	/ D D 30	/ Y	2013	Y
City EXCELSIOR	State MN	Zip Code 55331-9173		saction ID : it of Each R			3
FEC ID number of contributing federal political committee.	С				7	20.	00
Name of Employer United HealthCare Services Inc	Occupation Sr Proj Mgr						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P/R Dec	duction (\$10.	00 Bi-We	ekly)	
Full Name (Last, First, Middle Initial) ANGELA KEPLEY CARRIER			Date o	f Receipt			
Mailing Address 3219 PENINSULA DRIVI	E State	Zip Code	11	30		2013	
JAMESTOWN	NC	27282-8717		saction ID : I It of Each Re			•
FEC ID number of contributing federal political committee.	С				,	40.	00
Name of Employer United HealthCare Services Inc	Occupation Dir Med Cli		_				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 480.00	P/R Dec	luction (\$20.0	00 Bi-We	eekly)	
Full Name (Last, First, Middle Initial) C. MARILYN LEVI-BAUMGARTE	EN		Date o	f Receipt			
Mailing Address 4800 W 27TH ST			M N 11	/ D D 30	/ Y	y y 2013	Y
City SAINT LOUIS PARK	State MN	Zip Code 55416-1933		saction ID : it of Each R			3
FEC ID number of contributing federal political committee.	С				- 7	40.	.00
Name of Employer	Occupation	1					
United HealthCare Services Inc	Dir Gen Mg	gmt					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 480.00	P/R Dec	duction (\$20.	00 Bi-We	eekly)	
SUBTOTAL of Receipts This Page (optiona	al)			- T		100.0	00
TOTAL This Period (last page this line nur	nber only)				7		

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	for commercial purposes, other than using th			rson for the purpose of soliciting contributions to solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ted PAC (I	United for Health)	
Α.	Full Name (Last, First, Middle Initial) JAKE LOGAN			Date of Receipt
	Mailing Address 4826 EAST CALLE REDON		7.0.1	11 30 / Y Y Y Y Y
	City PHOENIX	State AZ	Zip Code 85018-2931	Transaction ID : PR2402318231763
	FEC ID number of contributing federal political committee.	С		
	Name of Employer United HealthCare Services Inc Receipt For: Primary General	Occupation Govt Rel D Aggregate		P/R Deduction (\$25.00 Bi-Weekly)
	Other (specify)		600.00	F/K Deduction (\$23.00 Di-weekiy)
Β.	Full Name (Last, First, Middle Initial) MARIA MCCAULEY			Date of Receipt
	Mailing Address 7511 4TH AVENUE DRIVE	NW		11 30 2013
	City BRADENTON	State FL	Zip Code 34209-7219	Transaction ID : PR2402318431763 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		40.00
	Name of Employer United HealthCare Services Inc	Occupatior Dir Gen Mg		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 480.00	P/R Deduction (\$20.00 Bi-Weekly)
С.	Full Name (Last, First, Middle Initial) STACY MCGRATH			Date of Receipt
	Mailing Address 5625 CHOWEN AVE S			11 30 / Y Y Y Y Y
	City EDINA	State MN	Zip Code 55410-2345	Transaction ID : PR2402318531763 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		30.00
	Name of Employer	Occupation	1	_
	United HealthCare Services Inc	Dir Proj Mg	ımt	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 360.00	P/R Deduction (\$15.00 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)		•	120.00
т	OTAL This Period (last page this line numbe	r only)	••••••	

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11			for each category of the Detailed Summary Page		< 11a		11b	11c	12	
					13		14	15	16	17
Ar or	y information copied from such Reports and s for commercial purposes, other than using th	Statements ma e name and a	ay not be sold or used by any pound of any pound of any political committee	erson e to so	for the olicit cor	pur ntrib	pose o outions	f soliciting	g contribu h commiti	tions ee.
	NAME OF COMMITTEE (In Full)									
\rangle	UnitedHealth Group Incorporat	ed PAC (l	Jnited for Health)							
A.	Full Name (Last, First, Middle Initial)				Date of	Re	eceipt			
	Mailing Address 2619 S KIHEI RD #B511				M M M	/	30		2013	Y
	City	State	Zip Code			act			31873176	3
	KIHEI	HI	96753-6217		Amount	t of	Each F	Receipt th	nis Period	
	FEC ID number of contributing federal political committee.	С					7	5	20	.00
	Name of Employer	Occupation								
	United HealthCare Services Inc	VP Bus Dvl	р							
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General		240.00	F	P/R Ded	ucti	on (\$10).00 Bi-W	eekly)	
	Other (specify)		240.00	4						
В.	Full Name (Last, First, Middle Initial) ANDREA MORRISON DAVIS				Date of	Re	eceipt			
	Mailing Address 2 LAKESHIRE COURT	21.1			M M	/	D 30		у у 2013	Y
		State MD	Zip Code						31893176	3
	OWINGS MILLS	IVID	21117-1246	_	Amount	tof	Each F	Receipt th	nis Period	
	FEC ID number of contributing federal political committee.	С					7		20	.00
	Name of Employer	Occupation								
	United HealthCare Services Inc	Acct Mgt Co	ons Clnt Svc							
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General Other (specify) ▼		240.00] F	P/R Dedu	uctio	on (\$10	0.00 Bi-We	eekly)	
<u>с</u> .	Full Name (Last, First, Middle Initial) DIANE SOUZA				Date of	Re	eceipt			
	Mailing Address 3430 GALT OCEAN DRIVE				M M	/	D	D / Y	Y Y	Y
	UNIT 1111				11	L.	30)	2013	
	City FORT LAUDERDALE	State FL	Zip Code 33308-7047	-					32003176 nis Period	3
	FEC ID number of contributing				Amount		Lacini	leceipt ti		
	federal political committee.	C					9	- J	384	.60
	Name of Employer	Occupation								
	United HealthCare Services Inc	CEO Spclty	Bens							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4422.90]	P/R Ded	ucti	on (\$19	92.30 Bi-V	Veekly)	
s	UBTOTAL of Receipts This Page (optional)			•		1	7		424	60
Т	OTAL This Period (last page this line number	only)		_ ▶						

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IT.			Use separate schedule(s)	(ch	eck only	y on	ie)						
			for each category of the Detailed Summary Page		〈 11a		11b	11c	12				
		<u></u>			13		14	15	16	17			
	y information copied from such Reports and a for commercial purposes, other than using th												
$\overline{)}$	NAME OF COMMITTEE (In Full)												
$\Big\rangle$	UnitedHealth Group Incorporat	ed PAC (l	Jnited for Health)										
Α.	Full Name (Last, First, Middle Initial)				Date of	Re	ceipt						
	Mailing Address 5701 S JOSH WYATT DR				M M	/	0 D	/ Y	2013	Y			
	City	State	Zip Code		Trans	acti	on ID :	PR2402	32023176	3			
	SIOUX FALLS	SD	57108-5225		Amount	of	Each R	eceipt th	nis Period				
	FEC ID number of contributing federal political committee.	С					,		386	.00			
	Name of Employer	Occupation	l										
	United HealthCare Services Inc	EVP United	HIth Group										
	Receipt For:	Aggregate	Year-to-Date ▼										
	Primary General		4632.00	1 F	P/R Dedu	uctio	on (\$193	8.00 Bi-V	Veekly)				
	Other (specify)		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1										
В.	Full Name (Last, First, Middle Initial)	I			Date of	Re	ceipt						
	Mailing Address 22503 MAGNOLIA TRACE B				M M 11	/	30	/ Y	у у 2013	Y			
	City	State FL	Zip Code				-		32093176	3			
		FL.	33549-9306		Amount	of	Each R	eceipt th	nis Period				
	FEC ID number of contributing federal political committee.	С				_	y		20	.00			
	Name of Employer United HealthCare Services Inc	Occupation	l										
		Dir Gen Mg	mt										
	Receipt For: Primary General	Aggregate	Year-to-Date ▼				(0.1.0.1						
	Other (specify) ▼		, 240.00		P/R Dedu	uctic	on (\$10.0	00 Bi-W€	ekly)				
<u> </u>	Full Name (Last, First, Middle Initial) SHELLEY CRANLEY				Date of	Re	ceipt						
	Mailing Address 3801 MAURICE COURT				м м 11	/	30	/ Y	2013	Y			
	City	State	Zip Code		Trans	acti	ion ID :	PR2402	44443176	3			
	LAS VEGAS	NV	89108-5245		Amount	of	Each R	eceipt th	nis Period				
	FEC ID number of contributing federal political committee.	С					3	,	200	.00			
	Name of Employer	Occupation	1										
	United HealthCare Services Inc	Dir Regl Af	fs										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2400.00] F	P/R Ded	uctio	on (\$100).00 Bi-V	Veekly)				
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number			<u> </u>			7	5	606	00			

Use separate schedule(s)

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	-	Use separate schedule(s)	(check	only o	one)				-
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11	- H	11b	11c	12	·	-
Any information copied from such Reports a or for commercial purposes, other than using				the pu					17 s
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	-								
Full Name (Last, First, Middle Initial) A. JAY ANLIKER			Dat	e of F	Receipt				
Mailing Address 4306 MOUNTAIN LANE				1		D / 30	Y Y Y Y 2013	Y	
City WAUSAU	State WI	Zip Code 54401-8543	Tr	ansac	tion II) : PR240	24450317 this Perio		
FEC ID number of contributing federal political committee.	С				7		4	40.00	
Name of Employer United HealthCare Services Inc Receipt For: Primary General	Occupation CEO TPA Aggregate	Year-to-Date ▼	P/R I	Deduc	tion (\$'	20.00 Bi-\	Neekly)		
Other (specify) ▼		480.00		Jeuuc	αοπ (φ.	20.00 BI-	veekiy)		
Full Name (Last, First, Middle Initial) B. JAMES BECKER			Dat	e of F	Receipt				
Mailing Address 378 FERNDALE ROAD V		Zip Code		M L1	3	D / 30	y y y 2013		
City WAYZATA	State MN	55391-1559					24451317 this Perio		
FEC ID number of contributing federal political committee.	С				7	7)7.70	
Name of Employer United HealthCare Services Inc	Occupation SVP Ops	1							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3692.40	P/R [Deduc	tion (\$^	153.85 Bi	Weekly)		
Full Name (Last, First, Middle Initial) C. JAMES COLEMAN			Dat	e of F	Receipt				
Mailing Address 4135 ETHAN DRIVE				™ I 1		D / 30	y y y 2013	Y	
City EAGAN	State MN	Zip Code 55123-4908					024452317 this Perio		
FEC ID number of contributing federal political committee.	C				3	. ,		00.00	
Name of Employer	Occupation	1							
United HealthCare Services Inc Receipt For:	SVP Empl								
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2400.00	P/R	Deduc	tion (\$	100.00 Bi	-Weekly)		
SUBTOTAL of Receipts This Page (optiona	l)				7		54	7.70	
TOTAL This Period (last page this line num	ber only)				7				

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			Detailed Summary Page		11a		11b	11	с	12		
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	y information copied from such Reports and S for commercial purposes, other than using the											
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)									
A.	Full Name (Last, First, Middle Initial) JAMES DONOVAN				Date of	Re	ceipt					
	Mailing Address 2816 MONTREAUX DRIVE				M M	/	. 30	/	Y	ү – ү 2013	Y	1
	City	State	Zip Code		Trans	acti	ion ID :	PR24	40244	53317	763	
	FRISCO	TX	75034-1855	/	Amount	t of	Each R	leceip	ot this	Peric	d	
	FEC ID number of contributing federal political committee.	С					7		,	13	30.0	0
	Name of Employer	Occupation										
	United HealthCare Services Inc	SVP Bus D	ev Mktg									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify)		1560.00] P.	/R Ded	uctio	on (\$65.	.00 Bi	i-Wee	kly)		
в.	Full Name (Last, First, Middle Initial)				Date of	Re	ceipt					
	Mailing Address 11688 TANGLEWOOD DRIVE	1			M M	/	30	/	Y	ү ү 2013	Y	
	City	State	Zip Code	Transaction ID : PR240244563176							63	
	EDEN PRAIRIE	MN	55347-4726	/	Amount	t of	Each R	leceip	ot this	Peric	d	
	FEC ID number of contributing federal political committee.	С					7		,	38	86.00	כ
	Name of Employer United HealthCare Services Inc	Occupation Bus Segme										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4632.00	P/	/R Ded	uctic	on (\$193	3.00 E	3i-We	ekly)		
c.	Full Name (Last, First, Middle Initial)				Date of	Re	ceipt					
	Mailing Address 2208 ELM AVENUE				M M 11	/	30	/		y y 2013	Y]
		State CA	Zip Code				ion ID :					
	MANHATTAN BEACH	CA	90266-2809	/	Amount	t of	Each R	leceip	ot this	Perio	d	
	FEC ID number of contributing federal political committee.	С					3		,	6	60.0	0
	Name of Employer	Occupation										
	United HealthCare Services Inc	Dir Regl Aff	S									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Other (specify)		720.00	P	/R Ded	uctio	on (\$30	.00 B	i-Wee	⊧kly)		
s	UBTOTAL of Receipts This Page (optional)						,		,	57	6.00)
Т	OTAL This Period (last page this line number	only)	•••••••				7		7	_		

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TEMIZED RECEIPTS		Use separate schedule(s)	(chec	k only	one)			
		for each category of the Detailed Summary Page	×	F	11b	11c	12	
Any information copied from such Reports and or for commercial purposes, other than using			person fo					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (L	Jnited for Health)						
Full Name (Last, First, Middle Initial)			Da	ate of	Receipt			
Mailing Address 4 GRAMERCY PARK WES 	Г			11	/ D 30		2013	Y
City NEW YORK	State NY	Zip Code 10003-1717				: PR24024 Receipt th		
FEC ID number of contributing federal political committee.	С				7		200	0.00
Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼	Occupation Regn Pres Aggregate	Year-to-Date ▼ 2400.00	P/F	Dedu	ction (\$10	00.00 Bi-W	√eekly)	
Full Name (Last, First, Middle Initial) CORY ALEXANDER Mailing Address 4203 BRADLEY LANE				M	Receipt		2013	Y
City CHEVY CHASE	State MD	Zip Code 20815-5234				: PR24054	42883176	-
FEC ID number of contributing federal political committee.	C	20013-3234	Ar	nount	of Each	Receipt th	384	_
Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify)	Occupation VP Gov't Re Aggregate	Year-to-Date ▼ 4615.20	P/R	Deduo	ction (\$19	92.30 Bi-W	/eekly)	
Full Name (Last, First, Middle Initial)			Da	ate of	Receipt			
Mailing Address 406 LEWELEN CIRCLE			Γ	11	/ D 30		y y 2013	Y
City ENGLEWOOD	State NJ	Zip Code 07631-2021				: PR2405 Receipt th		
FEC ID number of contributing federal political committee.	С				7	7	192	2.30
Name of Employer United HealthCare Services Inc Beceint For:	Occupation Optum Exec							
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1296.90	P/F	Dedu	ction (\$90	6.15 Bi-We	ekly)	
Receipt For: Primary General	Aggregate	Year-to-Date ▼ 1296.90	4	2 Dedu	ction (\$9	6.15 Bi	-We	-Weekly) 776

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)			
		for each category of the Detailed Summary Page	X 11a 11b		12	_
Any information copied from such Reports a						
or for commercial purposes, other than usin	g the name and a	ddress of any political committee	to solicit contribution	is from such	1 committe	е.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	Jnited for Health)				
Full Name (Last, First, Middle Initial) PETER WALSH			Date of Receipt	t		
Mailing Address 495 HIGHCROFT ROAD				D / Y 30	2013	Y
City WAYZATA	State MN	Zip Code 55391-1548	Transaction I Amount of Each			
FEC ID number of contributing federal political committee.	C			7	194.0	00
Name of Employer United HealthCare Services Inc Receipt For: Primary General		Gen Counsel Year-to-Date ▼	P/R Deduction (\$	\$97.00 Bi-W€	ekly)	
Full Name (Last, First, Middle Initial)	L	2328.00				
B. KAREN SAELENS Mailing Address 105 N FLORENCE AVE					2013	Ŷ
City LITCHFIELD PARK	State AZ	Zip Code 85340-4424	Transaction II Amount of Each			_
FEC ID number of contributing federal political committee.	С				40.0	00
Name of Employer United HealthCare Services Inc	Occupation Exec Dir	1				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 480.00	P/R Deduction (\$	20.00 Bi-We	ekly)	
Full Name (Last, First, Middle Initial) C. KATHLYN WEE	I		Date of Receipt	t		
Mailing Address 2225 46TH ST NW				30 / Y	2013	Y
City WASHINGTON	State DC	Zip Code 20007-1032	Transaction I Amount of Each			
FEC ID number of contributing federal political committee.	C			- 7	40.0	00
Name of Employer	Occupation	l				
United HealthCare Services Inc	SVP State	SIs OptumI				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 460.00	P/R Deduction (\$	320.00 Bi-We	ekly)	
SUBTOTAL of Receipts This Page (optiona	al)				274.0	10
TOTAL This Period (last page this line num	nber only)			7		

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page		1 1a		11	b	11c	1:	2	
			, ,		13		14		15	1	-	17
	y information copied from such Reports and for commercial purposes, other than using th											
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (l	Jnited for Health)									
Α.	Full Name (Last, First, Middle Initial) GAIL KOZIARA BOUDREAUX				Date of	Re	cei	pt				
	Mailing Address 841 HOLDEN COURT				M M 1_1	/		30	/ Y	y 201		Y
	City	State	Zip Code		Trans	acti	ion	ID : I	PR2437	11953 [.]	1763	
	LAKE FOREST	IL	60045-4913	_ :	Amount	of	Ea	ch Re	eceipt tl	nis Per	riod	
	FEC ID number of contributing federal political committee.	С				_	7		7		384.6	62
	Name of Employer	Occupation										
	United HealthCare Services Inc	EVP Gr Pre	s UHC									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		4615.44] ^P	P/R Ded	uctio	on ((\$192	.31 Bi-V	Veekly)	
<u></u> В.	Full Name (Last, First, Middle Initial)				Date of	Re	cei	pt				
	Mailing Address 809 GADSDEN PLACE				M M	1	Γ	30	/ Y	2013		Y
	City	State	Zip Code			acti	on		R2437	-		
	FRANKLIN	TN	37067-1304		Amount	of	Ea	ch Re	eceipt tl	nis Per	riod	
	FEC ID number of contributing federal political committee.	С					7		- 7		20.0	00
	Name of Employer United HealthCare Services Inc	Occupation Plan Pres										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P	/R Ded	uctic	on (\$10.0	0 Bi-W	eekly)		
с.	Full Name (Last, First, Middle Initial)				Date of	Re	cei	pt				
	Mailing Address 7649 EARLINGTON PARKV	/AY			M M	/	ľ	30	/ Y	2013		Y
	City	State	Zip Code		Trans	acti	ion	ID : I	PR2437	11973	1763	6
	DUBLIN	OH	43017-3424	·	Amount	of	Ea	ch Re	eceipt tl	nis Per	riod	
	FEC ID number of contributing federal political committee.	С					7				40.	00
	Name of Employer	Occupation		\neg								
	United HealthCare Services Inc	Dir Mktg Bu	is Dev									
	Receipt For:	Aggregate	Year-to-Date ▼						_			
	Primary General Other (specify) ▼		480.00] ^F	P/R Ded	uctio	on	(\$20.0	00 Bi-W	eekly)		
s	UBTOTAL of Receipts This Page (optional)			•			7		- 7	4	144.6	62

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		Detailed Summary Page		11a		11b	11c	12	
				13		14	15	16	17
Any information copied from such Reports a or for commercial purposes, other than usin	nd Statements ma g the name and a	ay not be sold or used by any p ddress of any political committee	erson f e to sol	or the licit cor	purp htrib	pose of outions f	soliciting	contribut committ	ions ee.
NAME OF COMMITTEE (In Full)	g ino namo ana o								
UnitedHealth Group Incorpo	rated PAC (I	United for Health)							
Full Name (Last, First, Middle Initial) A. ANA FUENTEVILLA				Date of	Re	eceipt			
Mailing Address 4815 NORTH CAMINO E	SCUELA			M M	/	30) / Y	ү ү 2013	Y
City	State	Zip Code		Trans	acti	ion ID :	PR24371	1983176	3
TUCSON	AZ	85718-5913	A	Amount	of	Each R	leceipt thi	is Period	
FEC ID number of contributing federal political committee.	C					7	7	20	.00
Name of Employer	Occupation	1	-						
United HealthCare Services Inc	NA Med Di	r/CMO							
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		240.00	P/	'R Ded	uctio	on (\$10.	.00 Bi-We	ekly)	
Full Name (Last, First, Middle Initial) B. WILLIAM HAGAN	I			Date of	Re	eceipt			
Mailing Address 6536 E GREYTHORN DF	RIVE			м м 11	/	30	/ Y	2013	Y
City	State	Zip Code					PR24371		3
SCOTTSDALE	AZ	85266-6761	A	Amount	of	Each R	leceipt thi	is Period	
FEC ID number of contributing federal political committee.	С				_	,	7	500.	00
Name of Employer United HealthCare Services Inc	Occupation Chief Grow								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	P/	R Dedu	uctio	on (\$250).00 Bi-W	eekly)	
Full Name (Last, First, Middle Initial) C. RITA JOHNSON-MILLS	· · · · · · · · · · · · · · · · · · ·		[Date of	Re	eceipt			
Mailing Address 9727 SKY LANE				м м 11	1	30) / Y	2013	Y
	State	Zip Code					PR24371		3
EDEN PRAIRIE	MN	55347-3814	A	Amount	of	Each R	leceipt thi	is Period	
FEC ID number of contributing federal political committee.	C					7	3	30	.00
Name of Employer	Occupation	l							
United HealthCare Services Inc	VP Ops								
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		360.00	P/	/R Ded	ucti	on (\$15	.00 Bi-We	ekly)	
SUBTOTAL of Receipts This Page (optiona	al)							550.	00
TOTAL This Period (last page this line nun			- i			<u>, , , , , , , , , , , , , , , , , , , </u>			

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or for commercial purposes, other than usin	and Statements may not be sold or used by any p ng the name and address of any political committee	
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	prated PAC (United for Health)	
Full Name (Last, First, Middle Initial) A. DAVID THOMAS		Date of Receipt
Mailing Address 841 LAKE ROAD	State Zip Code	11 30 Y Y Y Y Y 11 30 2013
BRADFORDWOODS	PA 15015-1331	Transaction ID : PR2437120431763 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼	Occupation Deputy Gen Counsel Aggregate Year-to-Date ▼ 240.00	P/R Deduction (\$10.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) B. JACK WEISS		Date of Receipt
Mailing Address 6245 NORTH 75 STREE	ET	11 30 2013
City SCOTTSDALE	StateZip CodeAZ85250-4621	Transaction ID : PR2437120531763 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer United HealthCare Services Inc	Occupation Bus Segment CMO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$25.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) C. PAUL BALTHAZOR		Date of Receipt
Mailing Address 9013 FARNSWORTH A		11 30 / Y Y Y Y Y
City BROOKLYN PARK	State Zip Code MN 55443-1754	Transaction ID : PR2437120731763 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	120.00
Name of Employer	Occupation	
United HealthCare Services Inc	Bus Segment CFO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1440.00	P/R Deduction (\$60.00 Bi-Weekly)
	nal)	190.00

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			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 11
or	for commercial purposes, other than using the	Statements ma e name and a	ay not be sold or used by any poddress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)	
	Full Name (Last, First, Middle Initial) KELLY CLARK			Date of Receipt
	Mailing Address 13540 BIRCHWOOD AVENU			M = M / D = D / Y = Y = Y Y 11 30 2013
	City	State MN	Zip Code 55068-3561	Transaction ID : PR2437121331763
	ROSEMOUNT FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer United HealthCare Services Inc	Occupation Bus Segme		
	Receipt For: Primary General Other (specify) V		Year-to-Date ▼ 923.04	P/R Deduction (\$38.46 Bi-Weekly)
	Full Name (Last, First, Middle Initial)			Date of Receipt
	Mailing Address 10550 PINNACLE WAY			11 30 2013
	City WOODBURY	State MN	Zip Code 55129-4282	Transaction ID : PR2437121531763 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		78.00
	Name of Employer United HealthCare Services Inc	Occupation VP Finance		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 936.00	P/R Deduction (\$39.00 Bi-Weekly)
	Full Name (Last, First, Middle Initial) JOHN COSGRIFF			Date of Receipt
	Mailing Address 1837 SUMMIT LANE			11 30 / Y Y Y Y Y
	City MENDOTA HEIGHTS	State MN	Zip Code 55118-4137	Transaction ID : PR2437121631763
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation		-
	United HealthCare Services Inc	Chief of Sta	ff	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 480.00	P/R Deduction (\$20.00 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)			194.92

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ILIVILLED RECEIPIS		for each category of the Detailed Summary Page	X 11a	11b	11c	12					
Any information copied from such Reports and	Statements ma	av not be sold or used by any p	erson for the	14 purpose of so	15 diciting c	16 Intributi	17 ions				
or for commercial purposes, other than using th											
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	Jnited for Health)									
Full Name (Last, First, Middle Initial) PETER RAINEY			Date of Receipt								
Mailing Address 3115 WEST 47 STREET			1_1	/ D D 30		2013	Y				
City MINNEAPOLIS	State MN	Zip Code 55410-1857	Transaction ID : PR243712753176 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С			7		230.	00				
Name of Employer United HealthCare Services Inc Receipt For:	Occupation VP Finance		_								
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2760.00	P/R Ded	uction (\$115.0	00 Bi-Wee	ekly)					
Full Name (Last, First, Middle Initial) B. ROBIN LIPPERT			Date of	Receipt							
Mailing Address 522 4 STREET SOUTH EAS			M M	/ D D 30		013	Y				
City WASHINGTON	State DC	Zip Code 20003-4212		action ID : PF							
FEC ID number of contributing federal political committee.	С					384.6	62				
Name of Employer United HealthCare Services Inc	Occupation Dir Govt Re										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.44	P/R Dedu	uction (\$192.3	31 Bi-Wee	kly)					
Full Name (Last, First, Middle Initial) C. STEPHEN HEYMAN			Date of	Receipt							
Mailing Address 5300 SHERRILL AVENUE			M M 11	/ D D 30		2013	Y				
City CHEVY CHASE	State MD	Zip Code 20815-3720		action ID : Pl			3				
FEC ID number of contributing federal political committee.	С			7		200.	00				
Name of Employer	Occupation										
United HealthCare Services Inc Receipt For:	VP Govt Re	-									
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2400.00	P/R Ded	uction (\$100.0	00 Bi-Wee	ekly)					
SUBTOTAL of Receipts This Page (optional)				· · · · ·		814.6	32				

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			Detailed Summary Page		-		11t	- H	11c			
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	/ information copied from such Reports and S for commercial purposes, other than using the											
	NAME OF COMMITTEE (In Full)											
	UnitedHealth Group Incorporate	d PAC (l	Jnited for Health)									
	Full Name (Last, First, Middle Initial) DEWAYNE ULLSPERGER				Date of	Re	eceip	ot		_		
_	Mailing Address 4440 AVONDALE				M M 1_1	/	D	30	/ Y)13	Y
	City	State	Zip Code		Trans	acti	ion	ID : F	PR2444	5613	31763	3
-	MINNETONKA	MN	55345-2754	/	Amount	of	Eac	h Re	ceipt th	nis P	eriod	
	FEC ID number of contributing federal political committee.	С					7		7		2500.	00
Ī	Name of Employer	Occupation										
	United HealthCare Services Inc	VP Actuary										
Ī	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		2500.00	P	/R Ded	uctio	on (\$250	0.00 Bi-	Wee	kly)	
	Full Name (Last, First, Middle Initial) JAMES MURPHY			[Date of	Re	eceip	ot				
I	Mailing Address 113 CANNON CT W				M M	/	D	30	/ Y		ү 13	Y
(City	State	Zip Code		Trans	acti	ion l	D : P	R2444	5614	31763	;
	PONTE VEDRA BEACH	FL	32082-3954	A	Amount	of	Eac	h Re	ceipt th	nis P	eriod	
	FEC ID number of contributing federal political committee.	С					,		- 7		2500.	00
	Name of Employer United HealthCare Services Inc	Occupation Optum Exec										
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2500.00	P/	'R Dedi	uctio	on (S	\$2500).00 Bi-	Wee	kly)	
	Full Name (Last, First, Middle Initial)				Date of	Re	eceip	ot				
-	Mailing Address 19705 LAKEVIEW AVENUE				M M 11	/	D	30	/ Y		13	Y
(State	Zip Code						PR2445			3
-	EXCELSIOR	MN	55331-9351	/	Amount	of	Eac	h Re	ceipt th	nis P	eriod	
	FEC ID number of contributing federal political committee.	С				_	7		- 7		384.	60
Ī	Name of Employer	Occupation		\neg								
	United HealthCare Services Inc	Optum Exe	C									
Ī	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		4615.20	P.	/R Ded	uctio	on (\$192	.30 Bi-V	Veek	ly)	
รเ	JBTOTAL of Receipts This Page (optional)						7				5384.0	60

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TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than	ports and Statements may not be sold or used by any per n using the name and address of any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	orporated PAC (United for Health)	
Full Name (Last, First, Middle Initia DONALD LANGER	l)	Date of Receipt
Mailing Address 5110 OAK RAMBL		11 30 / Y Y Y Y Y
City	State Zip Code	Transaction ID : PR2445015431763
KATY FEC ID number of contributing	TX 77494-1971	Amount of Each Receipt this Period
federal political committee.		40.00
Name of Employer	Occupation	
United HealthCare Services Inc	Plan Pres	_
Receipt For:	Aggregate Year-to-Date ▼	
Other (specify)	480.00	P/R Deduction (\$20.00 Bi-Weekly)
Full Name (Last, First, Middle Initia B. NANCY LIND	l)	Date of Receipt
Mailing Address 2703 NORTHVIEW	/ LANE	11 30 _2013 _
City	State Zip Code	Transaction ID : PR2445016231763
CEDAR FALLS	IA 50613-1655	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer United HealthCare Services Inc	Occupation Exec Dir	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00	P/R Deduction (\$14.00 Bi-Weekly)
Full Name (Last, First, Middle Initia C. AMY ADLINGTON SHKA		Date of Receipt
Mailing Address 4428 XERXES AV	ENUE S	11 30 2013
City	State Zip Code	Transaction ID : PR2445016431763
MINNEAPOLIS	MN 55410-1417	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	833.34
Name of Employer	Occupation	
United HealthCare Services Inc	VP Human Capital	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1666.68	P/R Deduction (\$416.67 Bi-Weekly)
	pptional)	901.34

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)
ILIVIIZED RECEIPIO		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 11
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incor	porated PAC (l	Jnited for Health)	
Full Name (Last, First, Middle Initial) A. LILLI ANN HIRSH			Date of Receipt
Mailing Address 7379 DEVIN LANE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City SHAKOPEE	State MN	Zip Code 55379-7029	Transaction ID : PR2445016731763 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		28.00
Name of Employer United HealthCare Services Inc Receipt For: Primary General		oital Partner Mgr Year-to-Date ▼	P/R Deduction (\$14.00 Bi-Weekly)
Other (specify) ▼ Full Name (Last, First, Middle Initial)		336.00]
B. LENYS ALCOREZA Mailing Address 809 SANTA FE COU			Date of Receipt
City VIRGINIA BEACH	State VA	Zip Code 23456-6744	Transaction ID : PR2445016831763 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼	Occupation VP SIs Mktg Aggregate		P/R Deduction (\$10.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) MARK DUHAIME			Date of Receipt
Mailing Address 5781 RUBY DRIVE			11 30 / Y Y Y Y
City TROY	State MI	Zip Code 48085-3922	Transaction ID : PR2445016931763 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		502.58
Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify)	Occupation VP Info Tec Aggregate		P/R Deduction (\$251.29 Bi-Weekly)
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SCHEDULE A (FEC Form 3X) _ _ _ _ _

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or for commercial purposes, other than using										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (United for Health)								
Full Name (Last, First, Middle Initial) A. DAVID SIEGEL			Date o	f Receipt						
Mailing Address 264 LAKEWOOD DRIVE			M M	/ D D 30	/ Y	2013	Y			
City BLOOMFIELD HILLS	State MI	Zip Code 48304-3531		01713176: is Period	3					
FEC ID number of contributing federal political committee.	С			7	3	91.	.26			
Name of Employer United HealthCare Services Inc Receipt For:	Occupation Med Dir Aggregate	n Year-to-Date ▼								
Other (specify) ▼		363.78	P/R Ded	luction (\$45.6	3 Bi-We	ekly)				
Full Name (Last, First, Middle Initial) B. EILEEN LIVERANI			Date o	f Receipt						
Mailing Address 100 BOSTOCK ROAD	0		11	/ D D 30	/ Y	2013	Y			
City SHOKAN	State NY	Zip Code 12481-5400		action ID : P t of Each Re			\$			
FEC ID number of contributing federal political committee.	С				,	55.	40			
Name of Employer United HealthCare Services Inc	Occupation Dir Cust Se									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 664.80	P/R Ded	uction (\$27.7	0 Bi-We	ekly)				
Full Name (Last, First, Middle Initial) C. DANIEL KRAJNOVICH			Date o	f Receipt						
Mailing Address 9958 BUTTONDOWN LA	NE		M M	/ D D 30	/ Y	y y 2013	Y			
City ZIONSVILLE	State IN	Zip Code 46077-8135		saction ID : F			3			
FEC ID number of contributing federal political committee.	С			7	,		.00			
Name of Employer	Occupation	1	_							
United HealthCare Services Inc Receipt For:	Hith Plan C		_							
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 480.00	P/R Dec	luction (\$20.0	0 Bi-We	ekly)				
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			ddress of any political committee									
	MITTEE (In Full)											
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	t, First, Middle Initial)											
A. JUNE THIEL					Date of	Re	· ·	_				
Mailing Address	6245 WAKEFIELD COU	JKI			M M	1	30		2013	Y		
City		State	Zip Code		Trans	acti			16753176	3		
SHAKOPEE		MN	55379-7091	/	Amount	of	Each F	Receipt th	nis Period			
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United HealthCa Receipt For:	are Services Inc	SVP Humai	•									
Primary	General	Aggregate	Year-to-Date ▼	P	/R Dedi	uctio	on (\$13	.80 Bi-We	eeklv)			
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	3918 HAVEN ROAD				M M	/	DI) / Ү	Y Y	Y		
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federal political	0	C				_	7	7	100	.00		
Name of Emplo		Occupation										
United HealthCa	are Services Inc	Bus Segme	nt Gen Counsel									
Receipt For:	Canaral	Aggregate	Year-to-Date ▼									
Other (sp	General ecify) ▼		1200.00	P/	R Dedu	uctic	on (\$50	.00 Bi-We	ekly)			
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Full Name (Las C. LARRY RE	t, First, Middle Initial)			r	Date of	Po	ooint					
	5 DOVE LANE			- '		110) / Y	YY	Y		
					11		30		2013			
City ANDOVER		State MA	Zip Code 01810-2845						16813176			
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federal political	0	С					7	7	384	4.60		
Name of Emplo	over	Occupation										
	are Services Inc	EVP UHG										
Receipt For:		I	Year-to-Date ▼									
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11			for each category of the Detailed Summary Page		< 11a 13		11b 14	11c	12	Г	17		
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$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ted PAC (I	Jnited for Health)										
Α.	Full Name (Last, First, Middle Initial) DAVID ORBUCH				Date of	f Re	ceipt						
	Mailing Address 3370 SYCAMORE LANE				M M	/	30) / Y	2013		1		
	City PLYMOUTH	State MN	Zip Code 55441-2229	Transaction ID : PR2460168231763 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С					7		5	576.6	6		
	Name of Employer United HealthCare Services Inc	Occupation Optum Exe											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1923.32]	P/R Ded	uctio	on (\$28	8.33 Bi-V	Veekly))			
в.	Full Name (Last, First, Middle Initial) ERIC WEXLER				Date of	f Re	ceipt						
	Mailing Address 7220 WILLOW OAK DR	-	Zip Code		M M	/	30) / Y	y 2013]		
	City WEST BLOOMFIELD	State MI				-	PR24637 Receipt th						
	FEC ID number of contributing federal political committee.	С	48324-3081		64.0	0							
	Name of Employer United HealthCare Services Inc	Occupation Bus Segme	nt Gen Counsel										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 768.00	P	P/R Ded	uctio	on (\$32.	00 Bi-We	ekly)				
с.	Full Name (Last, First, Middle Initial) KAREN WALKOWSKI				Date of	f Re	ceipt						
	Mailing Address 6359 COUNTRY ROAD	-			^M 11	/	30		y 2013				
	City EDEN PRAIRIE	State MN	Zip Code 55346-1342	_			-	PR2463					
	FEC ID number of contributing federal political committee.	С					7			40.0	0		
	Name of Employer United HealthCare Services Inc	Occupation Dir Bus Pro	cess										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 480.00] F	P/R Ded	luctio	on (\$20	.00 Bi-We	eekly)				
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	d PAC (l	Jnited for Health)	
A. Full Name (Last, First, Middle Initial) PETER GILL Mailing Address 8380 MONTGOMERY COURT			Date of Receipt
City	State	Zip Code	11302013 Transaction ID : PR2463724631763
EDEN PRAIRIE	MN	55347-1402	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		2500.00
Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼	Occupation VP Corp De Aggregate		P/R Deduction (\$2500.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) B. SUE SCHICK			Date of Receipt
Mailing Address 714 GREYTHORNE ROAD			11 30 2013
City WYNNEWOOD	State PA	Zip Code 19096-2511	Transaction ID : PR2480620531763 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer United HealthCare Services Inc	Occupation Hlth Plan C		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3000.00	P/R Deduction (\$125.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) C. CHRISTOPHER ABBOTT			Date of Receipt
Mailing Address W154N6076 HICKORY HOLLO	OW CT		11 30 2013
City MENOMONEE FALLS	State WI	Zip Code 53051-5891	Transaction ID : PR2484541531763 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		28.00
Name of Employer	Occupation	l	
United HealthCare Services Inc	Regn Exec		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P/R Deduction (\$14.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)		r	2778.00

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

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)	
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NAME OF COMMITTEE (In Full)				
> UnitedHealth Group Incor	porated PAC (United for Health)		
Full Name (Last, First, Middle Initial)				
A. LILLIAN HECKMAN			Date of Receipt	
Mailing Address 552 DEER LAKE CIR	CLE		M M / D D / Y 1.1 30	2013
City	State	Zip Code	Transaction ID : PR24845	
BLUE BELL	PA	19422-1371	Amount of Each Receipt th	is Period
FEC ID number of contributing	С			60.00
federal political committee.	U			
Name of Employer	Occupatior	1		
United HealthCare Services Inc	Dir Proj Mg	mt		
Receipt For:	Aggregate	Year-to-Date ▼		
Other (specify)		720.00	P/R Deduction (\$30.00 Bi-We	ekly)
		4) · · · · · · · · · · · · · · · · · · ·		
Full Name (Last, First, Middle Initial) B. MARK PHILLIPS			Date of Receipt	
Mailing Address 1760 LUCY RIDGE C	Ţ		M M / D D / Y	Y Y Y
<u></u>	Otata	Zin Oada	11 30	2013
City CHANHASSEN	State MN	Zip Code 55317-7661	Transaction ID : PR24845	
FEC ID number of contributing		333177001	Amount of Each Receipt the	is Period
federal political committee.	C		7 7	672.40
Name of Employer United HealthCare Services Inc	Occupatior	1		
Receipt For:	SVP SIs		_	
Primary General	Aggregate	Year-to-Date ▼	D/D Doduction (\$226.20 Di W/	
Other (specify)		, 1827.60	P/R Deduction (\$336.20 Bi-W	eekiy)
Full Name (Last, First, Middle Initial) C. DANIEL TROPEANO			Date of Receipt	
Mailing Address 270 RAVENSCLIFF	RD		·	Y Y Y
			11 30	2013
City SAINT DAVIDS	State PA	Zip Code 19087-4732	Transaction ID : PR24845	
	17	19007-4732	Amount of Each Receipt the	is Period
FEC ID number of contributing federal political committee.	C			20.00
Name of Employer	Occupation	1	_	
United HealthCare Services Inc	VP Gen Me	gmt		
Receipt For:	Aggregate	Year-to-Date ▼		
Other (specify) ▼		, 240.00	P/R Deduction (\$10.00 Bi-We	ekly)
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	NAME OF COMMITTEE (In Full)			5 10 30			utions	nom suc					
\rangle	UnitedHealth Group Incorporate	ed PAC (l	United for Health)										
Α.	Full Name (Last, First, Middle Initial) JERI KUBICKI				Date of Receipt								
	Mailing Address 7659 COLDSTREAM DRIVE			11 30 2013									
	City CINCINNATI	State OH	Zip Code 45255-3932						69783176 nis Period				
	FEC ID number of contributing federal political committee.	С					,		900	0.00			
	Name of Employer United HealthCare Services Inc	Occupation VP Govt Re	1										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4100.00] P	P/R Dedu	uctio	on (\$45	i0.00 Bi-V	Veekly)				
B.	Full Name (Last, First, Middle Initial) THOMAS MANDERFELD				Date of	Re	ceipt						
	Mailing Address 4835 PENN AVENUE SOUTH		Zin Oada		M M	/	30		2013				
	City MINNEAPOLIS	State MN	Zip Code 55419-5258				-		69793176 nis Period	-			
	FEC ID number of contributing federal political committee.	С			Amount		,	7		.00			
	Name of Employer United HealthCare Services Inc	Occupation VP Gen Mg	mt										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 960.00	P	/R Dedu	ıctic	on (\$40	.00 Bi-We	eekly)				
с.	Full Name (Last, First, Middle Initial)				Date of	Re	ceipt						
	Mailing Address 1008 LEXINGTON AVE N				M M 11	/	D 30		2013	Y			
	City NEW PRAGUE	State MN	Zip Code 56071-2027						69813176				
	FEC ID number of contributing federal political committee.	С			Amount	U				0.00			
	Name of Employer	Occupation											
	United HealthCare Services Inc	Dir Underw	riting										
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 240.00]	P/R Ded	uctio	on (\$10).00 Bi-W	eekly)				
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	y information copied from such Reports and for commercial purposes, other than using th													
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (l	Jnited for Health)											
Α.	Full Name (Last, First, Middle Initial) DIRK MCMAHON			[Date of Receipt									
	Mailing Address 60 WILDHURST ROAD			11 30 2013										
	City EXCELSIOR	State MN	Zip Code 55331-8461							4570317				
	FEC ID number of contributing federal political committee.	С			Amouni	t of	Eac	n Re	ceipt th	nis Perio 20	od 00.00			
	Name of Employer	Occupation												
	United HealthCare Services Inc Receipt For:	Bus Segme		_										
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2400.00	P.	/R Ded	luctio	ion (S	\$100.	00 Bi-W	/eekly)				
В.	Full Name (Last, First, Middle Initial) KATHRYN SULLIVAN				Date of	f Re	eceip	ot						
	Mailing Address 530 N LAKE SHORE DR # 2	309			11 30 Y Y Y Y Y Y 11 30 2013									
	City CHICAGO	State IL	Zip Code 60611-7435		Transaction ID : PR2491457531763 Amount of Each Receipt this Period 194.00									
	FEC ID number of contributing federal political committee.	С												
	Name of Employer United HealthCare Services Inc	Occupation Regn CEO												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2328.00	P/	'R Ded	uctio	on (S	\$97.00	0 Bi-We	ekly)				
с.	Full Name (Last, First, Middle Initial)				Date of	f Re	eceip	ot						
	Mailing Address 4 STANLEY TERRACE				м м 11	/	D	30	/ Y	2013	Y			
	City DOVER	State NJ	Zip Code 07801-1605							641531				
	FEC ID number of contributing federal political committee.	C		/	Amount	t of	Eac	ch Re∘	ceipt th	nis Perio	od 30.00			
	Name of Employer	Occupation					,		,					
	United HealthCare Services Inc	VP IT												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 360.00	P.	/R Ded	lucti	ion (\$15.0	0 Bi-We	ekly)				
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Any information copied from such Report	s and Statements ma		erson for the		14 ose of s	15 soliciting	16 contribut	17 ions			
or for commercial purposes, other than u											
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorp	oorated PAC (I	United for Health)									
Full Name (Last, First, Middle Initial) KARA SMITH			Date of Receipt								
Mailing Address 610 CRESTWOOD D	RIVE		1 <u>1</u>	2013	Y						
City ALEXANDRIA	State VA	Zip Code 22302-2533					7533176 is Period	3			
FEC ID number of contributing federal political committee.	C				y	7	557.	66			
Name of Employer United HealthCare Services Inc	Occupation Dir Govt Re										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4442.28	P/R Dec	ductio	n (\$278	.83 Bi-W	(eekly)				
Full Name (Last, First, Middle Initial) B. <u>HYLLIUS EDWARDS</u>	· · · · · · · · · · · · · · · · · · ·		Date o	of Rec	ceipt						
Mailing Address PO BOX 44246	Otata	Zin Oode	11 1		30		2013				
City DENVER	State CO	Zip Code 80201-4246					00431763 is Period	3			
FEC ID number of contributing federal political committee.	C				,		100.	00			
Name of Employer United HealthCare Services Inc	Occupation Dir Govt Re		_								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1200.00	P/R Dec	Juctio	n (\$50.0	0 Bi-We	ekly)				
Full Name (Last, First, Middle Initial) C. PATRICIA PURDY			Date o	of Rec	ceipt						
Mailing Address 7417 LYNNHURST S	TREET		M N 11	1	D D D 30	/ Y	2013	Y			
City CHEVY CHASE	State MD	Zip Code 20815-3101					30063176	3			
FEC ID number of contributing federal political committee.	C			_	,		266	.66			
Name of Employer	Occupation	1									
United HealthCare Services Inc Receipt For:	Dir Govt Re	-									
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 933.31	P/R Dec	ductio	on (\$133	.33 Bi-W	/eekly)				
SUBTOTAL of Receipts This Page (optic	,			-	7	- 7	924.	32			
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NAME OF COMMITTEE (In Full)								
> UnitedHealth Group Incorpo	prated PAC (I	Jnited for Health)						
Full Name (Last, First, Middle Initial)								
A. JOELLE TIERNEY			Date c		•	_		
Mailing Address 5710 TAYCHOPERA RI			11	1 /	30	/ Y	2013	Y
City	State	Zip Code		sactio		PR25413	80073176	3
MADISON	WI	53705-1020	Amour	nt of E	Each Re	ceipt th	is Period	
FEC ID number of contributing	С						28.	.00
federal political committee.	0			-		7		
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Receipt For:	Aggregate	Year-to-Date ▼		d 1 .	~ (@4 4 ~			
Other (specify)		336.00	P/R Dec	ductio	n (\$14.0	IO BI-VVE	екіу)	
		7 7 7						
Full Name (Last, First, Middle Initial) B. JOHN VERSAGGI			Date o	of Rec	eipt			
Mailing Address 800 ALBANY AVENUE			M N	/	30	/ Y	2013	Y
City	State	Zip Code	Trans	sactic	on ID : P	R25413	00831763	3
ALEXANDRIA	VA	22302-3501	Amour	nt of E	Each Re	ceipt th	is Period	
FEC ID number of contributing federal political committee.	С				,	9	192.	32
Name of Employer	Occupation							
United HealthCare Services Inc	Dir Govt Re							
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Other (specify)		2307.84	P/R Dec	ductio	n (\$96.1	6 Bi-We	ekly)	
Full Name (Last, First, Middle Initial) C. BRENDAN HOSTETLER			Date o	of Rec	eipt			
Mailing Address 2309 W WINNEMAC AV	/E		M N		D D	/ Y	Y Y	Y
		Zie Oad-	11		30		2013	
City CHICAGO	State IL	Zip Code 60625-1817					54193176	3
FEC ID number of contributing			Amour	IL OF E	Lacii Re	ceipt th	is Period	_
federal political committee.	С						60	.00
Name of Employer	Occupation	1						
United HealthCare Services Inc	Govt Rel D							
Receipt For:	Aggregate	Year-to-Date ▼	_					
Primary General			P/R De	ductio	n (\$30.0	00 Bi-We	ekly)	
Other (specify)		720.00						
							280.	32
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	NAME OF COMMITTEE (In Full)									
	UnitedHealth Group Incorpora	ted PAC (I	Jnited for Health)							
	Full Name (Last, First, Middle Initial) RICHARD RAMSAY			Date	e of F	leceip	ot			
	Mailing Address 543 E LURAY AVE				M 1	/ D	30	/ Y	2013	Y
	City	State	Zip Code			tion		R2542	5422317	63
	ALEXANDRIA	VA	22301-1605	Amo	ount o	f Eac	h Re	ceipt th	is Period	ł
	FEC ID number of contributing federal political committee.	С				7		y	10	0.00
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	Full Name (Last, First, Middle Initial)			Date	e of F	Receip	ot			
	Mailing Address 4226 40TH STREET NORT	Н			[™]	/ D	30	/ Y	2013	Y
	City	State	Zip Code						54233170	
-	ARLINGTON	VA	22207-4610	Amo	ount o	f Eac	h Red	ceipt th	is Period	t k
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	United HealthCare Services Inc	Govt Rel Di	r							
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	Other (specify) ▼		720.00		educ	tion (\$	\$30.00) Bi-We	ekly)	
	Full Name (Last, First, Middle Initial) ANNE YAU			Date	e of F	Receip	ot			
	Mailing Address 9905 WOODLAND DRIVE				™ 1	/ D	30	/ Y	20 <u>1</u> 3	Y
	City	State	Zip Code	Tr	ansad	tion	ID : P	R2543	5825317	63
	SILVER SPRING	MD	20902-4047	Amo	ount o	f Eac	h Re	ceipt th	is Period	b
	FEC ID number of contributing federal political committee.	С				7		J	3	0.00
	Name of Employer	Occupation								
	United HealthCare Services Inc	Ś								
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	Primary General Other (specify) ▼		360.00	P/R Deduction (\$15.00 Bi-Week					eekly)	
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	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	Jnited for Health)											
Α.	Full Name (Last, First, Middle Initial) CHANTA COMBS			[Date of Receipt									
	Mailing Address 4229 SUMMERTREE DRIVE				м м 11	/	30		/ Y	y 201:				
	City	State	Zip Code		Trans	acti	ion ID	: P	R25523	813531	763	_		
	TALLAHASSEE	FL	32311-3331	A	Amount	of	Each	Re	ceipt th	is Per	od			
	FEC ID number of contributing federal political committee.	С				_	7		7		76.9	2		
	Name of Employer	Occupation	1											
	United HealthCare Services Inc	Govt Rel Di	r											
	Receipt For:	Aggregate	Year-to-Date ▼											
	Primary General Other (specify) ▼		4923.04	P/	'R Dedi	uctio	on (\$38	8.4	6 Bi-We	ekly)				
	Full Name (Last, First, Middle Initial) JEANNE PACE				Date of	Re	eceipt							
	Mailing Address 458 MORENO ROAD				M M	1	D 3(/ Y	y 2013				
	City	State	Zip Code						R25523					
	WYNNEWOOD	PA	19096-1124	A	Amount	of	Each	Re	ceipt th	is Per	od			
	FEC ID number of contributing federal political committee.	С					7		7		78.0	0		
	Name of Employer United HealthCare Services Inc	Occupation KA Sr Acct												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 936.00	P/	R Dedu	uctic	on (\$39	9.00) Bi-We	ekly)				
C.	Full Name (Last, First, Middle Initial) THOMAS BLOCHER				Date of	Re	eceipt							
	Mailing Address 78 PATTI LYNN LANE				м м 11	/	30		/ Y	2013				
	City HOUSTON	State TX	Zip Code						R25529					
			77024-7120	A	Amount	of	Each	Re	ceipt th	is Per	od			
	FEC ID number of contributing federal political committee.	С					,		7		20.0	0		
	Name of Employer	Occupation	I											
	United HealthCare Services Inc	Assc Behvr	I Med Dir											
	Receipt For:	Aggregate	Year-to-Date ▼											
	Primary General Other (specify) ▼		240.00	P/	/R Ded	uctio	on (\$1)	0.0	0 Bi-We	ekly)				
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$\left.\right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	d PAC (l	Jnited for Health)											
Α.	Full Name (Last, First, Middle Initial) KEVIN BROOKS				Date of Receipt									
	Mailing Address 2750 FOUNTAIN LANE NORT	Ή			м – м 11	1		30	/ Y	ууу 2013	Y			
	City	State	Zip Code		Transa	acti	ion II	D : P	R25529	96103176	3			
	PLYMOUTH	MN	55447-1705	A	Amount	of	Each	n Re	ceipt th	is Period				
	FEC ID number of contributing federal political committee.	С					7		J	28	.00			
	Name of Employer	Occupation												
	United HealthCare Services Inc	Dir Mktg												
	Receipt For:	Aggregate	Year-to-Date ▼		· n -									
	Primary General Other (specify) ▼		336.00	P/	/R Dedu	uctic	on (\$	14.0	0 Bi-We	eekly)				
B.	Full Name (Last, First, Middle Initial) MARK BRUNELL				Date of	Re	ceipt	t						
	Mailing Address 20 VERMILION CLIFFS				™ _ M 1_1	1		30	/ Y	ү 2013	Y			
	City	State	Zip Code							6123176				
	ALISO VIEJO	CA	92656-8096	A	\mount	of	Each	ו Re	ceipt th	is Period				
	FEC ID number of contributing federal political committee.	С					3		y	28	.00			
	Name of Employer United HealthCare Services Inc	Occupation Dir Clnt Svc												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P/	'R Dedu	uctio	on (\$	14.0	0 Bi-We	ekly)				
с.	Full Name (Last, First, Middle Initial) JEREMY BRYANT				Date of	Re	ceipt	t						
	Mailing Address 11700 ARBORHILL DRIVE				M M 11	/		30	/ Y	y y 2013	Y			
	City ZIONSVILLE	State IN	Zip Code 46077-9683							96133176				
			40077-9003	A	Amount	of	Each	n Re	ceipt th	is Period				
	FEC ID number of contributing federal political committee.	С					7		7	70	0.00			
	Name of Employer	Occupation												
	United HealthCare Services Inc	KA Dir Acct	Mgmt											
	Receipt For:	Aggregate	Year-to-Date ▼						_					
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	y information copied from such Reports and for commercial purposes, other than using th												
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (l	Jnited for Health)										
Α.	Full Name (Last, First, Middle Initial) MICHAEL COLEMAN				Date of Receipt								
	Mailing Address 3325 LACEBARK PINE STR	EET			M M	/		30	/ Y		013	Y	
	City	State	Zip Code		Trans	acti	ion I	ID : P	R2552	9614	43176:	3	
	LAS VEGAS	NV	89129-8134		Amoun	t of	Eac	h Red	ceipt th	nis P	Period		
	FEC ID number of contributing federal political committee.	С					7		7	_	20.	00	
	Name of Employer	Occupation											
	Southwest Medical Assoc. Inc.	VP Gen Mg	ımt										
	Receipt For:	Aggregate	Year-to-Date ▼										
	Other (specify)		240.00		/R Ded	uctio	on (\$	\$10.00) Bi-We	ekly	y)		
В.	Full Name (Last, First, Middle Initial) MICHAEL EHLMAN				Date of	f Re	eceip	ot					
	Mailing Address 10051 VALLEY RIDGE COU	RT			M M	/	D	30	/ Y)13	Y	
	City	State	Zip Code		Trans	acti	ion I	D : Pl	R25529) 622	231763	6	
	LAS VEGAS	NV	89148-7602	_	Amoun	t of	Eac	h Red	ceipt th	is P	Period		
	FEC ID number of contributing federal political committee.	С					7		7	_	28.	00	
	Name of Employer Health Plan of Nevada	Occupation Dir Apps De											
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c.	Full Name (Last, First, Middle Initial) SCOTT FLANNERY				Date of	f Re	eceip	ot					
	Mailing Address 8508 TRELADY CT				м м 11	1	D	30	/ Y)13	Y	
	City PLANO	State TX	Zip Code 75024-6827		Trans Amoun				R2552 ceipt th			3	
	FEC ID number of contributing federal political committee.	C					7		7		78	00	
	Name of Employer	Occupation											
	United HealthCare Services Inc	Regn Grow	th Off										
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	Primary General Other (specify)		936.00		P/R Ded	luctio	ion (\$	\$39.00	0 Bi-We	eekly	y)		
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NAME OF COMMITTEE (In Full)	vrated DAC /	Inited for Hoalth)										
	naicu FAU (l											
Full Name (Last, First, Middle Initial)				Data of Dessist								
				Date of Receipt								
Mailing Address 9302 CENTURY OAK C			11 30 2013									
City	State	Zip Code	Transaction ID : PR2552962631763									
BRENTWOOD	TN	37027-3321	Amount of Each Receipt this Period									
FEC ID number of contributing				Jun			p					
federal political committee.	С				j.			28	.08			
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Name of Employer	Occupation											
United HealthCare Services Inc Receipt For:	Dir Proj Rso		_									
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Full Name (Last, First, Middle Initial)	I											
. <u>CLAIRE HANNAN</u>			_ c	Date of	Re	ceipt						
Mailing Address 25932 PORTAFINO DRI	1.	M M	_	D D	/ Y	Y Y	Y					
				11	J.	30	L	2013				
City	State	Zip Code						6273176	3			
MISSION VIEJO	CA	92691-5716	A	\mount	of	Each Re	ceipt thi	is Period				
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federal political committee.	U		_ L	_	-	7		70.				
Name of Employer	Occupation	1	\neg									
United HealthCare Services Inc	VP Gen Mg	mt										
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Mailing Address 7705 WALDEN BLVD				M = M			/ Y	YY	Y			
				11	J.	30	LL.	2013				
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	InitedHealth Group Incorporate	d PAC (I	Inited for Health)									
						_						
	II Name (Last, First, Middle Initial) GREGORY JAMES			Date of Receipt								
···	ailing Address 2323 KINGS POINT DRIVE				M M	_		/ Y	Y Y	Y		
				11 30 2013								
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	ailing Address 554 SPRUCE ST					_		/ /	YY	Y		
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feo	deral political committee.	U			_	-	7	7	SL	0.00		
Na	ame of Employer	Occupation		\neg								
	hited HealthCare Services Inc	Dir Gen Mgr	nt									
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Γ	Primary General	. <u></u>		P/	'R Dedi	uctio	on (\$40.0	00 Bi-We	ekly)			
	Other (specify)		, 960.00				,	-	- /			
_												
	III Name (Last, First, Middle Initial) 3RADLEY JOHNSON			_ c	Date of	Re	ceipt					
Ma	ailing Address 6705 SOUTHCREST DRIVE				M M	/	30	/ Y	2013	Y		
Ci	-	State	Zip Code			acti		PR25529		33		
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	EC ID number of contributing deral political committee.	С			-					3.00		
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	ame of Employer	Occupation										
	nited HealthCare Services Inc	Dir Bus Proc	cess									
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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
	for commercial purposes, other than using th			erson for the purpose of soliciting contributions to solicit contributions from such committee.								
$\left. \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ted PAC (L	Jnited for Health)									
Α.	Full Name (Last, First, Middle Initial) NARASIMHAN KIDAMBI			Date of Receipt								
	Mailing Address 18477 85TH AVE N	04-4-	7. 0.1	11 D D / Y Y Y Y Y Y 130 2013								
	City MAPLE GROVE	State MN	Zip Code 55311-1663	Transaction ID : PR2552963831763 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		40.00								
	Name of Employer United HealthCare Services Inc	Occupation Assc Dir Bu	s Anlys									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 480.00	P/R Deduction (\$20.00 Bi-Weekly)								
В.	Full Name (Last, First, Middle Initial) KENNETH LANTER	<u> </u>		Date of Receipt								
	Mailing Address 140 WILLING WAY			11 30 2013								
	City TROY	State IL	Zip Code 62294-1287	Transaction ID : PR2552964031763 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		20.00								
	Name of Employer United HealthCare Services Inc	Occupation KA Dir SIs F	Producing									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P/R Deduction (\$10.00 Bi-Weekly)								
<u>с.</u>	Full Name (Last, First, Middle Initial) JOHN LOVELADY			Date of Receipt								
	Mailing Address 6268 ORCHARD PARK			M M / D D / Y Y Y Y 11 30 2013								
	City FRISCO	State TX	Zip Code 75034-5126	Transaction ID : PR2552964231763 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C										
	Name of Employer	Occupation										
	United HealthCare Services Inc	Regn Pres I	Ntwk Mgmt									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1500.00	P/R Deduction (\$500.00 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)			1060.00								
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NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)						
Full Name (Last, First, Middle Initial)								
A. JULIE MACLEOD			Date	of Re	eceipt			
Mailing Address 15314 JEFFERS PASS NW			11		30		2013	Y
City	State	Zip Code				PR25529		53
PRIOR LAKE	MN	55372-3614	Amou	nt of	Each F	Receipt th	is Period	1
FEC ID number of contributing	С						28	3.00
federal political committee.					7			
Name of Employer	Occupation							
United HealthCare Services Inc Receipt For:		bital Partner Mgr						
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Full Name (Last, First, Middle Initial) B. MICHELLE MARTO			Date	of Re	eceint			
Mailing Address 149 WILLIAMSBURG COURT	-) / Y	YY	Y
			11		30		2013	
	State NY	Zip Code				PR25529		
		12203-5502	Amou	nt of	Each F	Receipt th	iis Period	1
FEC ID number of contributing federal political committee.	С				7	7	28	3.00
Name of Employer	Occupation							
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Receipt For:	Aggregate	Year-to-Date ▼		ducti	on (¢14			
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Full Name (Last, First, Middle Initial) C. CARL MATTSON			Data	of Dr	acint			
Mailing Address 539 ROUTE 9P			Date		eceipt) / V	Y Y	Y
			11		30		2013	<u> </u>
City SARATOGA SPRINGS	State NY	Zip Code 12866-7279				PR2552		
		12000-1213	Amou	nt of	Each F	Receipt th	iis Period	
FEC ID number of contributing federal political committee.	С				7	7	28	8.00
Name of Employer	Occupation							
United HealthCare Services Inc	Dir Clnt Svo	e Acct Mgt						
Receipt For:	Aggregate	Year-to-Date ▼				00 5: 14	1.1. \	
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$\overline{)}$	NAME OF COMMITTEE (In Full)									
]	UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)							
_	Full Name (Last, First, Middle Initial) REBECCA MCCABE									
Α.	Mailing Address 111 CONNORS CIRCLE				Date of	Re				
	Maining Address TTT CONNORS CIRCLE				M M	'	30	/ Y	2013	Y
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	United HealthCare Services Inc	KA Sr Acct	Exe							
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в.	Full Name (Last, First, Middle Initial) MICHAEL MORRIS				Date of	Re	ceint			
υ.	Mailing Address 2624 N HARTLAND COURT				M M	110		/ Y	Y Y	Y
					11		30		2013	
	City	State	Zip Code				-		96503176	3
	CHICAGO	IL	60614-4955		Amount	of	Each R	eceipt th	nis Period	
	FEC ID number of contributing federal political committee.	С				_	, .		23	.08
	Name of Employer United HealthCare Services Inc	Occupation								
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	Primary General	Aggregate	Year-to-Date ▼	_ .		. etic	m (@11)			
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~	Full Name (Last, First, Middle Initial) LESLIE PAULUS				Date of	Bo	coint			
.	Mailing Address 305 E TUCKEY LN							/ Y	YY	Y
					11	Ĺ	30		2013	
	City	State AZ	Zip Code						96523176	3
	PHOENIX	AZ	85012-1048		Amount	of	Each R	eceipt th	nis Period	
	FEC ID number of contributing federal political committee.	С				_	7		28	.00
	Name of Employer	Occupation								
	United HealthCare Services Inc	Med Dir								
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	Other (specify)		336.00	P/R Deduction (\$14.00 Bi-Weekly)						
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TEMIZED RECEIPTS	tor each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
or for commercial purposes, other than using	nd Statements may not be sold or used by any pe g the name and address of any political committee	erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)	rated PAC (United for Health)								
Full Name (Last, First, Middle Initial) GARY PEKA		Date of Receipt							
Mailing Address 1122 FALLS CURVE		11 D D / Y Y Y Y Y Y 11 30 2013							
City CHASKA	State Zip Code MN 55318-1275	Transaction ID : PR2552965331763							
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period							
Name of Employer United HealthCare Services Inc	Occupation Six Sigma Cnslt								
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00	P/R Deduction (\$14.00 Bi-Weekly)							
Full Name (Last, First, Middle Initial) B. DONALD POTTER	1	Date of Receipt							
Mailing Address 116 FULLER LANE		11 30 2013							
City WINNETKA	State Zip Code IL 60093-4213	Transaction ID : PR2552965431763 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C	28.00							
Name of Employer United HealthCare Services Inc	Occupation NA VP CInt Relationship								
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00	P/R Deduction (\$14.00 Bi-Weekly)							
Full Name (Last, First, Middle Initial) C. KRISTINE SAMSEL	1	Date of Receipt							
Mailing Address 91 WAVERLY RD		11 30 2013							
City HUNTINGTON	State Zip Code CT 06484-5835	Transaction ID : PR2552965731763							
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 28.00							
Name of Employer	Occupation								
United HealthCare Services Inc	Dir Gen Mgmt								
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00	P/R Deduction (\$14.00 Bi-Weekly)							
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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and S or for commercial purposes, other than using the		erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (United for Health)								
Full Name (Last, First, Middle Initial) A. THOMAS SCIUTO		Date of Receipt							
Mailing Address 160 ACORN LANE		11 30 / Y Y Y Y Y							
City MILFORD	State Zip Code CT 06461-1876	Transaction ID : PR2552966131763							
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period							
Name of Employer United HealthCare Services Inc	Occupation KA Dir Acct Mgmt								
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 936.00	P/R Deduction (\$39.00 Bi-Weekly)							
Full Name (Last, First, Middle Initial) B. BARRY STREIT		Date of Receipt							
Mailing Address 5421 KELLOGG AVENUE	11 30 2013								
City EDINA	StateZip CodeMN55424-1604	Transaction ID : PR2552966731763 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C	78.00							
Name of Employer United HealthCare Services Inc	Occupation RVP Medicr Field SIs								
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 936.00	P/R Deduction (\$39.00 Bi-Weekly)							
Full Name (Last, First, Middle Initial)		Date of Receipt							
Mailing Address 10809 GARDEN MIST DRIVE	#1061	11 30 / Y Y Y Y 2013							
City LAS VEGAS	StateZip CodeNV89135-2878	Transaction ID : PR2552966831763 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C	28.00							
Name of Employer	Occupation								
United HealthCare Services Inc	Assc Dir Compli								
Receipt For:	Aggregate Year-to-Date ▼								
Primary General Other (specify) ▼	336.00	P/R Deduction (\$14.00 Bi-Weekly)							
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	rmation copied from such Reports and ommercial purposes, other than using th				for the	purp	ose of s	soliciting	contribu	tions
	E OF COMMITTEE (In Full) tedHealth Group Incorporat	ed PAC (l	Jnited for Health)							
	Name (Last, First, Middle Initial) OMAS VANDERHEYDEN				Date of	Rec	ceipt			
Mailir	ng Address 534 WAYZATA BLVD E				M M	/	D D D 30	/ Y	2013	Y
City WAY	/ZATA	State MN	Zip Code 55391-1727						96693176 is Period	
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	Primary General Other (specify) v	Aggregate	Year-to-Date ▼ 336.00]	P/R Ded	uctio	ın (\$14.0)0 Bi-We	ekly)	
	Name (Last, First, Middle Initial) RON WACKER				Date of	Rec	ceipt			
	ng Address 4704 CAVAN ROAD	Ototo	Zin Oada		M M	1	30		2013	
City MOU	IND	State MN	Zip Code 55364-1877						6703176 is Period	-
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Mailir	ng Address 10555 GARDEN ROSE DRI	/E			м м 11	/	30	/ Y	y y 2013	Y
City LAS	VEGAS	State NV	Zip Code 89135-2836						96723176 is Period	
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	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00] f	P/R Ded	uctio	on (\$10.0)0 Bi-We	ekly)	
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ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may he name and add	not be sold or used by any p ress of any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (Ur	ited for Health)	
Full Name (Last, First, Middle Initial) A. SCOTT NAASZ			Date of Receipt
Mailing Address 14327 BLUEBIRD TRAIL N			11 30 / Y Y Y Y Y
City PRIOR LAKE	State MN	Zip Code 55372-1204	Transaction ID : PR2553474731763
FEC ID number of contributing federal political committee.	С	33372-1204	Amount of Each Receipt this Period
Name of Employer United HealthCare Services Inc	Occupation VP Cust Servi	се	
Receipt For: Primary General Other (specify) v	Aggregate Ye	ar-to-Date ▼ 336.00	P/R Deduction (\$14.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) B. MONICA RAYBURN			Date of Receipt
Mailing Address 688 WEST SYCAMORE			11 30 2013
City VERNON HILLS	State IL	Zip Code 60061-1084	Transaction ID : PR2553475131763 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		78.00
Name of Employer United HealthCare Services Inc	Occupation Dir Clms		
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 936.00	P/R Deduction (\$39.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) C. ANDREW SULLIVAN			Date of Receipt
Mailing Address 1101 ROSEWOOD DRIVE			11 30 2013
City ATLANTA	State GA	Zip Code 30306-3554	Transaction ID : PR2553475331763 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		28.00
Name of Employer	Occupation		
United HealthCare Services Inc	Bus Adv/Tech	Cnslt Sr Dir	
Receipt For:	Aggregate Ye	ar-to-Date V	
Other (specify)		336.00	P/R Deduction (\$14.00 Bi-Weekly)
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NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ted PAC (l	Jnited for Health)								
Full Name (Last, First, Middle Initial) A. RICHARD THOMAS				Date of	Re	eceip	t			
Mailing Address 5121 DUPONT AVENUE SC	DUTH			M M	/		30	/ Y	2013	Y
City	State	Zip Code			acti			R25534	4754317	63
MINNEAPOLIS	MN	55419-1151	A	Amount	t of	Each	h Red	ceipt th	is Perio	d
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Name of Employer	Occupation	I								
United HealthCare Services Inc	VP Gen Mg	jmt								
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General Other (specify) ▼		2328.00	P/	'R Ded	uctio	on (\$	97.00) Bi-We	ekly)	
Full Name (Last, First, Middle Initial) 3. DENEEN VOJTA	1			Date of	Re	eceipt	t			
Mailing Address 5201 KELLOGG AVENUE				M M	1	D	30	/ Y	2013	Y
City	State	Zip Code			acti			<u>R2</u> 5534	755317	63
EDINA	MN	55424-1304	A						is Perio	
FEC ID number of contributing federal political committee.	С					7		7	38	6.00
Name of Employer United HealthCare Services Inc	Occupation SVP Bus In									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4632.00	P/	R Dedu	uctio	on (\$	193.0)0 Bi-W	′eekly)	
Full Name (Last, First, Middle Initial) C. DANIEL ZERAFA	1			Date of	Re	eceip	t			
Mailing Address 61234 ADMIRAL DRIVE				м м 11	/		о 30	/ Y	2013	Y
City WASHINGTON TOWNSHIP	State MI	Zip Code 48094-1242							4757317 is Perio	
FEC ID number of contributing federal political committee.	С					1		7		8.00
Name of Employer	Occupation	1	_							
United HealthCare Services Inc	VP IT									
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or for comr	nercial purposes, other than using the			erson for the purpose of soliciting contributions to solicit contributions from such committee.
\	of COMMITTEE (In Full) dHealth Group Incorporate	ed PAC (l	Jnited for Health)	
	ne (Last, First, Middle Initial) EEN COHAN			Date of Receipt
	Address 17402 SAINT THERESA DRI			11 30 2013
City		State MD	Zip Code	Transaction ID : PR2554012731763
	number of contributing political committee.	C	20832-2547	Amount of Each Receipt this Period
	f Employer lealthCare Services Inc	Occupation Assc Gen C		
Receipt Pr			Year-to-Date ▼ 336.00	P/R Deduction (\$14.00 Bi-Weekly)
	ne (Last, First, Middle Initial) COLALUCA			Date of Receipt
Mailing /	Address 23314 EVAN COURT NORTH	1		11 30 2013
City NEW BO	DSTON	State MI	Zip Code 48164-8507	Transaction ID : PR2554012831763 Amount of Each Receipt this Period
	number of contributing political committee.	С		28.00
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	For: imary General her (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P/R Deduction (\$14.00 Bi-Weekly)
	ne (Last, First, Middle Initial) LY ESPINOSA			Date of Receipt
Mailing /	Address 4060 WHITE OAK LANE			11 30 / Y Y Y Y 2013
City EXCEL	SIOR	State MN	Zip Code 55331-7753	Transaction ID : PR2554012931763
FEC ID	number of contributing political committee.	С		Amount of Each Receipt this Period
Name of	f Employer	Occupation	1	
United H	lealthCare Services Inc	Dir Found/S	Social Resp	
	For: imary General her (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P/R Deduction (\$14.00 Bi-Weekly)
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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
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\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)	
Α.	Full Name (Last, First, Middle Initial) KARSTEN FLAGSTAD			Date of Receipt
	Mailing Address 13420 JAY ST NW	2 1		M = M / D = D / Y = Y = Y = Y Y 11 30 2013
	City ANDOVER	State MN	Zip Code 55304-4015	Transaction ID : PR2554013031763
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify)	Occupation VP Info Tec Aggregate	h Year-to-Date ▼ 2400.00	P/R Deduction (\$100.00 Bi-Weekly)
	Full Name (Last, First, Middle Initial) PATRICK MEYER			Date of Receipt
	Mailing Address 20676 HAZELWOOD TRAIL		7.0.1	11 30 Y Y Y Y Y Y Y Y Y
	City LAKEVILLE	State MN	Zip Code 55044-4678	Transaction ID : PR2554013131763 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		28.00
	Name of Employer United HealthCare Services Inc	Occupation Dir Compli		_
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P/R Deduction (\$14.00 Bi-Weekly)
с.	Full Name (Last, First, Middle Initial)			Date of Receipt
	Mailing Address 10733 TAVISTOCK DRIVE			M M / D D / Y Y Y Y Y 11 30 2013
	City TAMPA	State FL	Zip Code 33626-1718	Transaction ID : PR2554013231763 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		28.00
	Name of Employer	Occupation		
	United HealthCare Services Inc	PS Sr SIs E	xe	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P/R Deduction (\$14.00 Bi-Weekly)
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	NAME OF COMMITTEE (In Full)														
/	UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)												
Α.	Full Name (Last, First, Middle Initial) GREGORY REIDY			C	Date of	f Re	eceipt								
	Mailing Address 1016 BLAKEFIELD DRIVE			11 30 _ 2013 _											
	City	State	Zip Code	Transaction ID : PR2554013331763											
	BRENTWOOD	TN	37027-8479	A	Amoun	t of	Each F	Rece	eipt thi	s Perio	bc				
	FEC ID number of contributing federal political committee.	С					7		7		28.0	0			
	Name of Employer	Occupation													
	United HealthCare Services Inc	Hith Plan C	EO												
	Receipt For:	Aggregate	Year-to-Date ▼												
	Other (specify)		336.00	P/	'R Ded	ucti	on (\$14	.00	Bi-We	əkly)					
в.	Full Name (Last, First, Middle Initial) ASIR AHMAD				Date of	f Re	eceipt								
	Mailing Address 1935 HILLWOOD DRIVE				™M 1_1	/	30		/ Y	y y 2013	Y				
	City	State	Zip Code		Trans	acti	ion ID :	PR	25600	64031	763				
	BLOOMFIELD HILLS	MI	48304-2420	A	Amount	t of	Each F	Rece	eipt thi	s Perio	bc				
	FEC ID number of contributing federal political committee.	С					7		7		28.0	0			
	Name of Employer United HealthCare Services Inc	Occupation Med Dir													
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P/	R Ded	uctio	on (\$14	.00	Bi-Wee	∋kly)					
с.	Full Name (Last, First, Middle Initial)				Date of	f Re	eceipt								
	Mailing Address 5116 NORTH TIOGA WAY				м м 11	/	30		/ Y	2013	Y				
	City	State NV	Zip Code				ion ID :								
	LAS VEGAS	INV	89149-5830	A	Amoun	t of	Each F	Rece	eipt thi	s Perio	bd				
	FEC ID number of contributing federal political committee.	С					3		3		28.0	0			
	Name of Employer	Occupation													
	Health Plan of Nevada	Assc Dir MI	ĸtg												
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SCHEDULE A (FEC Form 3X)

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NAME OF COMMITTEE (In Full)		duress of any political commuter		,onun	Julions			
UnitedHealth Group Incorpo	rated PAC (I	United for Health)						
Full Name (Last, First, Middle Initial) A. JIM BENNETT			Date	of Re	eceipt			
Mailing Address 3724 PINE TIP ROAD			11		30		2013	Y
City TALLAHASSEE	State FL	Zip Code 32312-1016					06423176 nis Period	
FEC ID number of contributing federal political committee.	С							3.00
Name of Employer United HealthCare Services Inc	Occupation Sr Assc Ge							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P/R De	educti	ion (\$14	.00 Bi-We	∍ekly)	
Full Name (Last, First, Middle Initial) B. DANIEL CLUTE			Date	of Re	eceipt			
Mailing Address 7756 N 85TH STREET	0		11		30		2013	Y
City OMAHA	State NE	Zip Code 68122-1281					06443176 nis Period	-
FEC ID number of contributing federal political committee.	С						194	_
Name of Employer United HealthCare Services Inc	Occupation Med Dir							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2328.00	P/R De	ducti	on (\$97	.00 Bi-We	ekly)	
Full Name (Last, First, Middle Initial) C. THOMAS COY			Date	of Re	eceipt			
Mailing Address 6970 SUZANNE COURT	-		M 11	M /	30		у у 2013	Y
City SCHENECTADY	State NY	Zip Code 12303-5285					06453176 nis Period	
FEC ID number of contributing federal political committee.	С).00
Name of Employer	Occupation	1						
United HealthCare Services Inc Receipt For:	Dir Gen Mg							
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 240.00	P/R De	əduct	ion (\$10	0.00 Bi-We	ekly)	
SUBTOTAL of Receipts This Page (optiona	al)				7		242	.00
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SCHEDULE A (FEC Form 3X)

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only o	ne)		
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Any information copied from such Reports ar or for commercial purposes, other than using						
NAME OF COMMITTEE (In Full)						
UnitedHealth Group Incorpor	ated PAC (l	Jnited for Health)				
Full Name (Last, First, Middle Initial) SANDRA FORQUER			Date of R	eceipt		
Mailing Address 96 AVENIDA ALDEA			M M M	30 / Y	2013	
City SANTA FE	State NM	Zip Code 87507-9449		tion ID : PR2560 Each Receipt th		
FEC ID number of contributing federal political committee.	С			т. т. т. т. т. т. т. т.	20.0	0
Name of Employer United HealthCare Services Inc	Occupation Dir Prod					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 240.00	P/R Deduct	ion (\$10.00 Bi-Wo	eekly)	
Full Name (Last, First, Middle Initial) B. CRAIG GAGE			Date of R	eceipt		
Mailing Address 275 BAYSHORE BLVD U			M M 11	30 / Y	2013	
City TAMPA	State FL	Zip Code 33606-2331		tion ID : PR2560 Each Receipt th		
FEC ID number of contributing federal political committee.	С				78.0	0
Name of Employer United HealthCare Services Inc	Occupation Med Dir					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 936.00	P/R Deduct	ion (\$39.00 Bi-We	eekly)	
Full Name (Last, First, Middle Initial) C. PAULA GAZELEY			Date of R	eceipt		
Mailing Address 36 MAYFAIR ROAD			M M 11	30 / Y	2013	
City WYNANTSKILL	State NY	Zip Code 12198-8018		tion ID : PR2560 Each Receipt th		
FEC ID number of contributing federal political committee.	С			7 J	28.0)0
Name of Employer	Occupation					
United HealthCare Services Inc	Strat CInt E	xec EmpireRx	_			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P/R Deduct	tion (\$14.00 Bi-W	eekly)	
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	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)										
Α.	Full Name (Last, First, Middle Initial) DONALD GIANCURSIO				Date (of Re	ec	eipt					
	Mailing Address 72 MIDNIGHT RIDGE DR				M 1_1	VI /	/	D 3	D 30	/ Y) 13	Y
	City	State	Zip Code		Tran	sact	tio	n ID) : P	R2560	0649	3176	3
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	Name of Employer	Occupation											
	Health Plan of Nevada	Hith Plan C	EO										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4632.00	P	/R De	ducti	ior	า (\$1	193.	00 Bi-V	Veek	ly)	
	Full Name (Last, First, Middle Initial) JERI JONES				Date (of Re	ec	eipt					
	Mailing Address 512 W ORANGEWOOD AVE				11		/	D	D 30	/ Y		13	Y
	City	State	Zip Code		Tran	sact	tio	n ID) : P	R2560	0651	3176	3
	PHOENIX	AZ	85021-7252	/	Amoui	nt of	fΕ	ach	Re	ceipt th	nis P	eriod	
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	Full Name (Last, First, Middle Initial) SHELDON LIPPMAN				Date (of Re	ec	eipt					
	Mailing Address 55 CLIFFIELD ROAD				[™] 11		/		D 30	/ Y)13	Y
	City BEDFORD	State NY	Zip Code 10506-1210							R2560			3
			10300-1210	- '	Amoui	nt of	ΤE	ach	Re	ceipt th	nis P	'eriod	
	FEC ID number of contributing federal political committee.	С					,			7		194	.00
	Name of Employer	Occupation											
	United HealthCare Services Inc	Med Dir											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2328.00	P	/R De	duct	tior	n (\$9	97.0	0 Bi-W	eekly	y)	
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or for commercial purposes, other than usin							
NAME OF COMMITTEE (In Full)	orated PAC (Inited for Health)					
Onited leanin Group incorpt							
Full Name (Last, First, Middle Initial)			Date o	f Receipt			
Mailing Address 2837 EAST PARK PLAC	CE		M M		/ Y	Y Y	Y
	01.1	7. 0. 1	11	30		2013	
City MILWAUKEE	State WI	Zip Code 53211-3845		action ID : I			3
		00211 0040	Amoun	t of Each Re	eceipt th	is Period	
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Name of Employer	Occupation	1					
United HealthCare Services Inc	SB VP SIs	Acct Mgmt					
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Primary General Other (specify)		2328.00	P/R Ded	uction (\$97.0	00 Bi-We	ekly)	
Full Name (Last, First, Middle Initial) B. JEFFREY LUCHT	1		Date o	f Receipt			
Mailing Address 191 MAIN ST			1 <u>1</u>	/ D D 30	/ Y	2013	Y
City	State	Zip Code	Trans	action ID : I	PR25600	65631763	3
S GLASTONBURY	СТ	06073-3004	Amoun	t of Each Re	eceipt th	is Period	
FEC ID number of contributing federal political committee.	С					194.	00
Name of Employer	Occupation	1					
United HealthCare Services Inc	SVP Act Ur	nderwriting					
Receipt For:	Aggregate	Year-to-Date ▼					
Other (specify)		, 2328.00	P/R Ded	uction (\$97.0	00 Bi-We	ekly)	
Full Name (Last, First, Middle Initial) C. KEVIN MARONEY			Date o	f Receipt			
Mailing Address 5052 NORMAN DRIVE			11	/ D D 30	/ Y	2013	Y
City	State	Zip Code	Trans	saction ID :	PR25600	06573176	3
MINNETONKA	MN	55345-4636	Amoun	t of Each Re	eceipt th	is Period	
FEC ID number of contributing federal political committee.	С				- 7	28	.00
Name of Employer	Occupation	1					
United HealthCare Services Inc	Assc Gen (Counsel					
Receipt For:	Aggregate	Year-to-Date V					
Other (specify)		336.00	P/R Dec	luction (\$14.)	00 Bi-W€	ekly)	
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			Detailed Summary Page		11a 13		11b 14	11c		12 16	17
	y information copied from such Reports and for commercial purposes, other than using t				or the		pose of	soliciting	g cont	tributi	ons
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (I	Jnited for Health)								
A.	Full Name (Last, First, Middle Initial) DAVID MILICH			[Date of	Re	eceipt				
	Mailing Address 2702 BIRCHMERE COURT	-			M M	/	30	/ Y	Y 20 ²		Y
	City KATY	State TX	Zip Code 77450-1303					PR2560			_
	FEC ID number of contributing federal political committee.	С			Amount	: OT	Each R	eceipt th	iis Pe	78.0	00
	Name of Employer United HealthCare Services Inc	Occupation HIth Plan C									
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В.	Full Name (Last, First, Middle Initial) WILLIAM O'BRYANT				Date of	Re	eceipt				
	Mailing Address 22191 WESTCLIFF				™ M 11	/	30	/ Y	201		Y
	City MISSION VIEJO	State CA	Zip Code 92692-4310	A				PR2560 eceipt th			
	FEC ID number of contributing federal political committee.	С					,		_	28.0	00
	Name of Employer United HealthCare Services Inc	Occupation Sr Med Dir									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P/	'R Dedi	uctio	on (\$14.	00 Bi-We	∍ekly)		
с.	Full Name (Last, First, Middle Initial) RICHARD PERRIER				Date of	Re	eceipt				
	Mailing Address 3161 EMERALD VALLEY F	ROAD			M M 11	/	30	/ Y	201) 13	Y
	City ELLICOTT CITY	State MD	Zip Code 21042-1013					PR2560 eceipt th			
	FEC ID number of contributing federal political committee.	С			Amount	. 01		eceipt ii	lis re	28.0	00
	Name of Employer	Occupation	1								
	United HealthCare Services Inc	KA VP Acc	t Mgmt								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P	/R Ded	ucti	on (\$14	.00 Bi-W	eekly))	
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PAGE 120 OF

ITEMIZED RECEIPTS	tor each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any per name and address of any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (United for Health)	
Full Name (Last, First, Middle Initial) A. DONALD ROWE		Date of Receipt
Mailing Address 5 LANTERN LANE	Otata Zin Oada	M = M / D = D / Y = Y = Y = Y Y 11 30 2013 Image: 2013 <th< td=""></th<>
City MAYNARD	State Zip Code MA 01754-2171	Transaction ID : PR2560066531763
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer United HealthCare Services Inc	Occupation KA Dir of AM producing	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00	P/R Deduction (\$14.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) B. DENISE VAIL		Date of Receipt
Mailing Address 35 CLEVELAND AVENUE		11 30 2013
City SAYVILLE	StateZip CodeNY11782-1322	Transaction ID : PR2560066831763 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer United HealthCare Services Inc	Occupation Dir Clnt Svc Acct Mgt	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00	P/R Deduction (\$14.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) C. DEBRA COLLINS		Date of Receipt
Mailing Address 3862 CARRIAGE HILL DRIVE		M M / D D / Y Y Y Y Y 11 30 2013
City FREDERICK	StateZip CodeMD21704-7313	Transaction ID : PR2560398031763 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	
United HealthCare Services Inc	Dir Ntwk Prgms	
Receipt For:	Aggregate Year-to-Date ▼	
Other (specify)	360.00	P/R Deduction (\$15.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)		86.00
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SCHEDULE A (FEC Form 3X) _ _ _ _

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)	
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NAME OF COMMITTEE (In Full)				
UnitedHealth Group Incorport	prated PAC (United for Health)		
Full Name (Last, First, Middle Initial) KRISTA DICKMAN			Date of Receipt	
Mailing Address 2533 ONYX DRIVE				013
City	State	Zip Code	Transaction ID : PR2560398	131763
SHAKOPEE	MN	55379-2770	Amount of Each Receipt this I	Period
FEC ID number of contributing federal political committee.	С		7 7	28.00
Name of Employer	Occupation	1		
United HealthCare Services Inc	Sr Proj Mgi	r III		
Receipt For:	Aggregate	Year-to-Date ▼		
Primary General		336.00	P/R Deduction (\$14.00 Bi-Week	y)
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Full Name (Last, First, Middle Initial) B. GEORGE KOREAN			Date of Receipt	
Mailing Address 6 VERANO			M = M / D = D / Y = Y	013
City	State	Zip Code	Transaction ID : PR2560398	531763
FOOTHILL RANCH	CA	92610-1827	Amount of Each Receipt this I	Period
FEC ID number of contributing federal political committee.	С			28.00
Name of Employer	Occupation	1	_	
United HealthCare Services Inc	Dir Act Svs			
Receipt For:	Aggregate	Year-to-Date V		
Other (specify)		, 336.00	P/R Deduction (\$14.00 Bi-Week	y)
Full Name (Last, First, Middle Initial) C. GARY MURRAY	I		Date of Receipt	
Mailing Address 13093 GROUSE POINT	E COVE			013
City	State	Zip Code	Transaction ID : PR2560398	
DRAPER	UT	84020-8258	Amount of Each Receipt this I	Period
FEC ID number of contributing federal political committee.	С			20.00
Name of Employer	Occupation	1	-	
United HealthCare Services Inc	Dir Bus Ris	sk Mgmt		
Receipt For:	Aggregate	Year-to-Date V		
Other (specify)		240.00	P/R Deduction (\$10.00 Bi-Week	ly)
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Any information copied from such Reports and or for commercial purposes, other than using the													
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora													
Full Name (Last, First, Middle Initial) A. TIMOTHY NOEL			Date of	f Receipt									
Mailing Address 4408 THOMAS AVE SOUT	Η		11 30 2013										
City MINNEAPOLIS	State MN	Zip Code 55410-1968	Transaction ID : PR2560398831763 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С			7		78	.00						
Name of Employer United HealthCare Services Inc Receipt For:	Occupation VP Finance Aggregate												
Primary General Other (specify) ▼		2397.00	P/R Ded	uction (\$39.0	00 Bi-We	ekly)							
Full Name (Last, First, Middle Initial) B. ROBERT WULF			Date of	f Receipt									
Mailing Address 622 N 11TH ST	Ctoto	Zip Code	1 <u>1</u>	/ D D 30		2013							
City WAUSAU	State WI	Zip Code 54403-5004		action ID : F t of Each Re			3						
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Name of Employer United HealthCare Services Inc	Occupation Dir Gen Mg		_										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 243.32	P/R Ded	uction (\$60.8	33 Bi-We	ekly)							
Full Name (Last, First, Middle Initial) C. JAMES CRONIN			Date of	f Receipt									
Mailing Address 20700 DELTA DRIVE			11	/ D D 30	/ Y	2013	Y						
City GAITHERSBURG	State MD	Zip Code 20882-1121		action ID : I t of Each Re			3						
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Name of Employer	Occupation												
United HealthCare Services Inc Receipt For:	Hith Plan C		_										
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any information copied from such Reports and Statements may not be sold or used by any person for the purpose of sollisting contributions from such committee. NAME OF COMMITTEE (in Full) UnitedHealth Group Incorporated PAC (United for Health) Full Name (Last, First, Middle Initial) A, PATRICK OBRIEN Mailing Address 33 BARRINGTON DRIVE City State Zip Code BEDFORD NH Other (specify) Water of contributing federal polical committee. Outried HealthCare Services Inc VP Gen Mgmt Name of Last, First, Middle Initial) Aggrogate Year-to-Date ▼ Primary General Mailing Address 516 APPLE LANE City State Better SviLLE PA Mailing Address 7320 YORK AVE N City State Zip Code Transaction ID : PR2560821531763 Ansor of contributing tederal policical committee. Occupation Mailing Address 716 APPLE LANE Date of Receipt Mailing Address 716 APPLE LANE Occupation Mailing Address 7320 YORK AVE N Occupation Dirte report Aggregate Year-to-Date ▼ PriP		EWIZED RECEIPIS				-		{ }								
NAME OF COMMITTEE (in Full) VAME OF COMMITTEE (in Full) Full Name (Last, First, Middle Initial) A. PATRICK OBREN Mailing Address 33 BARRINGTON DRIVE City State BEDFORD NH FEC ID number of contributing tedral political committee. Other (specify) Question VP Gen Mgmt Recognt For: Occupation Other (specify) State Zip Code Transaction ID. PR2560821431763 Aggregate Year-to-Date ▼ Printary City General Other (specify) State Zip Code Printary Mailing Address 516 APPLE LANE Date of Receipt City State Zip Code Printary General Occupation United HealthCare Services Inc Diff Printary 28.00 Name of Employer Occupation Diff Printary City State Zip Code Printary General Occupation United HealthCare Services Inc Diff Printary Aggregate Year-to-Date ▼ Citory General <t< th=""><th></th><th></th><th></th><th></th><th></th><th>for the</th><th></th><th>oose of</th><th>soliciting</th><th>contribu</th><th></th></t<>						for the		oose of	soliciting	contribu						
✓ UnitedHealth Group Incorporated PAC (United for Health) A. A. FATRICK O'BRIEN Mailing Address 33 BARRINGTON DRIVE City BEDFORD FEC ID number of contributing federal political committee. Other (specify) ♥ Outled HealthCare Services inc PIN name (Last, First, Middle Initial) ART PERO Maling Address 516 APPLE LANE City Bit Marker S 16 APPLE LANE City Maing Address 730 YORK AVE N City Maing Address 730 YORK AVE N City Purmary Gity Purmary Gity Maing Address 730 YORK AVE N City Part Receipt For: Other (specify) ♥ Other (specify) ♥ Aggregate Year-to-Date ♥ Other (specify) ♥ City State Zip Code Name of Employer United HealthCare Services inc Dir Prod Receipt For: Other (specify) ♥ BROOKLYN PARK	or		ne name and a	ddress of any political committee	e to so	olicit con	ntrib	utions 1	rom such	n committ	ee.					
A. PATRICK O'BRIEN Date of Peccipit Mailing Address 33 BARRINGTON DRIVE Transaction Di : PR250021137763 City State Zip Code BEDFORD NH 03110-6601 FEC ID number of contributing federal political committee. Occupation United HealthCare Services inc VP Gen Mgmt Raceipt For: Primary Gity State Zip Code Mailing Address 516 APPLE LANE City City State Zip Code Mailing Address 716 APPLE LANE City City State Zip Code Mailing Address 716 APPLE LANE City State City State Zip Code Primary General Occupation Dunet detast.First. Middle Initial) Date of Receipt Name of Employer Occupation City Primary General Occupation Dunet detast.First. Middle Initial) Dir Prod Receipt For: Primary General Other (specify) General Dir Prod Roceipt For: Primary General Dir Prod <td>\rangle</td> <td></td> <td>ted PAC (l</td> <td>Jnited for Health)</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	\rangle		ted PAC (l	Jnited for Health)												
City State Zip Code BEDFORD NH 03110-5601 FEC ID number of contributing federal political committee. C Amount of Each Receipt this Period Mare of Employer Occupation VP Gen Mgmt P/R Deduction (\$14.00 Bi-Weekly) Other (specify) ✓ General Aggregate Year-to-Date ✓ P/R Deduction (\$14.00 Bi-Weekly) Full Name (Last, First, Middle Initial) Date of Receipt Transaction ID : PR25002130163 Mailing Address 516 APPLE LANE Transaction ID : PR250021531763 City State Zip Code HARLEYSVILLE PA 19438-2549 FEC ID number of contributing federal political committee. C Zib Code Name of Employer Occupation Transaction ID : PR250021531763 Mailing Address 7320 YORK AVE N Gity Sitate Zip Code Mailing Address 7320 YORK AVE N Gity Sitate Zip Code Mailing Address 7320 YORK AVE N C Aggregate Year-to-Date ▼ P/R Deduction (\$14.00 Bi-Weekly) City Sitate Zip Code Receipt 11 30 2013 Mailing Address 7320 YORK AVE N Gity Sitate<	Α.					Date of	Re	ceipt								
BEDFORD NH 03110-5601 FEC. ID number of contributing federal political committee. C 28.00 Name of Employer Occupation PR United HealthCare Services Inc VP Gen Mgmt PR Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date ▼ P/R Deduction (\$14.00 Bi-Weekly) B. MARIE PERO Malling Address 516 APPLE LANE Date of Receipt City State Zip Code Transaction ID : PR250821331763 HARLEYSVILLE PA 19438-2549 P/R Deduction (\$14.00 Bi-Weekly) FEC ID number of contributing federal political committee. Occupation Dir Prod P/R Deduction (\$14.00 Bi-Weekly) Full Name (Last, First, Middle Initial) Occupation Dir Prod P/R Deduction (\$14.00 Bi-Weekly) Full Name (Last, First, Middle Initial) Occupation Dir Prod Date of Receipt City General Occupation Dir Prod Date of Receipt Receipt For: Other (specify) ▼ State Zip Code Transaction ID : PR250821631763 Amount of Each Receipt Mis Period State Zip Code Transaction ID : PR250821631763 Maling Address 7320 YORK AVE N C 336.00		Mailing Address 33 BARRINGTON DRIVE			11 30 2013											
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	r commercial purposes, other than using t														
	AME OF COMMITTEE (In Full) InitedHealth Group Incorpora	ited PAC (l	Jnited for Health)												
	ull Name (Last, First, Middle Initial) BRIAN LUND			Da	ite of	Re	ceipt								
M	ailing Address 464 EAST NORTH AVE			1.1 30 _ 2013 _											
Ci G	ty IRANTSBURG	State WI	Zip Code 54840-7423							576317 s Period					
	EC ID number of contributing deral political committee.	С					7		7		8.00				
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	II Name (Last, First, Middle Initial) KEITH VOLLBERG			Da	ite of	Re	ceipt								
	ailing Address 1001 NANDINA DR		7.0.1		11	1	30		Y	ү ү 2013	Y				
Ci W	ty /ESTON	State FL	Zip Code 33327-2481				-			0773170 s Period					
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	III Name (Last, First, Middle Initial) LARRY W CAVANAUGH			Da	ite of	Re	ceipt								
M	ailing Address 520 NE 20TH ST # 1010			Γ	11	/	30		Y	2013	Y				
Ci V	ty VILTON MANORS	State FL	Zip Code 33305-2162							2110317 s Period					
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	nited HealthCare Services Inc eceipt For:		ovt Dntl Sls Mgr	_											
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			13 14 15 16 erson for the purpose of soliciting contributions e to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full)	<u>y</u>												
> UnitedHealth Group Incorpo	orated PAC (l	Jnited for Health)											
Full Name (Last, First, Middle Initial)			Date of Receipt										
Mailing Address 2335 SOUTH OCEAN BI	LVD B5		M / D / Y										
City	State	Zip Code											
PALM BEACH	FL	33480-5368	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		200.00										
Name of Employer	Occupation												
United HealthCare Services Inc	Plan Pres												
Receipt For:	Aggregate	Year-to-Date ▼											
Primary General Other (specify)		2400.00	P/R Deduction (\$100.00 Bi-Weekly)										
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Full Name (Last, First, Middle Initial) B. JACQULYN BARTON			Date of Receipt										
Mailing Address 1587 112 TH COURT W			11 30 / Y Y Y Y Y 2013										
City	State	Zip Code	Transaction ID : PR2563211231763										
INVER GROVE HEIGHTS	MN	55077-5412	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		28.00										
Name of Employer	Occupation												
United HealthCare Services Inc	VP Human	Capital Partner											
Receipt For:	Aggregate	Year-to-Date ▼											
Other (specify) ▼		, 336.00	P/R Deduction (\$14.00 Bi-Weekly)										
Full Name (Last, First, Middle Initial)			Date of Receipt										
Mailing Address 2622 LITER COURT			11 30 2013										
City	State	Zip Code	Transaction ID : PR2564296731763										
ELLICOTT CITY	MD	21042-1729	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		20.00										
Name of Employer	Occupation												
United HealthCare Services Inc	Clin Qlty Ar	llyst Sr											
Receipt For:	Aggregate	Year-to-Date ▼											
Other (specify) ▼		240.00	P/R Deduction (\$10.00 Bi-Weekly)										

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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	Jnited for Health)										
Full Name (Last, First, Middle Initial) JENNIFER WALSH			Da	ate of	Rec	ceipt						
Mailing Address 1101 ROBERTA COURT			11 30 2013									
City MCLEAN	State VA	Zip Code 22101-2114						29683170 is Perioc				
FEC ID number of contributing federal political committee.	C					,		194	4.00			
Name of Employer United HealthCare Services Inc Receipt For:	Occupation Dir Govt Re Aggregate											
Other (specify) ▼		2328.00	P/R	Dedu	ıctio	n (\$97.0	00 Bi-We	ekly)				
Full Name (Last, First, Middle Initial) B. ARTHUR MILLER			Da	ate of	Rec	ceipt						
Mailing Address 5009 ASHINGTON LANDIN				11	/	30	/ Y	2013	Y			
City TAMPA	State FL	Zip Code 33647-3515						9693176 is Perioc				
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Name of Employer United HealthCare Services Inc	Occupation VP Gen Mg											
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3000.06	P/R	Dedu	ictio	n (\$166	.67 Bi-W	eekly)				
Full Name (Last, First, Middle Initial) C. ANDREW MACKENZIE			Da	ate of	Rec	ceipt						
Mailing Address 1912 IRVING AVE S				и м 11	/	30	/ Y	2013	Y			
City MINNEAPOLIS	State MN	Zip Code 55403-2823						2 971317 is Period				
FEC ID number of contributing federal political committee.	C					,		20	0.00			
Name of Employer	Occupation											
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (United for Health)	
Full Name (Last, First, Middle Initial) A. STEPHEN SWANSON		Date of Receipt
Mailing Address 3001 HUNTINGTON COURT		1.1 30 2013
City	State Zip Code	Transaction ID : PR2564297331763
KATY	TX 77493-1159	_ Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	78.00
Name of Employer	Occupation	_
United HealthCare Services Inc	KA VP Acct Mgmt	
Receipt For:	Aggregate Year-to-Date ▼	
Other (specify)	936.00	P/R Deduction (\$39.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) B. HARVEY BALTHASER		Date of Receipt
Mailing Address 3103 FLEECE FLOWER COV	/E	11 30 _2013 _
City	State Zip Code	Transaction ID : PR2564297531763
AUSTIN	TX 78735-1539	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	78.00
Name of Employer United HealthCare Services Inc	Occupation Med Dir	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 936.00	P/R Deduction (\$39.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) C. STEVEN WALLI		Date of Receipt
Mailing Address 18615 CHARLEVOIX LANE		M M / D D / Y Y Y Y 11 30 2013
City	State Zip Code	Transaction ID : PR2564297631763
CHESTERFIELD	MO 63005-6200	Amount of Each Receipt this Period
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Name of Employer	Occupation	_
United HealthCare Services Inc	Hith Plan CEO	
Receipt For:	Aggregate Year-to-Date ▼	
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NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorpor	rated PAC (United for Health)										
Full Name (Last, First, Middle Initial)												
A. ELLEN DAMATO				Receipt			_					
Mailing Address 1300 DALHART DRIVE			11 30 2013									
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ALLEN	TX	75013-5339	Amount	of Each Rece	eipt this Pe	əriod						
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federal political committee.				9	9							
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Full Name (Last, First, Middle Initial) B. JOSH WILLSON			Dete	Poociet								
Mailing Address 201 ADAMS CT				Receipt		Y Y						
Maning Address 201 ADAMS CT			1_1	30	_ 201							
City	State	Zip Code	Transa	action ID : PR	256480253	31763						
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Other (specify) ▼		336.00	P/R Dedu	iction (\$14.00	Bi-Weekly))						
Full Name (Last, First, Middle Initial) C. CHRISTOPHER CARLSON			Date of	Receipt								
Mailing Address 12801 OVERLOOK ROA	D		M M	/ D D 30	/ Y Y 20	ү ү 13	1					
City	State	Zip Code	Trans	action ID : PR	25648026	31763						
DAYTON	MN	55327-9678	Amount	of Each Rece	eipt this Pe	əriod						
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United HealthCare Services Inc	VP Gen Mg	gmt										
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	NAME OF COMMITTEE (In Full)								-	-	
$\Big\rangle$	UnitedHealth Group Incorporate	d PAC (l	Jnited for Health)								
Α.	Full Name (Last, First, Middle Initial) PAUL HANSEN				Date of	Re	eceipt				
	Mailing Address 18430 62ND PLACE NORTH				M M	/		D 30	/ Y	у у 2013	Y
	City	State	Zip Code		Trans	acti	ion IC) : P	R25648	80273176	3
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	United HealthCare Services Inc	Controller N	Ikt Group								
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B.	Full Name (Last, First, Middle Initial) PHYLLIS DOZIER				Date of	Re	eceipt				
	Mailing Address 4825 KNOX AVENUE SOUTH				M M	1		D 30	/ Y	2013	Y
	City	State	Zip Code		Trans	acti	ion ID) : P	R25648	30283176	3
	MINNEAPOLIS	MN	55419-5238	/	Amount	of	Each	Re	ceipt th	is Period	
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с.	Full Name (Last, First, Middle Initial)				Date of	Re	eceipt				
	Mailing Address 1678 BRIDGEWATER DRIVE				м м 11	1		D 30	/ Y	2013	Y
	City LAKE MARY	State FL	Zip Code 32746-4103							80293176	
		1 L	32140-4103	/	Amount	of	Each	Re	ceipt th	is Period	
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	United HealthCare Services Inc	KA VP Acc	Mgmt								
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\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	d PAC (l	Jnited for Health)												
A.	Full Name (Last, First, Middle Initial) KATHERINE KENNY			[Date of	Re	eceip	ot							
	Mailing Address 22408 FITZGERALD DRIVE				M M	/	D	30	/ Y	ууу 2013	Y				
	City	State	Zip Code		Trans	acti	ion l	ID : P	R25648	30323176	3				
	LAYTONSVILLE	MD	20882-2301	A	Amount	of	Eac	h Re	ceipt th	is Period					
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	Primary General Other (specify) ▼		936.00	P/	/R Dedi	uctio	on (S	\$39.0	0 Bi-We	ekly)					
B.	Full Name (Last, First, Middle Initial) PAUL MARDEN				Date of	Re	eceip	ot							
	Mailing Address 718 HICKORY HILL RD				м м 11	/	D	30	/ Y	y y 2013	Y				
	City	State	Zip Code		Trans	acti	ion I	ID : P	R25648	80333176	3				
	FRANKLIN LAKES	NJ	07417-1707	A	Amount	of	Eac	h Re	ceipt th	is Period					
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	Name of Employer United HealthCare Services Inc	Occupation KA VP SIs A													
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 936.00	P/	R Dedu	uctic	on (\$	\$39.00) Bi-We	eekly)					
C.	Full Name (Last, First, Middle Initial) DARREN MOQUIST			[Date of	Re	eceip	ot							
	Mailing Address 1200 NICOLLET MALL #507				м м 11	/	D	о 30	/ Y	үүү 2013	Y				
		State MN	Zip Code							80343176	3				
	MINNEAPOLIS	IVIIN	55403-2408	/	Amount	of	Eac	h Re	ceipt th	is Period					
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	UnitedHealth Group Incorpora	ted PAC (l	Jnited for Health)											
	Full Name (Last, First, Middle Initial) MARK BELLMAN				Date of	Re	ceipt							
-	Mailing Address 5601 VAN WINKLE LN			M M / D P Y										
ī	City	State	Zip Code											
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	Full Name (Last, First, Middle Initial) LISA WRIGHT				Date of	Re	ceipt							
-	Mailing Address 1512 PARK BLVD				M M	/	30		Y	2013	Y			
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-	CHERRY HILL	NJ	08002-3715		Amount	of	Each	Rece	ipt th	is Period				
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	Full Name (Last, First, Middle Initial) TAMMY O'HARE				Date of	Re	ceipt							
	Mailing Address 2420 SAINT GEORGE WAY	(м м 11	/	30		Y	2013	Y			
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	ull Name (Last, First, Middle Initial) KATHRYN RUBIN				Date of	Re	ceipt								
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Α.	JARROD FORBES			[Date of	Re	ceipt						
	Mailing Address 2121 PARK FOREST DRIVE					/		/ Y		Υ			
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	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)									
	Full Name (Last, First, Middle Initial) NORINE YUKON			Date of Receipt								
	Mailing Address 5118 MANSFIELD VIEW COU			11 30 / Y Y Y Y Y								
	City AUSTIN	State TX	Zip Code 78732-1854	Transaction ID : PR2565449031763								
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	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P/R Deduction (\$14.00 Bi-Weekly)								
	Full Name (Last, First, Middle Initial) NEIL MANSUKHANI			Date of Receipt								
	Mailing Address 4215 LAUREL RIDGE CIRCLI	E		11 30 / Y Y Y Y 2013								
	City WESTON	State FL	Zip Code 33331-4012	Transaction ID : PR2567129431763 Amount of Each Receipt this Period								
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	Full Name (Last, First, Middle Initial) DENISE ZAMORE			Date of Receipt								
	Mailing Address 12 NOLAN CIRCLE			11 30 / Y Y Y Y 2013								
	City MANCHESTER	State CT	Zip Code 06042-1777	Transaction ID : PR2567129531763								
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Α.	Full Name (Last, First, Middle Initial) WENDY ARNONE			[Date of	Re	eceipt	t					
	Mailing Address N62W13531 SUNBRUST DR	IVE		11 30 / Y - Y - Y - Y - Y									
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	Full Name (Last, First, Middle Initial) MATTHEW STEARNS				Date of	Re	eceipt	t					
	Mailing Address 5105 CAPE COD COURT			/			/ Y			Y			
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С.	Full Name (Last, First, Middle Initial) CHRISTOPHER PARRILLO				Date of	Re	eceipt	t					
	Mailing Address 9501 WEXCROFT DRIVE					/			/ Y			Y	
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Full Name (Last, First, Middle Initial) C. SHAUN JACQUET			Data at	f Doccint				
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City SUAMICO	State WI	Zip Code 54313-8557					3	
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Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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			Detailed Summary Page		11a		11b		11c	12		
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	y information copied from such Reports and S for commercial purposes, other than using the											
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)									
A.	Full Name (Last, First, Middle Initial) KEVIN CARLSON			[Date of	Re	eceip	ot				
	Mailing Address 4909 WEST SUNNYSLOPE R	OAD			MIN / YYYYY 11 30 2013 Transaction ID : PR2572590031763 Amount of Each Receipt this Period 78.00 P/R Deduction (\$39.00 Bi-Weekly) Date of Receipt 11 30 2013 Transaction ID : PR2572590131763 Amount of Each Receipt this Period							
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в.	Full Name (Last, First, Middle Initial) CHARLES WACKER				Date of	Re	eceip	ot				
	Mailing Address 2747 WEST VIEW DRIVE					/	D		/ Y		Y	
	City	State	Zip Code								3	
	NEW PRAGUE	MN	56071-8989	/	Amount	of	Eac	h Red	ceipt th	is Period		
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	EINIZED RECEIPTS		Detailed Summary Page		11a 13		11b		11c 15		12 16	17
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\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (l	Jnited for Health)									
Α.	Full Name (Last, First, Middle Initial) JAMES HARGIS				Date o	f Re	eceip	ot				
	Mailing Address 1820 ROSEDALE				^M ■ M	/	D	30	/ Y	Y 20	13	Y
	City EDMOND	State OK	Zip Code 73013-6638				-		R25725			3
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В.	Full Name (Last, First, Middle Initial) THOMAS CHEEK				Date o	f Re	eceip	ot				
	Mailing Address P0 B0X 86233		M M	/	D	30	/ Y	201	ү 13	Y		
	City PHOENIX	State AZ	Zip Code 85080		Transaction ID : PR2572590931763 Amount of Each Receipt this Period							
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С.	Full Name (Last, First, Middle Initial) THERESA CLARKE				Date o	f Re	eceip	ot				
	Mailing Address 16652 1/2 GRAND AVE				M M	1	D	30	/ Y	Y 201	ү 13	Y
	City BELLFLOWER	State CA	Zip Code 90706-5038						R2572			3
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SCHEDULE A (FEC Form 3X) _ _ _ _

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Mailing Address 16 CELONOVA PLACE City State Zip Code FOOTHILL RANCH CA 92610-1942 FEC ID number of contributing federal political committee. C Amount of Each Receipt Name of Employer Occupation Dir Underwriting Receipt For: Aggregate Year-to-Date ▼ P/R Deduction (\$14.00 Bi-Note) Full Name (Last, First, Middle Initial) First, Middle Initial) P/R Deduction (\$14.00 Bi-Note)	2013 22591231763							
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicit or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such Reports and Statements may not be sold or used by any person for the purpose of solicit or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such Reports and Statements may not be sold or used by any person for the purpose of solicit or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such Reports and Statements may not be sold or used by any person for the purpose of solicit or for the purposes, other than using the name and address of any political committee to solicit contributions from such Reports and Statements from such Receipt from the section of contributing federal political committee. Name of Employer Occupation Dir Underwriting Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Date of Receipt B. WEI SUN	ng contributions ich committee. 2013 2591231763 this Period							
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Full Name (Last, First, Middle Initial) C. THOMAS WIFFLER Date of Receipt								
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Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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/	UnitedHealth Group Incorporate	ed PAC (I	United for Health)												
Α.	Full Name (Last, First, Middle Initial) MICHAEL MCGINNITY				Date of	Re	eceipt								
	Mailing Address 903 MCINDOE ST				M M / D D / Y Y Y Y Y 11 30 2013										
	City	State	Zip Code		Trans	acti	ion ID	: Pl	R25735	5190	03176	3			
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	Mailing Address 9029 SHEEP RANCH CT			11 30 2013											
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	LAS VEGAS	NV	89143-5432		Amount	of	Each I	Rec	ceipt th	is P	Period				
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	Other (specify)		336.00												
C.	Full Name (Last, First, Middle Initial) JAMIE BURNETT				Date of	Re	eceipt								
	Mailing Address 4625 EWING AVENUE SOU				M M 11	1	D 30		/ Y)13	Y			
		State MN	Zip Code						R25749			3			
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SCHEDULE A (FEC Form 3X)

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A. SHELONDA AGEE Mailing Address 6317 BUNKER DRIVE							/ V	vv	V	
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Full Name (Last, First, Middle Initial) B. LORI VAN HOLMES			Dat	e of l	Receii	ot				
Mailing Address 4117 BRYANT AVENUE	SOUTH						/ Y	Y Y	Y	
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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
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	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (U	Inited for Health)							
Α.	Full Name (Last, First, Middle Initial) JEFFREY MADDOX			Date of Receipt						
	Mailing Address 207 MARY WIL CT	01-1-	Zie Osche	11 30 / Y Y Y Y Y Y Y Y						
	City GREENSBORO	State NC	Zip Code 27455-2262	Transaction ID : PR2575039531763						
	FEC ID number of contributing federal political committee.	С								
	Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify)	Occupation SB KA VP S Aggregate	ls Acct Mgt ⁄ear-to-Date ▼ 336.00	P/R Deduction (\$14.00 Bi-Weekly)						
	Full Name (Last, First, Middle Initial) HOWARD MARGOLIES Mailing Address ONE PAGE DRIVE		<u>, , , , , , , , , , , , , , , , , , , </u>	Date of Receipt						
	City RED BANK	State NJ	Zip Code 07701-5640	11 30 2013 Transaction ID : PR2575050331763 Amount of Each Receipt this Period						
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с.	Full Name (Last, First, Middle Initial) CARY MCCARTY			Date of Receipt						
	Mailing Address 8800 RUMFIELD RD			11 30 2013						
	City NORTH RICHLAND HILLS	State TX	Zip Code 76182-6131	Transaction ID : PR2575059431763						
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	EMIZED RECEIPTS		ach category of the iled Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
or	for commercial purposes, other than using the			erson for the purpose of soliciting contributions to solicit contributions from such committee.						
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (United	for Health)							
Α.	Full Name (Last, First, Middle Initial) MARK ALLEN			Date of Receipt						
	Mailing Address 11359 ENTREVAUX DRIVE	01-1-	0.1	1.1 30 / Y Y Y Y Y 1.1 30						
	City EDEN PRAIRIE		Code 347-2862	Transaction ID : PR2575060231763						
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	Name of Employer United HealthCare Services Inc Receipt For:	Occupation Chief of Staff	Data 🖛	_						
	Primary General Other (specify) ▼	Aggregate Year-to-	336.00	P/R Deduction (\$14.00 Bi-Weekly)						
	Full Name (Last, First, Middle Initial) SANDRA NICHOLS			Date of Receipt						
	Mailing Address 12706 YOUNG LANE		11 30 2013							
	City NORTH POTOMAC		Code 378-6112	Transaction ID : PR2575074531763 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		1000.00						
	Name of Employer United HealthCare Services Inc	MO								
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-	Date ▼ 1500.00	P/R Deduction (\$500.00 Bi-Weekly)						
	Full Name (Last, First, Middle Initial) CHARLES JACOBY			Date of Receipt						
	Mailing Address 3315 IRVING AVE			M = M / D = D / Y = Y = Y = Y Y 11 30 2013						
	City MINNEAPOLIS		Code 408-3321	Transaction ID : PR2575099231763 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		32.00						
	Name of Employer									
	United HealthCare Services Inc									
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-	Date ▼ 384.00	P/R Deduction (\$16.00 Bi-Weekly)						
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NAME OF COMMITTEE (In Full UnitedHealth Group Ir	ncorporated PAC (United	for Health)													
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Mailing Address 5124 WEDMOR			11 30 _ 2013												
City	State Zip C			Trans	acti	on ID : F	PR2575	108331	1763						
NORTH LAS VEGAS	NV 8903	1-0364	Amount of Each Receipt this Period												
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City WEST LINN	State Zip C OR 9706	Code 8-2840				ion ID : I									
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FEC ID number of contributing federal political committee.	C					,			28.0	00					
Name of Employer	Occupation														
United HealthCare Services Inc	Dir Med Clin Ops														
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-D	ate ▼ 336.00	P/f	R Dedi	uctio	on (\$14.(00 Bi-W	eekly)							
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SCHEDULE A (FEC Form 3X) DEAEI

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)							
	5	for each category of the Detailed Summary Page	X 11a 11b 11c 12							
			13 14 15 16 17 berson for the purpose of soliciting contributions to solicit contributions from such committee.							
NAME OF COMMITTEE (In UnitedHealth Grou	Full) p Incorporated PAC (United for Health)								
Full Name (Last, First, Mido A. KELLY BEECHER	le Initial)		Date of Receipt							
Mailing Address 7640 CUR	OSITY AVE		11 30 2013							
City LAS VEGAS	State NV	Zip Code 89131-4792	Transaction ID : PR2575161131763 Amount of Each Receipt this Period							
FEC ID number of contribut federal political committee.	ing C		121.66							
Name of Employer United HealthCare Services Receipt For: Primary Gen Other (specify) ▼	Aggregate		P/R Deduction (\$60.83 Bi-Weekly)							
Full Name (Last, First, Midd B. RON JONES			Date of Receipt							
Mailing Address 10066 ESC	AMBIA BAY CT	Zip Code	11 / 30 2013							
NAPLES	FL	34120-4621	Transaction ID : PR2575163531763 Amount of Each Receipt this Period							
FEC ID number of contribut federal political committee.	ing C		250.00							
Name of Employer United HealthCare Services	nc Occupation									
Receipt For: Primary Gen Other (specify) ▼		Year-to-Date ▼ 750.00	P/R Deduction (\$125.00 Bi-Weekly)							
Full Name (Last, First, Midd C. SCOTT CASSANO	,		Date of Receipt							
Mailing Address 7607 MAP	LE MEADOW STREET		11 30 2013							
City LAS VEGAS	State NV	Zip Code 89131-4665	Transaction ID : PR2575164431763 Amount of Each Receipt this Period							
FEC ID number of contribut federal political committee.	ing C		200.00							
Name of Employer Health Plan of Nevada	Occupation Dir Prov Sv									
Receipt For: Primary Gen Other (specify) ▼		Year-to-Date ▼ 2400.00	P/R Deduction (\$100.00 Bi-Weekly)							
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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only	y one)								
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Any information copied from such Reports	and Statements ma		erson for the	14 purpose of s	15 oliciting	16 contributi	17 ions					
or for commercial purposes, other than us												
NAME OF COMMITTEE (In Full)	orated PAC (I	United for Health)										
Full Name (Last, First, Middle Initial) KRISTIN MOORE			Date of	Receipt								
Mailing Address 9465 DARTRIDGE DR	IVE		M M 11	/ D D 30	/ Y	2013	Y					
City DALLAS	State TX	Zip Code 75238-1873		action ID : P			3					
FEC ID number of contributing federal political committee.	C					28.	00					
Name of Employer United HealthCare Services Inc Receipt For:	Occupation KA Dir Acc	t Mgmt	_									
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 336.00	P/R Ded	uction (\$14.00	0 Bi-We	ekly)						
Full Name (Last, First, Middle Initial) B. MICHAEL PATRICK STAMM			Date of	Receipt								
Mailing Address 6721 MOSSY GLEN D		7.0.1	M M 11									
City FORT MYERS	State FL	Zip Code 33908-4771		action ID : Pl			<u>i</u>					
FEC ID number of contributing federal political committee.	C					80.0	00					
Name of Employer United HealthCare Services Inc	Occupation SVP Ops	1										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 960.00	P/R Ded	uction (\$40.00) Bi-We	ekly)						
Full Name (Last, First, Middle Initial) C. HOWARD GILPIN JR			Date of	Receipt								
Mailing Address 1210 SHEPARD DRIV	E		M M 11	, , , , , , , , , , , , , , , , , , ,	/ Y	y y 2013	Y					
City BLUE BELL	State PA	Zip Code 19422-3481		action ID : P			3					
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Name of Employer	Occupation											
United HealthCare Services Inc Receipt For:	Dir Act Cns											
Primary General Other (specify) ▼	Ayyreyale	Year-to-Date ▼ 936.00	P/R Ded	uction (\$39.0	0 Bi-We	ekly)						
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ITEMIZED RECEIPTS			Use separate schedule(s) (for each category of the			(check only one)							
			Detailed Summary Page		11a 13		11b	11c			17		
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\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)										
A.	Full Name (Last, First, Middle Initial) DONALD REILLY			[Date o	f Re	eceipt						
	Mailing Address 5 LEGHORN LANE				M M	/	D D 30	/ Y	201		1		
	City CROMWELL	State CT	Zip Code 06416-1671	A			i <mark>on ID :</mark> I Each Re						
	FEC ID number of contributing federal political committee.	С					7	7		57.7	8		
	Name of Employer United HealthCare Services Inc	Occupation VP Gen Mg											
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 202.23	P/	R Dec	ductio	on (\$28.8	39 Bi-W	eekly)				
в.	Full Name (Last, First, Middle Initial) KATHLEEN CADMUS				Date o	f Re	eceipt						
	Mailing Address 8426 STONE CREEK CT			M M / D D / Y Y Y Y Y 11 30 2013									
	City CHANHASSEN	State MN	Zip Code 55317-7408	A			i on ID : I Each Re				_		
	FEC ID number of contributing federal political committee.	С					,			20.00)		
	Name of Employer United HealthCare Services Inc	Occupation Dir Bus Pro											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P/	R Ded	luctio	on (\$10.0	00 Bi-We	eekly)				
с.	Full Name (Last, First, Middle Initial) SUSAN KIRKPATRICK				Date o	of Re	eceipt						
	Mailing Address 417 STERLING STREET				M M 11	/	30	/ Y	y 2013		1		
	City LANCASTER	State MA	Zip Code 01523-1847	A			ion ID : Each Re				-		
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An or	y information copied from such Reports and S for commercial purposes, other than using the	Statements ma e name and a	ay not be sold or used by any pound of any pound of any political committee	erson f e to sol	or the licit cor	purp ntrib	oose coutions	of s fro	oliciting	contribu commit	itions tee.
$\Big\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)								
Α.	Full Name (Last, First, Middle Initial) THOMAS RUSSELL				Date of	Re	ceipt				
	Mailing Address 10205 GROOMSBRIDGE RC			M = M / D = D / Y = Y = Y 11 30 2013							
	City JOHNS CREEK	State GA	Zip Code 30022-5645				-			2386317	
	FEC ID number of contributing federal political committee.	С			Amount	101	Each	Re	ceipt th	is Perioo 28	3.00
	Name of Employer United HealthCare Services Inc	Occupation Dir Empl Re									
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в.	Full Name (Last, First, Middle Initial) JOANNE SHUEY				Date of	Re	ceipt				
	Mailing Address 2694 WEST CREEK DRIVE				M M	/	30		/ Y	ү ү 2013	Y
	City FRISCO	State TX	Zip Code 75033-4759		4163176						
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	Name of Employer United HealthCare Services Inc	Occupation KA VP SIs									
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с.	Full Name (Last, First, Middle Initial) THOMAS CHOATE				Date of	Re	ceipt				
	Mailing Address 209 SOUTHPOND RD				м м 11	/	30		/ Y	2013	Y
	City GLASTONBURY	State CT	Zip Code 06033-1712							2478317 is Period	
	FEC ID number of contributing federal political committee.	С					,	T IC			0.00
	Name of Employer	Occupation	1	_							
	United HealthCare Services Inc	Chief Grow	th Off								
	Receipt For: Primary General Other (specify)	Year-to-Date ▼ 800.00	P/	/R Ded	uctio	on (\$1	00.	00 Bi-W	/eekly)		
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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)								
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			erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Fu											
UnitedHealth Group I	ncorporated PAC (l	Jnited for Health)									
Full Name (Last, First, Middle I TERRY JONES	nitial)		Date of Receipt								
Mailing Address 11856 NW 127	'H MANOR		11 30 2013								
City	State	Zip Code	Transaction ID : PR2575279231763								
CORAL SPRINGS	FL	33071-5035	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		28.00								
Name of Employer	Occupation	1	-								
United HealthCare Services Inc	KA Dir Acct	Mgmt									
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Other (specify) ▼		P/R Deduction (\$14.00 Bi-Weekly)									
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Full Name (Last, First, Middle I B. SAMANTHA MARCARIO			Date of Receipt								
Mailing Address 2117 CAMP IN	DIANHEAD ROAD		11 30 2013								
City	State	Zip Code	Transaction ID : PR2575287831763								
LAND O LAKES	FL	Amount of Each Receipt this Period									
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Full Name (Last, First, Middle I c. TOM BEAUREGARD	nitial)		Date of Receipt								
Mailing Address 161 SPRING \	/ALLEY ROAD										
			11 30 2013								
City RIDGEFIELD	State CT	Zip Code 06877-1219	Transaction ID : PR2575295131763								
		00077-1219	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		945.24								
Name of Employer	Occupation	l									
United HealthCare Services Inc	Pres United	d Essentials									
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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only	/ one)							
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NAME OF COMMITTEE (In Full)	-										
> UnitedHealth Group Incorp	orated PAC (I	United for Health)									
Full Name (Last, First, Middle Initial) JOHN MONAGHAN			Date of	Receipt							
Mailing Address 450 EDGEWOOD AVE			M M / D D / Y Y Y Y Y 11 30 2013								
City WESTFIELD	State NJ	Zip Code 07090-4353	Trans	action ID : PR	2575296	831763					
FEC ID number of contributing federal political committee.	С				1 IIIS	93.2	26				
Name of Employer United HealthCare Services Inc Receipt For:	Occupation Dir Ntwk Pr	gms									
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 279.78	P/R Ded	ly)							
Full Name (Last, First, Middle Initial) B. CLARE GROCHOWSKI			Date of	Receipt							
Mailing Address 205 ALAPOCAS DRIVE			1 <u>1</u>	/ D D 30		013	Y				
City WILMINGTON	State DE	Zip Code 19803-4504		action ID : PR							
FEC ID number of contributing federal political committee.	C				,	28.0)0				
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Full Name (Last, First, Middle Initial) C. BRADLEY TINNERMON			Date of	Receipt							
Mailing Address 845 HICKORY SHOAL	S RD		M M 11	/ D D 30		2013	Y				
City MARIETTA	State GA	Zip Code 30064-1182		action ID : PR			;				
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NAME OF COMMITTEE (In Full)											
> UnitedHealth Group Incorpo	orated PAC (I	Jnited for Health)									
Full Name (Last, First, Middle Initial)											
A. DAVID WALSH			Date of	Receipt							
Mailing Address 2158 CARROLL AVENU	E		11 30 _ 2013 _								
City	State	Zip Code		action ID : PR2		3					
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United HealthCare Services Inc Receipt For:	Dir Regl Aff		_								
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Full Name (Last, First, Middle Initial) B. JAN GRIMM			Date of	Receipt							
Mailing Address 3608 WEST 85TH STRE	ET		M M	· / D D /	Y Y Y	Y					
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City LEAWOOD	State KS	Zip Code 66206-1353		of Each Recei		3					
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federal political committee.	С				104	.28					
Name of Employer	Occupation	1	_								
United HealthCare Services Inc	Mkt Sls SVI	P Optuml									
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Other (specify)		260.70	P/R Dedu	iction (\$52.14 B	i-Weekly)						
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Full Name (Last, First, Middle Initial) C. JEFFREY GOLDBERG			Dete of								
Mailing Address 3410 BRADLEY LANE			Date of	Receipt	YYYY	Y					
			11	30	2013						
City CHEVY CHASE	State MD	Zip Code 20815-3262		action ID : PR2		3					
		20013-3202	Amount	of Each Recei	ot this Period	_					
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Name of Employer	Occupation		_								
United HealthCare Services Inc		kel Ex Optuml									
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Primary General		936.00	P/R Ded	uction (\$39.00 E	i-Weekly)						
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	y information copied from such Reports and S for commercial purposes, other than using the				or the		pose of						
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate										-		
A.	Full Name (Last, First, Middle Initial) PATRICK IMDIEKE			[Date of	Re	ceipt						
	Mailing Address 15900 WHITE PINE DRIVE			M = M / D = D / Y = Y = Y = Y 11 30 2013									
	City WAYZATA	State MN	Zip Code 55391-2125				ion ID :				3		
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	Primary General Other (specify) V	Aggregate	Year-to-Date ▼ 240.00]	'R Dedi	uctio	on (\$10.0	00 Bi-We	ekly	/)			
	Full Name (Last, First, Middle Initial) MICHAEL TELESKY				Date of	Re	eceipt						
	Mailing Address 2602 PENNINGTON PLACE			11 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							Y		
	City VALPARAISO	State IN	Zip Code 46383-9163		Transaction ID : PR257535093176 Amount of Each Receipt this Period								
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с.	Full Name (Last, First, Middle Initial)				Date of	Re	eceipt						
	Mailing Address 192 HOMEWOOD DRIVE				м м 11	1	D D 30	/ Y)13	Y		
	City CLINTON	State NY	Zip Code 13323-1512				ion ID : Each Re				3		
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	Name of Employer	Occupation		_									
	United HealthCare Services Inc	Assc Dir Se	ervice Acct Mgmt										
	Receipt For: Primary General	Aggregate	Year-to-Date ▼				(A + -		• •	`			
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b		11c 15	12	17		
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (l	Jnited for Health)										
Full Name (Last, First, Middle Initial) A. CHRIS GALANOS			C	ate of	Re	ceip	ot					
Mailing Address 308 PARK VALLEY	2: -	7. 0.		M M 1_1	/	L	30		2013			
City COPPELL	State TX	Zip Code 75019-5368							37003176	3		
FEC ID number of contributing federal political committee.	C			anount	U	⊨ac	ii KeC	eipt th	iis Period 20	.00		
Name of Employer United HealthCare Services Inc	Occupation Dir Prod											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P/	R Dedu	uctic	on (\$	\$10.00) Bi-We	eekly)			
Full Name (Last, First, Middle Initial) B. JOHN WILSON	1			ate of	Re	ceip	ot					
Mailing Address 6980 E SAHAURO DRIVE APT #3065				™M 1_1	/	D	30	/ Y	2013	Y		
City SCOTTSDALE	State AZ	Zip Code 85254-6149							37243176 iis Period	3		
FEC ID number of contributing federal political committee.	С			121.66								
Name of Employer United HealthCare Services Inc	Occupation VP Bus Adv											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 243.32	P/I	P/R Deduction (\$60.83 Bi-Weekly)								
Full Name (Last, First, Middle Initial) C. STEVE MORGAN	I			ate of	Re	ceip	ot					
Mailing Address 1252 W 71ST TERRACE				м м 11	/	D	30	/ Y	ү ү 2013	Y		
City KANSAS CITY	State MO	Zip Code 64114-1238							37483176 iis Period			
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Name of Employer	of Employer Occupation											
United HealthCare Services Inc	VP Gen Mg	mt										
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	ny information copied from such Reports and for commercial purposes, other than using the									
$\overline{)}$	NAME OF COMMITTEE (In Full)									
	UnitedHealth Group Incorporat	ed PAC (I	United for Health)							
/	Full Name (Last, First, Middle Initial)									
Α.	KATHLEEN DOLL				Date of	Re	ceipt			
	Mailing Address 3184 MULLIGAN LANE				M M	1	30	/ Y	2013	Y
	City	State	Zip Code			acti		PR2575	38513176	3
	CHASKA	MN	55318-3226		Amount	of	Each R	eceipt th	nis Period	
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	federal political committee.	U			<u> </u>	_	7	7		
	Name of Employer	Occupation	l							
	United HealthCare Services Inc	VP SIs Opt	uml							
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	Other (specify)		240.00	 '	P/R Dedu	JCtic	on (\$10.	00 BI-W	эекіу)	
			y y x							
B.	Full Name (Last, First, Middle Initial) GREGORIO CORTEZ				Date of	Re	ceipt			
	Mailing Address 7201 RANCH RD 2222				M M	/	DD	/ Y	Y Y	Y
	APT 2322		Zip Code		11		30	L	2013	
	City	State TX				-		39433176	3	
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	Name of Employer United HealthCare Services Inc	Occupation	l							
		Med Dir								
	Receipt For:	Aggregate	Year-to-Date ▼	_ _		. atia	m (@11)			
	Other (specify) ▼		, 336.00		P/R Dedu	ICTIC	on (\$14.0	JO BI-446	екіу)	
<u> </u>	Full Name (Last, First, Middle Initial)	I			Date of	Be	ceint			
	Mailing Address 6520 JAYCOX ROAD				M M			/ Y	YY	Y
					11		30		2013	
	City GALENA	State OH	Zip Code 43021-9530	-					39523176	3
			43021 3330		Amount	of	Each R	eceipt th	nis Period	_
	FEC ID number of contributing federal political committee.	С			L.		7	7	30	.00
	Name of Employer	Occupation	l							
	United HealthCare Services Inc	Med Dir								
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General		360.00	י ר	P/R Dedu	uctio	on (\$15.	00 Bi-W	eekly)	
	Other (specify)	300.00	- 1-							
	UBTOTAL of Receipts This Page (optional)	1				-			78.	00
	This rage (optional)			▶ 		-	7	- 7		
Т	OTAL This Period (last page this line number	only)					7			

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PAGE 156 OF

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	information copied from such Reports and to commercial purposes, other than using th							e of s			
\ r	VAME OF COMMITTEE (In Full)										
	UnitedHealth Group Incorporat	ed PAC (l	Jnited for Health)								
	Full Name (Last, First, Middle Initial) CAROL GOTHARD				Date of	Re	ceip	pt			
_	Aailing Address 16492 BROOKLANE BOULE	VARD			м м 1_1	1		30	/ Y	2013	Y
		State	Zip Code		Trans	acti	on	ID : P	R2575	4191317	63
	NORTHVILLE	MI	48168-8417	_	Amount	of	Ead	ch Re	ceipt th	nis Perioo	1
	EC ID number of contributing ederal political committee.	С					7		ŋ	22	2.22
Ī	Name of Employer	Occupation									
	Jnited HealthCare Services Inc	Dir Finance									
F	Receipt For:	Aggregate	Year-to-Date ▼								
	Other (specify)		777.77		/R Ded	uctio	on ((\$111.	11 Bi-V	Veekly)	
	Full Name (Last, First, Middle Initial) JERI LOSE				Date of	Re	cei	pt			
_	Mailing Address 9995 DELL ROAD				M M	/		30	/ Y	2013	Y
C	Dity	State	Zip Code		Trans	acti	on	ID : P	R25754	41983176	53
Ē	EDEN PRAIRIE	MN 55347-3524								nis Period	l
	EC ID number of contributing ederal political committee.	С					7		- 7	200	0.00
	Name of Employer Inited HealthCare Services Inc	Occupation VP Info Tec	h								
Ē	Receipt For: Primary General Other (specify) V	Aggregate	Year-to-Date ▼ 2400.00	P	/R Dedu	uctic	on (:	\$100.	00 Bi-W	/eekly)	
	Full Name (Last, First, Middle Initial) KARIN O'HARA				Date of	Re	ceip	pt			
N	Aailing Address 7138 MCCANN COURT				м м 11	/		30	/ Y	2013	Y
	Dity	State	Zip Code		Trans	acti	ion	ID : F	R2575	4287317	63
_	SAVAGE	MN	55378-3600		Amount	of	Ead	ch Re	ceipt th	nis Perioo	1
	EC ID number of contributing ederal political committee.	С					,		,	25	0.00
Ī	Name of Employer	Occupation									
ι	Jnited HealthCare Services Inc	VP Accting									
F	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General	33 99		F	/R Ded	uctio	on ((\$125.	00 Bi-V	Veekly)	
	Other (specify)		750.00								
su	BTOTAL of Receipts This Page (optional)			•					-1	672	22

Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
			13 14 15 16 person for the purpose of soliciting contributions
	the name and a	ddress of any political committe	e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (United for Health)	
Full Name (Last, First, Middle Initial) A. JEFFERSON WALTERS			Date of Receipt
Mailing Address 8308 CEDAR HILL ROAD)		11 30 2013
City WAYNESVILLE	State OH	Zip Code 45068-8969	Transaction ID : PR2575445831763 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		28.00
Name of Employer United HealthCare Services Inc	Occupation Dir Gen Mg		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 336.00	P/R Deduction (\$14.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) B. MILLA HAUTMAN	·		Date of Receipt
Mailing Address 410 SYCAMORE CIRCLE			11 30 / Y Y Y Y Y 2013
City PLYMOUTH	State MN	Zip Code 55441-5667	Transaction ID : PR2575447131763
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer United HealthCare Services Inc	Occupation VP Info Teo		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 219.00	P/R Deduction (\$73.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) C. ROBERT BOOKER			Date of Receipt
Mailing Address 16632 HANSON BLVD N	W		11 30 2013
City ANDOVER	State MN	Zip Code 55304-2089	Transaction ID : PR2575447231763 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		121.66
Name of Employer United HealthCare Services Inc	Occupation VP IT	1	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 243.32	P/R Deduction (\$60.83 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)		295.66
TOTAL This Period (last page this line num	ber only)		

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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			Detailed Summary Page		11a		11b	11c	Н	12	<u> </u>
	y information copied from such Reports and										
or	for commercial purposes, other than using th										
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (l	Jnited for Health)								
A.	Full Name (Last, First, Middle Initial)			[Date of	Re	eceipt				
	Mailing Address 7353 EAST SKYLINE DRIVE				M M	/	D D 30	/ Y)13	Y
	City	State	Zip Code		Trans	acti	ion ID : F	PR2575	4486	31763	
	ORANGE	CA	92867-6451	/	Amount	of	Each Re	eceipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	С				_	<u></u>		_	28.	00
	Name of Employer	Occupation									
	United HealthCare Services Inc	VP Underw	riting								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		336.00	P/	/R Ded	uctio	on (\$14.0	0 Bi-We	∍ekly	r)	
	Full Name (Last, First, Middle Initial) THOMAS BARTHEL	l			Date of	Re	eceipt				
	Mailing Address 9713 HEMLOCK LANE NOR	ТН			M M	/	30	/ Y	ү 20	ү 13	Y
	City	State	Zip Code		Trans	acti	ion ID : F	PR25754	<u>1843</u>	31763	
	MAPLE GROVE	MN	55369-3665	/	Amount	of	Each Re	eceipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	С					7	- 7	_	91.2	26
	Name of Employer United HealthCare Services Inc	Occupation Dir IT									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 273.78	P/	'R Dedi	uctio	on (\$45.6	i3 Bi-W€	ekly)	
с.	Full Name (Last, First, Middle Initial) CLINTON WOLF				Date of	Re	eceipt				
	Mailing Address 2647 N SOUTHPORT				M M 11	1	D D 30	/ Y	ү 20	, 13	Y
	City	State IL	Zip Code 60614-1227				ion ID : F				6
	CHICAGO	IL	00014-1227	/	Amount	of	Each Re	eceipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	С				_	,		_	30.	00
	Name of Employer	Occupation									
	United HealthCare Services Inc	Dir Mktg Bu	is Dev								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Other (specify)		360.00	P.	/R Ded	ucti	on (\$15.(00 Bi-We	эekly	/)	
s	UBTOTAL of Receipts This Page (optional)			•			л. I.	- 1		149.2	26
T	OTAL This Period (last page this line number	only)					7	- 7	_		

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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ITEMIZED RECEIPTS		Detailed Summary Page		11a		111	b	11c		12	
A				13		14		15		16	17
Any information copied from such Reports or for commercial purposes, other than usi											
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpo	prated PAC (I	Jnited for Health)									
Full Name (Last, First, Middle Initial) A. MICHELE RAMIREZ				Date of	Re	eceij	pt				
Mailing Address 37 CALAIS ROAD				M M	1		30	/ Y	ү 20) 13	Y
City	State	Zip Code		Trans	acti	ion	ID : P	R2575	5024	31763	3
RANDOLPH	NJ	07869-3531		Amount	t of	Ead	ch Re	ceipt th	iis Pe	eriod	
FEC ID number of contributing federal political committee.	С					,		y	_	28.	00
Name of Employer	Occupation	l									
United HealthCare Services Inc	Human Cap	bital Partner									
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General Other (specify) ▼		336.00] P	/R Ded	uctio	on ((\$14.0	0 Bi-We	ekly))	
Full Name (Last, First, Middle Initial) B. DEBORAH SUNDAL				Date of	Re	ecei	pt				
Mailing Address 5109 WEST 66TH ST				M M	/		30	/ Y	201	ү 13	Y
City	State	Zip Code		Trans	acti	ion	ID : P	R2575	5029:	31763	
EDINA	MN	55439-1429		Amount	t of	Ead	ch Re	ceipt th	iis Pe	eriod	
FEC ID number of contributing federal political committee.	С					7		J		28.	00
Name of Employer United HealthCare Services Inc	Occupation Dir Proj Mg										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P.	/R Ded	uctio	on ((\$14.00	0 Bi-We	ekly))	
Full Name (Last, First, Middle Initial) C. ALDIS HAGEN				Date of	Re	eceij	pt				
Mailing Address 14101 ROCKAWAY BE	ACH BOULEVARD			M M 11	1		30	/ Y	20 [°]	13 13	Y
City	State	Zip Code		Trans	act	ion	ID : P	R2575	5067	31763	3
BELLE HARBOR	NY	11694-1243	'	Amount	t of	Ead	ch Re	ceipt th	is Pe	eriod	
FEC ID number of contributing federal political committee.	C					7		7		20.	00
Name of Employer	Occupation	 	_								
United HealthCare Services Inc	Dir Compli										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P	/R Ded	ucti	ion ((\$10.0	0 Bi-We	eekly	')	
SUBTOTAL of Receipts This Page (option	,				-	7		-7	-	76.0	00

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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PAGE 160 OF

			Detailed Summary Page		11a		11b	11c		12	<u> </u>
Ar	y information copied from such Reports and S	Statements ma	ay not be sold or used by any p	erson f	13 or the	pur	14 pose of s	15 oliciting	J Cor	16 ntributi	0ns
	for commercial purposes, other than using the										
\backslash	NAME OF COMMITTEE (In Full)										
/	UnitedHealth Group Incorporate	ed PAC (l	United for Health)								
٩.	Full Name (Last, First, Middle Initial) KARL ULFERS			Г	Date of	Re	eceint				
	Mailing Address 339 W ELMWOOD PLACE			-	M = M	_		/ Y	Y	Y	Y
					11		30			013	
	City	State	Zip Code		Trans	acti	ion ID : F	R2575	5092	31763	3
	MINNEAPOLIS	MN	55419-1349	/	Amount	of	Each Re	ceipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	С					,	7	_	121.	66
	Name of Employer	Occupation									
	United HealthCare Services Inc	VP Gen Mg	mt								
	Receipt For:	Aggregate	Year-to-Date 🔻								
	Other (specify)		243.32	P/	'R Ded	uctio	on (\$60.8	3 Bi-We	ekly	/)	
			1								
3.	Full Name (Last, First, Middle Initial)				Date of	Re	eceipt				
	Mailing Address 2711 CRESCENT RIDGE RO	AD			M M	/	D D	/ Y	Y	Y	Y
					11		30		20	13	
	City	State	Zip Code				on ID : P				
	MINNETONKA	MN	55305-2809	/	Amount	of	Each Re	ceipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	С				_	3	7	_	384.	00
	Name of Employer United HealthCare Services Inc	Occupation VP Ops									
	Receipt For:		Year-to-Date ▼	_							
	Primary General	, iggi egute		P/	R Dedu	uctic	on (\$192.	00 Bi-W	/eek	ly)	
	Other (specify) 🔻		, 2112.00								
	Full Name (Last, First, Middle Initial)										
С.	PAUL HEBERT			[Date of	Re	eceipt				
	Mailing Address 54 GREENWOOD DRIVE				м м 11	/	D D 30	/ Y) 13	Y
	City SOUTH WINDSOR	State CT	Zip Code 06074-2957				ion ID : F				3
		01	00074-2937	/	Amount	of	Each Re	ceipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	С				_	7	7	_	250.	00
	Name of Employer	Occupation									
	United HealthCare Services Inc	CEO Spclty	Bens Dntl								
	Receipt For:	Aggregate	Year-to-Date V								
	Primary General		3000.00	P/	R Ded	uctio	on (\$125	00 Bi-V	Veek	ly)	
	Other (specify)										
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			Detailed Summary Page	e X 11a 11b 11c 12 13 14 15 16							
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	y information copied from such Reports and S for commercial purposes, other than using the										
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)								
A.	Full Name (Last, First, Middle Initial) ERIC KAPLAN				Date of	Re	ceipt				
	Mailing Address 193 PARTRIDGE LANDING				м м 11	/	30	/ Y		о 13	Y
	City	State	Zip Code		Trans	acti	ion ID : I	PR2575	524(03176:	3
	GLASTONBURY	СТ	06033-2849	/	Amount	t of	Each Re	eceipt th	nis F	Period	
	FEC ID number of contributing federal political committee.	С						,	_	28.	00
	Name of Employer	Occupation									
	United HealthCare Services Inc	NA VP SIs									
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify)		336.00		/R Ded	uctio	on (\$14.0	00 Bi-W	eekl	y)	
B.	Full Name (Last, First, Middle Initial) WILLIAM JETER				Date of	Re	ceipt				
	Mailing Address 9557 WOODRIDGE CIRCLE				M M 11	/	30	/ Y) 13	Y
	City	State	Zip Code		Trans	acti	on ID : F	PR2575	5281	131763	6
	EDEN PRAIRIE	MN	55347-2744	/	Amount	of	Each Re	eceipt th	nis F	Period	
	FEC ID number of contributing federal political committee.	С					7	7	_	28.	00
	Name of Employer United HealthCare Services Inc	Occupation VP IT									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P/	/R Ded	uctic	on (\$14.0	0 Bi-W	eekly	y)	
с.	Full Name (Last, First, Middle Initial) THOMAS HAMLIN				Date of	Re	ceipt				
	Mailing Address 2800 NEWMAN				M M 11	/	D D 30	/ Y) 13	Y
	City	State	Zip Code		Trans	acti	ion ID : I	PR2575	536	23176	3
	HOUSTON	ТХ	77098-1408	/	Amount	of	Each Re	eceipt th	nis F	Period	
	FEC ID number of contributing federal political committee.	С					7 I.	,	_	500	00
	Name of Employer	Occupation									
	United HealthCare Services Inc	Behvrl Med	Dir								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		500.00	P	/R Ded	uctio	on (\$250	.00 Bi-V	Veeł	kly)	
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SCHEDULE A (FEC Form 3X) _ _ _ _ _ _

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IT.	EMIZED RECEIPTS		Use separate schedule(s)	(che	eck on	ly or	ne)				
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	y information copied from such Reports and St for commercial purposes, other than using the									ibutio	
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	d PAC (l	Jnited for Health)								
A.	Full Name (Last, First, Middle Initial) NADINE HAUF				Date o	f Re	ceipt				
	Mailing Address 1813 SAN LEANNA				M M	/	30) / Y	2013		1
	City ALLEN	State TX	Zip Code 75013-4741	A			-	PR2575 Receipt th			
	FEC ID number of contributing federal political committee.	С					7	7		20.0	D
	Name of Employer United HealthCare Services Inc	Occupation Dir Med Clir									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P/	/R Dec	luctio	on (\$10	.00 Bi-W	eekly)		
в.	Full Name (Last, First, Middle Initial)				Date o	f Re	ceipt				
	Mailing Address N3681 VINE RD				M M	1	30		2013		
	City FREEDOM	State WI	Zip Code 54913-6928	A			-	PR2575 Receipt th			
	FEC ID number of contributing federal political committee.	С					,			28.00)
	Name of Employer United HealthCare Services Inc	Occupation KA Mgr Mkt	Svc Acct Mgr								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P/	R Ded	luctio	on (\$14	.00 Bi-W	eekly)		
C.	Full Name (Last, First, Middle Initial)				Date o	f Re	ceipt				
	Mailing Address 271 NW 42ND AVE				^M M 11	/	D 10		2013		1
	City COCONUT CREEK	State FL	Zip Code 33066-1823	A				PR2575 Receipt th			
	FEC ID number of contributing federal political committee.	С					,			28.0	0
	Name of Employer	Occupation		-							
	United HealthCare Services Inc	Dir Ntwk Pr	icing								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P/	/R Dec	ducti	on (\$14	.00 Bi-W	eekly)		
s	UBTOTAL of Receipts This Page (optional)									76.00)
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			Detailed Summary Page	X	11a		11	b	11c		12	
		copied from such Reports and Statements may not be sold purposes, other than using the name and address of any DMMITTEE (In Full) alth Group Incorporated PAC (United for ast, First, Middle Initial) COURNOYER ss 5333 PAINTED MIRAGE RD State Zip Code NV 89149-03 er of contributing C al committee. Occupation Assc Dir RN Aggregate Year-to-Date ist, First, Middle Initial) Aggregate Year-to-Date C C ist, First, Middle Initial) C H WINSOR State Zip Code Ss 21 THOMPSON HILL ROAD C C Le State Zip Code Cover Occupation C Care Services Inc C C Cover Occupation C Care Services Inc C C Cover Occupation C Care Services Inc Aggregate Year-to-Date C Cover Occupation C C Care Services Inc Aggregate Year-to-Date	Dotaliou Outliniary Lage		13		14		15		16	17
An or	for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any pe ddress of any political committee	erson f e to sol	or the icit co	pur ntrib	pos outic	e of ons fr	solicitin om suc	g co ch co	ntribut mmitt	ions ee.
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)									
Α.	Full Name (Last, First, Middle Initial) BEVERLY COURNOYER			[Date o	f Re	ecei	pt				
	Mailing Address 5333 PAINTED MIRAGE RD				м м 11	/		30	/		у 013	Y
	City				Trans	sacti	ion	ID : I	PR2575	5820	63176	3
	LAS VEGAS	NV	89149-0309	#	Amoun	t of	Ea	ch Re	eceipt t	his F	Period	
	FEC ID number of contributing federal political committee.	С					,		,		28	.00
	Name of Employer United HealthCare Services Inc											
	Receipt For:			\neg								
		Aggregate	336.00	P/	'R Dec	luctio	on	(\$14.0	00 Bi-W	eekl	()	
В.	Full Name (Last, First, Middle Initial)				Date o	f Re	ecei	pt				
	Mailing Address 21 THOMPSON HILL ROAD				M M	/	I	30	/ 9)13	Y
	City	State	Zip Code		Trans	acti	ion	ID : F	R2575			3
	COLLINSVILLE	СТ	06019-3532	A	Amoun	t of	Ea	ch Re	eceipt t	his F	eriod	
	FEC ID number of contributing federal political committee.	С					7		- 1		833.	34
	Name of Employer United HealthCare Services Inc											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1666.68	P/	R Ded	uctio	on (\$416	.67 Bi-V	Veek	ly)	
с.	Full Name (Last, First, Middle Initial)				Date o	f Re	ecei	pt				
	Mailing Address 1612 CARNOUSTIE DRIVE				M M 11	/		30	/ 1)13	Y
	City		•		Trans	sact	ion	ID : I	PR2575	5583	33176	3
	PASADENA	MD	21122-6674	/	Amoun	t of	Ea	ch Re	eceipt t	his F	eriod	
	FEC ID number of contributing federal political committee.	С					,				104	.28
	Name of Employer	Occupation		\neg								
	United HealthCare Services Inc	Plan Pres										
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 260.70	P	R Dec	luctio	on	(\$52.^	14 Bi-W	/eekl	y)	
s	UBTOTAL of Receipts This Page (optional)		······				-				965.	62

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

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check or	nly or	ne)			
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			13		14	15	16	17
Any information copied from such Reports a or for commercial purposes, other than usir								
NAME OF COMMITTEE (In Full)	0	, , , , , , , , , , , , , , , , , , ,						
UnitedHealth Group Incorpo	orated PAC (United for Health)						
Full Name (Last, First, Middle Initial) A. MICHAEL PETEROY			Date	of Re	eceipt			
Mailing Address 1004 PHILLIPS STREE	Г		11	M /	D D D 30	/ Y	2013	Y
City	State	Zip Code	Tran	sact	ion ID : I	PR2575	585631763	3
VISTA	CA	92083-7171	Amou	nt of	Each Re	eceipt th	nis Period	
FEC ID number of contributing federal political committee.	С			_	7	7	78.	00
Name of Employer	Occupation	1						
United HealthCare Services Inc	Dir Bus Pro	ocess						
Receipt For:	Aggregate	Year-to-Date ▼						
Primary General		936.00	P/R De	ducti	on (\$39.0	00 Bi-W€	ekly)	
Other (specify) 🔻		350.00						
Full Name (Last, First, Middle Initial) B. DEBORAH JORGE			Date	of Re	eceipt			
Mailing Address 140 OLD BAY RD			11	M /	30	/ Y	y y 2013	Y
City	State	Zip Code	Tran	sact	ion ID : F	PR2575	593631763	\$
BELCHERTOWN	MA	01007-9348	Amou	nt of	Each Re	eceipt th	nis Period	
FEC ID number of contributing federal political committee.	С				,		28.	00
Name of Employer	Occupation	1						
United HealthCare Services Inc	Dir Comm							
Receipt For:	Aggregate	Year-to-Date V						
Other (specify)		, 336.00	P/R De	ducti	on (\$14.()0 Bi-We	ekly)	
Full Name (Last, First, Middle Initial) C. DAVID STAPLES			Date	of Re	eceipt			
Mailing Address 9170 WOODLAND DR			M 11		D D 30	/ Y	2013	Y
City	State	Zip Code	Trar	sact	ion ID : I	PR2575	63393176	3
MINNETRISTA	MN	55375-4515	Amou	nt of	Each Re	eceipt th	nis Period	
FEC ID number of contributing federal political committee.	С				,		81.	.10
Name of Employer	Occupation	1						
United HealthCare Services Inc	Dir Cust Se	ervice						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 283.85	P/R De	ducti	on (\$40.	55 Bi-We	ekly)	
		7 7						
SUBTOTAL of Receipts This Page (option	al)				7	7	187.	10
TOTAL This Period (last page this line nu	mber only)	•						

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

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	EMIZED RECEIPTS	ion copied from such Reports and Statements may not be sold or used to] 11k	b	11c		12	
					13		14		15		16	17
	for commercial purposes, other than using the											
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	Jnited for Health)									
Α.	Full Name (Last, First, Middle Initial) BRIAN THOMPSON				Date of	Re	eceip	pt				
	Mailing Address 17829 63RD AVE N				M M	/	D	30	/ Y		013	Y
	City	State	Zip Code		Trans	acti	ion	ID : P	R2575	6346	631763	3
	MAPLE GROVE	MN	55311-4650		Amount	of	Eac	ch Re	ceipt th	nis P	Period	
	FEC ID number of contributing federal political committee.	С					7		7	_	333.	34
	Name of Employer	Occupation	 									
	United HealthCare Services Inc	Bus Segme	nt CFO									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		666.68] ^P	P/R Ded	uctio	ion (\$166.	67 Bi-V	Veek	dy)	
в.	Full Name (Last, First, Middle Initial) JAN HENRY	1			Date of	Re	eceip	pt				
	Mailing Address 116 KANAPUU PLACE				M M	/	D	30	/ Y)13	Y
	City	State	Zip Code		Trans	acti	ion	ID : P	R2575	6368	31763	;
	KAILUA	HI	96734-4186	·	Amount	of	Eac	ch Re	ceipt th	nis P	Period	
	FEC ID number of contributing federal political committee.	С					7		7	_	28.	00
	Name of Employer United HealthCare Services Inc	Occupation Dir Compli										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P	/R Dedu	uctio	on (\$	\$14.0	0 Bi-We	ekly;	()	
с.	Full Name (Last, First, Middle Initial) TERRENCE CLARK	·			Date of	Re	eceip	pt				
	Mailing Address 8 COOPER AVENUE				M M 11	1	D	30	/ Y)13	Y
	City EDINA	State MN	Zip Code 55436-1315						PR2575			3
		1411 1	JJ 1 JJ ⁻ IJIJ	- `	Amount	of	Eac	ch Re	ceipt th	nis P	'eriod	
	FEC ID number of contributing federal political committee.	С					3		7		194.	00
	Name of Employer	Occupation										
	United HealthCare Services Inc	Bus Segme	ent CMO									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2328.00] F	P/R Ded	ucti	ion ((\$97.0	0 Bi-W	eekly	y)	
\vdash	UBTOTAL of Receipts This Page (optional)			•			,	-	- 7	-	555.3	34
Т	OTAL This Period (last page this line numbe	r only)	•••••••	•								_

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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			Detailed Summary Page		11a 13		11b	-	11c 15		12 16	1 17
	y information copied from such Reports and S for commercial purposes, other than using the				or the		pose		oliciting		ntributi	ions
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate							0 110		1 001		
	Full Name (Last, First, Middle Initial) NEIL COLLINS			[Date of	Re	ceipt					
	Mailing Address 8465 MISSION HILLS LANE				M M	/		D 30	/ Y		13	Y
	City CHANHASSEN	State MN	Zip Code 55317-7712						R2575			3
	FEC ID number of contributing federal political committee.	С			Amount	OT	Eacr	i He	ceipt th		eriod 28.	00
	Name of Employer United HealthCare Services Inc	Occupation Dir Bus Pro	cess									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00] Р/	'R Dedi	uctio	on (\$	14.0	0 Bi-We	eekly)	
	Full Name (Last, First, Middle Initial) BENTON DAVIS				Date of	Re	ceipt					
	Mailing Address 9825 NORTH 53RD PLACE				™ ■ M 11	/		D 30	/ Y	20		Y
	City PARADISE VALLEY	State AZ	Zip Code 85253-1634	-					R25756 ceipt th			5
	FEC ID number of contributing federal political committee.	С					7				1000.(00
	Name of Employer United HealthCare Services Inc	Occupation VP GM Clin	Comnty Ntwks									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1500.00	P/	R Dedu	uctio	on (\$	500.	00 Bi-W	/eekl	y)	
	Full Name (Last, First, Middle Initial)			[Date of	Re	ceipt					
	Mailing Address 445 CLARA #24				м м 11	/		D 30	/ Y	ү 20	ү 13	Y
	City SAINT LOUIS	State MO	Zip Code 63112-4507	-					R2575 ceipt th			3
	FEC ID number of contributing federal political committee.	С					7				100.	00
	Name of Employer	Occupation										
	United HealthCare Services Inc	PS Dir Stra	Accts									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1200.00] P.	/R Ded	ucti	on (\$	50.0	0 Bi-We	eekly	')	
s	JBTOTAL of Receipts This Page (optional)										1128.0	00

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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		Detailed Summary Page		11a		11b	11c	12	
				13		14	15	16	17
Any information copied from such Reports ar or for commercial purposes, other than using									
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpor	ated PAC (I	Jnited for Health)							
Full Name (Last, First, Middle Initial) A. RONALD GONG				Date of	Re	ceipt			
Mailing Address 2240 SOUTH MOON VIE	W DRIVE			M M	1	D D 30	/ Y	у у 2013	Y
City	State	Zip Code		Trans	acti	ion ID : I	PR25756	5153176	3
HACIENDA HEIGHTS	CA	91745-5739	A	۱mount	t of	Each Re	eceipt thi	s Period	
FEC ID number of contributing federal political committee.	С				_	5		78	.00
Name of Employer	Occupation		\neg						
United HealthCare Services Inc	M R SIs Dir								
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		936.00	P/	/R Ded	uctio	on (\$39.(00 Bi-We	ekly)	
Full Name (Last, First, Middle Initial) B. JENNY HAYHURST				Date of	Re	ceipt			
Mailing Address 23A MOUNT HYGEIA RO	AD			M M	1	30	/ Y	y y 2013	Y
City	State	Zip Code		Trans	acti	ion ID : I	PR25756	5183176	3
FOSTER	RI	02825-1434	A	Amount	t of	Each Re	eceipt thi	s Period	
FEC ID number of contributing federal political committee.	С				_	5	- 7	28	.00
Name of Employer United HealthCare Services Inc	Occupation VP Ntwk Co								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P/	'R Dedu	uctic	on (\$14.(00 Bi-We	ekly)	
Full Name (Last, First, Middle Initial) C. CARL ALLEN				Date of	Re	ceipt			
Mailing Address 8675 AZURE SKY DRIVE				M M 11	/	30	/ Y	y y 2013	Y
City	State	Zip Code						6933176	3
LAS VEGAS	NV	89129-2227	A	4mount	t of	Each Re	eceipt thi	s Period	
FEC ID number of contributing federal political committee.	С				_	7		78	.00
Name of Employer	Occupation		\neg						
Southwest Medical Assoc. Inc.	Phys Dir								
Receipt For:		Year-to-Date ▼							
Primary General	50 - 500		P/	/R Ded	uctio	on (\$39.0	00 Bi-We	ekly)	
Other (specify)		936.00							
SUBTOTAL of Receipts This Page (optional)		. [Ξ			184.	00
TOTAL This Period (last page this line num	ber only)		- [Ē				

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

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(chec	k only	/ on	e)			
		for each category of the Detailed Summary Page	×	11a 13		11b	11c 15	12	17
Any information copied from such Reports an or for commercial purposes, other than using			erson fo	r the		ose of s	oliciting	contribu	itions
NAME OF COMMITTEE (In Full)	ated PAC (I	United for Health)							
Full Name (Last, First, Middle Initial)		,							
A. BRADY PRIEST			_	ate of	Ree				
Mailing Address 4401 COUNTRY CLUB RI	J			11	/	30	/ Y	2013	Y
City	State	Zip Code			acti	on ID : P	R25756		53
EDINA	MN	55424-1148	Ar	nount	of I	Each Re	ceipt thi	is Perioc	I
FEC ID number of contributing federal political committee.	С					,	7	62	5.00
Name of Employer	Occupation	1							
United HealthCare Services Inc	Dir Gen Mg	gmt							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1875.00	P/F	R Dedu	uctio	on (\$312.9	50 Bi-W	eekly)	
Full Name (Last, First, Middle Initial) B. CHRISTOPHER STIDMAN			Di	ate of	Ree	ceipt			
Mailing Address 6504 CHEROKEE TRAIL				1 <u>1</u>	/	30	/ Y	ү ү 2013	Y
City	State MN	Zip Code				on ID : P			
EDINA	IVIIN	55439-1109	Ar	nount	of	Each Re	ceipt th	is Perioc	1
FEC ID number of contributing federal political committee.	C			_		,	7	28	3.00
Name of Employer United HealthCare Services Inc	Occupation VP Med Cli								
Receipt For:		Year-to-Date ▼	_						
Primary General Other (specify) ▼		336.00	P/R	Dedu	uctio	n (\$14.00	0 Bi-We	ekly)	
Full Name (Last, First, Middle Initial) C. JENNIFER COHEN-SMITH			Di	ate of	Ree	ceipt			
Mailing Address 51 ORCUTT				м м 11	/	D D D 30	/ Y	2013	Y
City	State CT	Zip Code				on ID : P			
GUILFORD		06437-2221	Ar	nount	of I	Each Re	ceipt th	is Perioc	1
FEC ID number of contributing federal political committee.	С					,	7	104	4.28
Name of Employer	Occupation								
United HealthCare Services Inc	Regn Exec	;							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 260.70	P/F	R Ded	uctic	on (\$52.1	4 Bi-We	ekly)	
SUBTOTAL of Receipts This Page (optional)						y y	,	757	.28

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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	EWIZED RECEIPTS		Detailed Summary Page		11a		11b		11c		12	
			, ,		13		14		15		16	17
	y information copied from such Reports and for commercial purposes, other than using the											
	NAME OF COMMITTEE (In Full)											
$\Big\rangle$	UnitedHealth Group Incorporat	ted PAC (l	Jnited for Health)									
Α.	Full Name (Last, First, Middle Initial) STEPHEN FARRELL				Date of	Re	eceip	ot				
	Mailing Address 50 MAJOR DOANE RD				M M	/	D	30	/ Y) 13	Y
	City	State	Zip Code		Trans	acti	ion l	ID : P	R2575	5 962	231763	3
	WELLFLEET	MA	02667-7836	/	Amount	t of	Eac	h Ree	ceipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	С					7		7	_	240.	00
	Name of Employer	Occupation										
	United HealthCare Services Inc	Hith Plan C	EO									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify)		760.00] ^{P.}	/R Ded	uctio	on (\$	\$120.0	00 Bi-W	/eek	ily)	
	Full Name (Last, First, Middle Initial) STEVEN CHARLES FELTON				Date of	Re	eceip	ot				
	Mailing Address 6837 29TH AVE NE				M M	/	D	30	/ Y) 13	Y
	City	State	Zip Code		Trans	acti	ion I	ID : P	R25757	7011	31763	6
	SEATTLE	WA	98115-7236	/	Amount	t of	Eac	h Re	ceipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	С					7		,	_	40.	00
	Name of Employer Optum Clinical Services INC	Occupation Nurse Pract										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 480.00] P/	/R Ded	uctio	on (\$	\$20.00) Bi-We	ekly	/)	
	Full Name (Last, First, Middle Initial) DELLEN WILSON	I			Date of	Re	eceip	ot				
	Mailing Address 400 STUART STREET 25D				M M 11	/	D	30	/ Y) 13	Y
	City BOSTON	State MA	Zip Code 02116-5011						R2575 ceipt th			3
	FEC ID number of contributing federal political committee.	С					1		, j		500.	00
	Name of Employer	Occupation										
	United HealthCare Services Inc	EVP Huma	n Capital									
	Receipt For:		Year-to-Date ▼									
	Primary General Other (specify) ▼		2000.00	P	/R Ded	ucti	ion (S	\$250.0	00 Bi-V	Veek	dy)	
s	UBTOTAL of Receipts This Page (optional)						7		7	-	780.	00
т	OTAL This Period (last page this line numbe	r only)					7		,	_		_

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

Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only	one)		
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	11b 11c	12	
Any information copied from such Reports an						
or for commercial purposes, other than using	the name and a	address of any political committe	e to solicit cont	ributions from suc	h committee	е.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (United for Health)				
Full Name (Last, First, Middle Initial) A. MARK BERNAUER			Date of	Receipt		
Mailing Address 5512 LOWELL AVE			M M	/ D D / Y 30	2013	Y
City INDIANAPOLIS	State IN	Zip Code 46219-5810		ction ID : PR2575 of Each Receipt th	718131763	
FEC ID number of contributing federal political committee.	С			7 7	28.0	00
Name of Employer United HealthCare Services Inc	Occupation Sr Hlth Ecc	n nomics Rscher				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P/R Dedu	ction (\$14.00 Bi-W	ekly)	
Full Name (Last, First, Middle Initial) B. MARY KNORR			Date of	Receipt		
Mailing Address 1144 PROSPECT AVENU			1_1	/ D D / Y 30	2013	Ý
City HARTFORD	State CT	Zip Code 06105-1124		ction ID : PR2575		
FEC ID number of contributing federal political committee.	С				200.0)0
Name of Employer United HealthCare Services Inc	Occupation SVP Ntwks		_			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 800.00	P/R Deduc	ction (\$100.00 Bi-V	√eekly)	
Full Name (Last, First, Middle Initial) C. JEFFREY GROSKLAGS			Date of	Receipt		
Mailing Address 3233 TIMBERWOLF CIR	CLE		M M 11	/ D D / Y 30	2013	Ŷ
City PRIOR LAKE	State MN	Zip Code 55372-3272		ction ID : PR2575 of Each Receipt th		
FEC ID number of contributing federal political committee.	С				121.6	36
Name of Employer United HealthCare Services Inc	Occupation VP Finance					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 243.32	P/R Dedu	ction (\$60.83 Bi-W	eekly)	
SUBTOTAL of Receipts This Page (optional)				349.6	6
TOTAL This Period (last page this line num	ber only)					

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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			Detailed Summary Page		11a		11b	110	; [12	-	
					13		14	15		16		17
	y information copied from such Reports and S for commercial purposes, other than using the											
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)									
A.	Full Name (Last, First, Middle Initial) THOMAS PORTZ				Date of	Re	ceipt					
	Mailing Address 2119 SHERIDAN HILLS RD				м м 1_1	/	30	/	Y	y y 2013		
	City	State	Zip Code		Trans	acti	on ID :	PR25	7574	4531	763	
	WAYZATA	MN	55391-2327	/	Amount	of	Each R	eceipt	this	Perio	bd	
	FEC ID number of contributing federal political committee.	С					,	,		14	46.0	0
	Name of Employer	Occupation										
	United HealthCare Services Inc	VP Finance										
	Receipt For:	Aggregate	Year-to-Date 🔻									
	Primary General Other (specify)		219.00	P.	/R Ded	uctio	on (\$73.	00 Bi-	Wee	kly)		
В.	Full Name (Last, First, Middle Initial) CARLOS ADAME				Date of	Re	ceipt					
	Mailing Address 42584 WHISTLE COURT				M M	/	30	/	Y	y y 2013	Y	
	City	State	Zip Code		Trans	acti	on ID :	PR25	7575	54317	763	_
	TEMECULA	CA	92592-7105	/	Amount	of	Each R	eceipt	this	Perio	bd	
	FEC ID number of contributing federal political committee.	С					,	,		ī	78.0	0
	Name of Employer United HealthCare Services Inc	Occupation Human Cap	ital Partner Mgr									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 936.00	P	/R Dedu	uctic	on (\$39.)	00 Bi-	Weel	kly)		
C.	Full Name (Last, First, Middle Initial) HERBERT DOMER				Date of	Re	ceipt					
	Mailing Address 2715 IONE COURT				M M 11	/	30	/		y y 2013	Y	
	City	State OH	Zip Code		Trans	acti	ion ID :	PR25	7575	6031	763	
	COLUMBUS	UH	43235-2810	_ /	Amount	of	Each R	eceip	this	Perio	bd	
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	Name of Employer	Occupation										
	United HealthCare Services Inc	Dir IT DT A	nalytics									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		336.00	P	/R Ded	uctio	on (\$14.	00 Bi-	Wee	kly)		
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	D RECEIPTS Use separate schedule(s) (check only for each category of the				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12		
			13 14 15 16 1		
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)					
UnitedHealth Group Incorp	orated PAC (United for Health)			
Full Name (Last, First, Middle Initial)					
A. JOSEPH MILES			Date of Receipt		
Mailing Address 2800 N US 31 UNIT 1			11 30 _ 2013 _		
City	State	Zip Code	Transaction ID : PR2575770931763		
ALANSON	MI	49706	Amount of Each Receipt this Period		
FEC ID number of contributing	С		28.00		
federal political committee.	U				
Name of Employer	Occupation	1			
United HealthCare Services Inc	Mktg Cnslt				
Receipt For:	Aggregate	Year-to-Date ▼			
Other (specify)		336.00	P/R Deduction (\$14.00 Bi-Weekly)		
,,,,,,,,,		/j	1		
Full Name (Last, First, Middle Initial) B. MATTHEW MONTOYA			Date of Receipt		
Mailing Address 12370 BRADFORD DF	۲		M M / D D / Y Y Y Y		
			11 30 2013		
City	State CO	Zip Code	Transaction ID : PR2575777631763		
PARKER	00	80134-3609	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		28.00		
Name of Employer United HealthCare Services Inc	Occupatior	1			
	KA Mgr Aco	•			
Receipt For:	Aggregate	Year-to-Date ▼			
Other (specify) ▼		, 336.00	P/R Deduction (\$14.00 Bi-Weekly)		
Full Name (Last, First, Middle Initial) C. SUSAN MADDUX			Date of Receipt		
Mailing Address 16426 FARMERS MIL	L LANE		M = M / D = D / Y = Y = Y		
	21.1		11 30 2013		
City CHESTERFIELD	State MO	Zip Code 63005-4549	Transaction ID : PR2575783831763		
FEC ID number of contributing			Amount of Each Receipt this Period		
federal political committee.	C		121.66		
Name of Employer	Occupatior	1			
United HealthCare Services Inc	Dir Clin Ph	arm			
Receipt For:	Aggregate	Year-to-Date ▼			
Other (specify)		, 243.32	P/R Deduction (\$60.83 Bi-Weekly)		
SUBTOTAL of Receipts This Page (optic	nal)		177.66		
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SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER:

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IT.	EMIZED RECEIPTS		Use separate schedule(s)	(checl	c only	one	e)				
			for each category of the Detailed Summary Page			_	11b	11c	12		-
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	for commercial purposes, other than using the										5
	NAME OF COMMITTEE (In Full)		Inited for Lleath)								
[UnitedHealth Group Incorporat										
^	Full Name (Last, First, Middle Initial) PRADEEP KANDI				ite of	Pac	oint				
Α.	Mailing Address 968 CONDOR DR					Hec	σο	/ 8	- Y - Y	Y	
					11	,	30	Ĺ	2013		
	City COPPELL	State TX	Zip Code 75019-5985					PR2575			
			75019-5965	An	nount	of E	ach Re	eceipt th	nis Peric	od	_
	FEC ID number of contributing federal political committee.	С				. 7		9	2	28.00	
	Name of Employer	Occupation									
	United HealthCare Services Inc	Mgr IT Arch									
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	D/D	Dedu	otion	n (¢11 i	00 Bi-We	aaklu		
	Other (specify)		336.00		Deuu		ι (ψ14.(CERIY)		
	Full Name (Last, First, Middle Initial)										
В.	DARREL A FARKUS			Da	ite of	Rec	eipt				
	Mailing Address 15 WHITE OAK DRIVE			TV	M	/		/ Y	Y Y	Y	
	City	State	Zip Code		11 ransa	ctio	30 n ID · I	PR25757	2013 7975317	63	
	ASBURY	NJ	08802-1155					eceipt th			
	FEC ID number of contributing federal political committee.	С				,		7	3	39.00	
	Name of Employer	Occupation	1								
	United HealthCare Services Inc	Dir Bus Dvl	0								
	Receipt For: Primary General	Aggregate	Year-to-Date ▼				(\$00.0		I. I. A		
	Other (specify) ▼		897.00	P/R	Dedu	ctior	n (\$39.0	00 Bi-We	eekiy)		
	Full Name (Last, First, Middle Initial)	1			te of	Rec	eipt				
2.	Mailing Address 3108 SONIA DRIVE				M	/	D D	/ Y	Y Y	Y	
		0+-1-	Zin Codo	_ L	11		30	L	2013		
	City LAS VEGAS	State NV	Zip Code 89107-3246					PR2575 eceipt th			
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	federal political committee.	C						7		78.00	
	Name of Employer	Occupation	1								
	United HealthCare Services Inc	Govt Rel D	ir								
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	D/D	Dodu	uction	o (\$20)	00 Bi-W	ookly)		
	Other (specify)		936.00		Deut		n (\$39.)	00 BI-00	eeriy)		
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			Detailed Summary Page		-		11b		11c		12	<u> </u>					
Ar	y information copied from such Reports and	Statements ma	I ay not be sold or used by any p	erson f	13 or the	purp	14 pose of	f sol	15 liciting	cor	16 ntribut	17 ions					
or	for commercial purposes, other than using th	e name and a	ddress of any political committee	e to so	licit cor	ntrib	outions	fron	n such	CO	mmitte	e.					
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (I	Jnited for Health)														
Α.	Full Name (Last, First, Middle Initial) WILLIAM MILLER			[Date of	Re	eceipt										
	Mailing Address 26104 WEST 108 TERRACE	E			м м 1_1	/	30		/ Y)13	Y					
	City	State	Zip Code		Trans	acti	ion ID :	PR	25758	198	3176	3					
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	Name of Employer	Occupation	l														
	United HealthCare Services Inc	Bus Segme	ent CEO														
	Receipt For:	Aggregate	Year-to-Date ▼														
	Primary General Other (specify) V		1923.50] P,	/R Ded	uctio	on (\$28	8.2	5 Bi-W	eek	ly)						
В.	Full Name (Last, First, Middle Initial) WENDY M SMITH	1			Date of	Re	eceipt										
	Mailing Address 1512 BLUEBONNET LN			Date of Receipt													
	City	State	Zip Code		Trans	acti	on ID :	PR	25758	267	31763	;					
	AUSTIN	TX	78704-2854	/	Amount	of	Each F	Rece	eipt thi	s P	eriod						
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	Name of Employer United HealthCare Services Inc	Occupation Dir Mktg Bu															
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C.	Full Name (Last, First, Middle Initial) EDWARD SKOPAS				Date of	Re	eceipt										
	Mailing Address 43 JOEL DR				M M 11	/	30		/ Y) 13	Y					
	City HEBRON	State CT	Zip Code 06248-1245				ion ID :					3					
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	United HealthCare Services Inc	VP Info Teo	ch														
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	EMIZED RECEIPTS		for each category of the Detailed Summary Page		11a 13		11b		11c 15	12	17
	y information copied from such Reports and S for commercial purposes, other than using the				for the		pose		oliciting	g contribu	tions
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)								
Α.	Full Name (Last, First, Middle Initial) NYLE BRENT COTTINGTON				Date of	f Re	eceip	ot			
	Mailing Address 6630 EMPIRE COURT	Ctata	Zin Code		M M		L	30		ү ү 2013	
	City MAPLE GROVE	State MN	Zip Code 55311-3433				-			86533176 nis Period	3
	FEC ID number of contributing federal political committee.	С					1		7		.78
	Name of Employer United HealthCare Services Inc	Occupation VP Accting									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 369.36]	9/R Ded	uctio	on (S	\$15.3	9 Bi-We	ekly)	
В.	Full Name (Last, First, Middle Initial) GLENN LIPPMAN				Date of	f Re	eceip	ot			
	Mailing Address 612 NORTH TUMBLEWEED				M M	1	D	30	/ Y	ү ү 2013	Y
	City AUSTIN	State TX	Zip Code 78733-3231							38283176 his Period	3
	FEC ID number of contributing federal political committee.	С					5		7	28	.00
	Name of Employer United HealthCare Services Inc	Occupation Assc Behvrl									
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с.	Full Name (Last, First, Middle Initial) PAMELA LIPPITT				Date of	f Re	eceip	ot			
	Mailing Address 944 RILEY WILLS ROAD				M M 11	/	D	30	/ Y	у у 2013	Y
	City LEBANON	State OH	Zip Code 45036-9037							88443176 nis Period	3
	FEC ID number of contributing federal political committee.	С			Amouri		,		, j		.00
	Name of Employer	Occupation		_							
	United HealthCare Services Inc	Assc Dir Me	ed Clin Ops								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00]	P/R Ded	luctio	on (S	\$14.00) Bi-We	ekly)	
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	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	Jnited for Health)										
Α.	Full Name (Last, First, Middle Initial) PATRICK LANGAN				Date o	of Re	ece	eipt					
	Mailing Address 405 MEADOW LANE				M N	/	′	3		/ Y		у 013	Y
	City	State	Zip Code		Tran	sact	tio	n ID	: P	R25758	8850)3176	3
	BENSON	MN	56215-1033	_ /	Amour	nt of	E	ach	Re	ceipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	С					,			IJ	_	194	00
	Name of Employer United HealthCare Services Inc	Occupation VP IT											
	Receipt For:		Year-to-Date ▼	\neg									
	Primary General Other (specify)	Ayyı eyale	2328.00	P	/R Dee	ducti	ior	า (\$9	7.0	0 Bi-We	ekly	/)	
в.	Full Name (Last, First, Middle Initial)				Date o	of Re	ece	eipt					
	Mailing Address 7112 LANGMUIR DRIVE				M N	/	′	D 3		/ Y	_ 20	1 Y I	Y
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	MCKINNEY	ТХ	75071-4606							ceipt th			•
	FEC ID number of contributing federal political committee.	С					7			,	_	78.	00
	Name of Employer United HealthCare Services Inc	Occupation VP CInt Mg	mt NA Accts										
	Receipt For: Primary General Other (specify) ▼	-	Year-to-Date ▼ 936.00	P	/R Dec	ducti	ion	n (\$3	9.00	0 Bi-We	ekly	()	
<u>с.</u>	Full Name (Last, First, Middle Initial) SUSAN WEEDMAN				Date o	of Re	ece	eipt					
	Mailing Address 5056 PENN AVENUE SOUTI	Η			M 11	/	′	D 3	D 10	/ Y)13	Y
	City	State	Zip Code		Tran	sact	tio	n ID	: P	R2575	9402	23176	3
	MINNEAPOLIS	MN	55419-1035	/	Amour	nt of	E	ach	Re	ceipt th	is P	eriod	
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	Name of Employer	Occupation	I	-									
	United HealthCare Services Inc	Dir Human	Capital Dev										
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SCHEDULE A (FEC Form 3X)

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	y information copied from such Reports and s for commercial purposes, other than using the										
$\overline{)}$	NAME OF COMMITTEE (In Full)										
$\Big\rangle$	UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)								
Α.	Full Name (Last, First, Middle Initial) MARC SALINAS				Date of	Re	ceipt				
	Mailing Address 1630 ROCK RIDGE DRIVE				M M	/	30	/ Y	2013	Y	
	City	State	Zip Code		Trans	acti	on ID : I	PR2575	96793176	3	
	PROSPER	ТХ	75078-9728		Amount	of	Each Re	eceipt th	is Period		
	FEC ID number of contributing federal political committee.	С					9	7	78	.00	
	Name of Employer	Occupation									
	United HealthCare Services Inc	VP Gen Mg	ımt								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General		936.00	1 F	P/R Dedu	uctio	on (\$39.0	00 Bi-We	ekly)		
	Other (specify)		7 7 7	41.							
В.	Full Name (Last, First, Middle Initial) JUDITH PERLMAN				Date of	Re	ceipt				
	Mailing Address 116 CANTERBURY LANE PO BOX 2108				M M	/	30	/ Y	ү ү 2013	Y	
	City	State	Zip Code				-		96893176	3	
	VINEYARD HAVEN	MA	02568-5659		Amount	of	Each Re	eceipt th	is Period		
	FEC ID number of contributing federal political committee.	С				_	,		78.	00	
	Name of Employer United HealthCare Services Inc	Occupation									
		VP Gen Mg	mt								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Other (specify) ▼		936.00] '	P/R Dedu	uctio	on (\$39.0)0 Bi-W€	ekly)		
<u>с</u> .	Full Name (Last, First, Middle Initial) MARK DICELLO				Date of	Re	ceipt				
	Mailing Address 5360 ANACALA CT				M M	/	30	/ Y	2013	Y	
	City	State	Zip Code		Trans	acti	ion ID :	PR2575	97793176	3	
	WESTERVILLE	OH	43082-8352		Amount	of	Each Re	eceipt th	is Period		
	FEC ID number of contributing federal political committee.	С					9	7	28	.00	
	Name of Employer	Occupation									
	United HealthCare Services Inc	Dir Ntwk Co	ontrotng								
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 336.00] '	P/R Ded	uctio	on (\$14.)	00 Bi-We	eekly)		
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Any information copied from such Reports and or for commercial purposes, other than using the							
NAME OF COMMITTEE (In Full)							
UnitedHealth Group Incorporat	ed PAC (I	United for Health)					
Full Name (Last, First, Middle Initial) A. MARK LEENAY			Date o	f Receipt			
Mailing Address 17882 BEARPATH TRAIL			M M	/ D D 30) / Y	2013	Y
City	State	Zip Code		saction ID :	PR25759		3
EDEN PRAIRIE	MN	55347-3448	Amoun	t of Each R	leceipt th	is Period	
FEC ID number of contributing federal political committee.	С					78	.00
Name of Employer	Occupation	1					
United HealthCare Services Inc	NA Med Di	r/CMO					
Receipt For:	Aggregate	Year-to-Date V					
Primary General		026.00	P/R Dec	duction (\$39.	.00 Bi-We	ekly)	
Other (specify)		936.00					
Full Name (Last, First, Middle Initial) B. MICHAEL CESTA	L		Date o	f Receipt			
Mailing Address 3429 CRESTMOOR ALCOV			M M	30	/ Y	2013	Y
City	State	Zip Code		saction ID :			3
WOODBURY	MN	55125-5033	Amoun	t of Each R	leceipt th	is Period	
FEC ID number of contributing federal political committee.	С					28	.00
Name of Employer United HealthCare Services Inc	Occupation	1					
	Med Dir						
Receipt For:	Aggregate	Year-to-Date ▼					
Primary General Other (specify) ▼		336.00	P/R Dec	luction (\$14.	00 Bi-We	ekly)	
Full Name (Last, First, Middle Initial) C. CAROL ANN CHURCHILL			Date o	f Receipt			
Mailing Address 230 BATTALION WAY				/ D D) / Y	ү 2013	Y
City	State TN	Zip Code	Tran	saction ID :	PR25759	98833176	3
MOUNT JULIET	IN	37122-6135	Amoun	it of Each R	leceipt th	is Period	
FEC ID number of contributing federal political committee.	С				 J	28	.00
Name of Employer	Occupation	1					
United HealthCare Services Inc	Med Dir						
Receipt For:	Aggregate	Year-to-Date ▼					
Other (specify)		336.00	P/R Dec	duction (\$14	.00 Bi-We	ekly)	
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	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	Jnited for Health)									
Α.	Full Name (Last, First, Middle Initial) PAMELA GOLD				Date of	Re	eceipt					
	Mailing Address 8370 DYNASTY WAY				M M	1	30		/ Y) 13	Y
	City	State	Zip Code		Trans	acti	ion ID	: P	R25759) 886	63176	3
	SALT LAKE CITY	UT	84121-6089		Amount	t of	Each	Red	ceipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	С					,		7	_	28.	00
	Name of Employer	Occupation	1	_								
	United HealthCare Services Inc	SB KA VP	SIs Acct Mgt									
	Receipt For:	Aggregate	Year-to-Date V									
	Primary General Other (specify) ▼		336.00		/R Ded	uctio	on (\$14	4.00) Bi-We	ekly	/)	
	Full Name (Last, First, Middle Initial) DOUGLAS RODGERS				Date of	Re	eceipt					
	Mailing Address 502 LAKESHORE COVE				M M	/	30		/ Y) 13	Y
	City	State	Zip Code		Trans	acti	on ID :	: Pl	R25760	006	31763	3
	FORT OGLETHORPE	GA	30742-4207	/	Amount	t of	Each	Red	ceipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	С					,		7	_	121.	66
	Name of Employer United HealthCare Services Inc	Occupation Exec Dir	1									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 243.32	P/	/R Ded	uctio	on (\$60).83	3 Bi-We	ekly	/)	
	Full Name (Last, First, Middle Initial) MARC BRIGGS				Date of	Re	eceipt					
	Mailing Address 1608 RED TREE CT				M M 11	1	30		/ Y)13	Y
	City	State	Zip Code		Trans	act	ion ID	: P	R25760)016	63176	3
	DRAPER	UT	84020-7704	/	Amount	t of	Each	Red	ceipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	С					7		3	_	80	.00
	Name of Employer	Occupation	1	_								
	United HealthCare Services Inc	Regn Exec										
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		960.00	^P	P/R Ded	ucti	on (\$40	0.0) Bi-We	ekly	y)	
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ITEMIZED RECEIPTS		Use separate schedule(s)	(check onl	y one)			
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NAME OF COMMITTEE (In Full)		address of any political contrilled			on such	Committee	. .
UnitedHealth Group Incorpora	ited PAC (I	United for Health)					
Full Name (Last, First, Middle Initial) A. JOHN SCOTT			Date o	f Receipt			
Mailing Address 4574 VIA DON LUIS			M M	/ D D 30	/ Y	2013	Y
City NEWBURY PARK	State CA	Zip Code 91320-6905		saction ID : I t of Each Re			3
FEC ID number of contributing federal political committee.	С					28	.00
Name of Employer United HealthCare Services Inc	Occupation VP Info Tec						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 336.00	P/R Ded	luction (\$14.0	00 Bi-We	ekly)	
Full Name (Last, First, Middle Initial) B. KIMBERLY SONERHOLM			Date o	f Receipt			
Mailing Address 7210 HEGGIE AVE	Otata	Zin Onde	11 M	30		y y 2013	
City LAS VEGAS	State NV	Zip Code 89131-3233		action ID : I t of Each Re			3
FEC ID number of contributing federal political committee.	С				,	28	.00
Name of Employer Health Plan of Nevada	Occupation KA VP SIs /		_				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P/R Ded	uction (\$14.0	00 Bi-We	ekly)	
Full Name (Last, First, Middle Initial) C. JAY WARMUTH			Date o	f Receipt			
Mailing Address 16215 GRABEN COURT			11	/ D D 30	/ Y	y y 2013	Y
City EDEN PRAIRIE	State MN	Zip Code 55346-2331		saction ID :			3
FEC ID number of contributing federal political committee.	С			t of Each Re			.00
Name of Employer	Occupation	1					
United HealthCare Services Inc	Bus Segme	ent Gen Counsel					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 390.00	P/R Dec	luction (\$39.)	00 Bi-We	ekly)	
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SCHEDULE A (FEC Form 3X) •

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$\left\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)									
Α.	Full Name (Last, First, Middle Initial) RHONDA MEDOWS				Date of	Re	ceipt					
	Mailing Address 7707 WISCONSIN AVENUE APT # 530				M M / D D / Y Y Y Y Y 11 30 2013							
	City BETHESDA	State MD	Zip Code 20814-6547					PR2576 eceipt th				
	FEC ID number of contributing federal political committee.	С					,	7	8	33.3	4	
	Name of Employer United HealthCare Services Inc Receipt For:	Occupation Chief Med (
	Primary General Other (specify) ▼	Aggregate	1666.68] [P/R Ded	uctic	on (\$416	6.67 Bi-W	/eekly)			
в.	Full Name (Last, First, Middle Initial) LAURA STONE				Date of	Re	ceipt					
	Mailing Address 4644 VENETO DRIVE				M M	/	30	/ Y	2013			
	City FRISCO	State TX	Zip Code 75033-7135				-	PR25760 eceipt th				
	FEC ID number of contributing federal political committee.	C					7			28.00)	
	Name of Employer United HealthCare Services Inc	Occupation Assc Dir Ntv	wk Contrctng									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00] 「	P/R Ded	uctio	n (\$14.	00 Bi-We	ekly)			
с.	Full Name (Last, First, Middle Initial) MICHAEL GROENENDAAL				Date of	Re	ceipt					
	Mailing Address 1017 N EUCLID				M M 11	/	D D D 30	/ Y	2013			
	City OAK PARK	State IL	Zip Code 60302-1321					PR2576 eceipt th				
	FEC ID number of contributing federal political committee.	С					,			28.0	0	
	Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼	Occupation VP Exe Co Aggregate]	P/R Ded	uctic	on (\$14.	00 Bi-We	eekly)			
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SCHEDULE A (FEC Form 3X)

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	-	Use separate schedule(s)	(check only one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12				
			13 14 15 16				
Any information copied from such Reports and or for commercial purposes, other than using	d Statements mather the name and a	ay not be sold or used by any p address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)							
> UnitedHealth Group Incorpora	ated PAC (United for Health)					
Full Name (Last, First, Middle Initial)							
A. RESTOR JOHNSON			Date of Receipt				
Mailing Address 2700 CRESCENT RIDGE	ROAD		M M / D D / Y Y Y Y 11 30 2013				
City	State	Zip Code	Transaction ID : PR2576051631763				
MINNETONKA	MN	55305-2806	Amount of Each Receipt this Period				
FEC ID number of contributing	С		194.00				
federal political committee.	~						
Name of Employer	Occupation						
United HealthCare Services Inc	·	Real Estate Svs	_				
Receipt For:	Aggregate	Year-to-Date ▼	D/P Doduction (\$07.00 Di Machini)				
Other (specify) ▼		2328.00	P/R Deduction (\$97.00 Bi-Weekly)				
		7	-				
Full Name (Last, First, Middle Initial) B. JOHN REX			Date of Receipt				
Mailing Address 503 HARRINGTON ROAD							
			11 30 _2013				
City	State	Zip Code	Transaction ID : PR2576060031763				
WAYZATA	MN	55391-1512	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		386.00				
Name of Employer United HealthCare Services Inc	Occupation	1					
Receipt For:	Mkt Group		_				
Primary General	Aggregate	Year-to-Date ▼	D/D Daduction (\$102.00 Di Waakhu)				
Other (specify) ▼		, 4632.00	P/R Deduction (\$193.00 Bi-Weekly)				
Full Name (Last, First, Middle Initial) C. APRIL GOLENOR			Date of Receipt				
Mailing Address 1313 JACKSON STREET			11 30 2013				
City	State	Zip Code	Transaction ID : PR2576063931763				
MANDEVILLE	LA	70448-4040	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		91.26				
Name of Employer	Occupation	1					
United HealthCare Services Inc							
Receipt For: Primary General	Aggregate	Year-to-Date ▼					
Other (specify)		273.78	P/R Deduction (\$45.63 Bi-Weekly)				
			1				
SUBTOTAL of Receipts This Page (optional)			671.26				
TOTAL This Period (last page this line numb	per only)						

SCHEDULE A (FEC Form 3X) DEAEI

Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only	y one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	11b	11c	12		
Any information copied from such Reports a		ay not be sold or used by any p						
or for commercial purposes, other than using								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	rated PAC (I	Jnited for Health)						
Full Name (Last, First, Middle Initial) A. ROBERT COOPER			Date of	f Receipt				
Mailing Address 50 BITTERNUT ROAD			M – M 11	/ D C) / Y	2013	Y	
City MOUNT WOLF	State PA	Zip Code 17347-9694		action ID : t of Each R			3	
FEC ID number of contributing federal political committee.	С						.00	
Name of Employer United HealthCare Services Inc Receipt For:	Occupation Assc Dir MI							
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 336.00	P/R Ded	uction (\$14	.00 Bi-We	ekly)		
Full Name (Last, First, Middle Initial) B. DARRIN JOHNSON			Date of	f Receipt				
Mailing Address 108 SUMMERBROOKE (M M 11	/ D D 30	/ Y	ү ү 2013	Y	
City SICKLERVILLE	State NJ	Zip Code 08081-9685		action ID : t of Each R			3	
FEC ID number of contributing federal political committee.	С					121.	66	
Name of Employer United HealthCare Services Inc	Occupation Dir Mktg	I						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 243.32	P/R Ded	uction (\$60.	83 Bi-We	ekly)		
Full Name (Last, First, Middle Initial) C. NATHAN KIEWEL			Date of	f Receipt				
Mailing Address 1137 PRAIRIE VIEW DR	SW		M M 11	/ D D D) / Y	2013	Y	
City HUTCHINSON	State MN	Zip Code 55350-6725		action ID : t of Each R			3	
FEC ID number of contributing federal political committee.	С					28	.00	
Name of Employer	Occupation	1						
United HealthCare Services Inc	Sr Entrprs I	Res Plng Cnslt						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	P/R Deduction (\$14.00 Bi-Weekly)					
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Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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			Detailed Summary Page		11a		11b	11c			47		
	y information copied from such Reports and s									butio			
	for commercial purposes, other than using the												
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (l	Jnited for Health)										
A.	Full Name (Last, First, Middle Initial) CHRIS KENT				Date of	Re	eceipt						
	Mailing Address 13273 CARLINGFORD LANE	E			M M	/	D D 30	/ Y	y 2013				
	City	State	Zip Code		Trans	acti	ion ID : I	PR2576	19031	763			
	ROSEMOUNT	MN	55068-6308		Amount	of	Each Re	eceipt th	is Peri	od			
	FEC ID number of contributing federal political committee.	С					7	7	2	22.2	2		
	Name of Employer	Occupation			-								
	United HealthCare Services Inc	VP Gen Mg	mt										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 777.77]	/R Ded	uctio	on (\$111	.11 Bi-W	/eekly)				
В.	Full Name (Last, First, Middle Initial) CHANDRA TORGERSON				Date of	Re	eceipt						
	Mailing Address 5433 10TH AVENUE SOUTH				M M	1	30	/ Y	2013				
	City	State	Zip Code				ion ID : F						
	MINNEAPOLIS	MN	55417-2413		Amount	t of	Each Re	eceipt th	is Peri	od			
	FEC ID number of contributing federal political committee.	С								78.0	0		
	Name of Employer United HealthCare Services Inc	Occupation VP Med Cli											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 936.00	P	/R Ded	uctio	on (\$39.(00 Bi-We	ekly)				
с.	Full Name (Last, First, Middle Initial) STEVEN NELSON				Date of	Re	eceipt						
	Mailing Address 2542 CROSBY ROAD				M M 11	1	D D 30	/ Y	2013		(
	City WAYZATA	State MN	Zip Code 55391-2318	-			ion ID :						
	FEC ID number of contributing federal political committee.	С			Amouni	U OT	Each Re	eceipt th		od 555.5	54		
	Name of Employer	Occupation		_									
	United HealthCare Services Inc	Bus Segme											
	Receipt For:	-	Year-to-Date ▼										
	Primary General Other (specify) ▼		1944.39] ^P	P/R Ded	ucti	on (\$277	.77 Bi-W	/eekly)				
s	UBTOTAL of Receipts This Page (optional)						5	- 7	8	55.7	6		
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	EMIZED RECEIPTS	Detailed Summary Page		-		-		11c		12		
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	for commercial purposes, other than using the											
$\overline{)}$	NAME OF COMMITTEE (In Full)											
$\Big\rangle$	UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)									
Α.	Full Name (Last, First, Middle Initial) JOHN FRIDNER				Date of	f Re	eceip	ot				
	Mailing Address 782 PENFIELD DR				M M	1		30	/ Y			Y
	City	State IL	Zip Code 60188-4738									3
	CAROL STREAM		00100 4730	_ /	Amount	t of	Eac	n Re	ceipt th	is P	eriod	_
	FEC ID number of contributing federal political committee.	С					7		7	_	78.	00
	Name of Employer	Occupation										
	United HealthCare Services Inc	SB NA VP	Sls/Gen									
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		(D. D	13 14 15 16 17 or the purpose of soliciting contributions cit contributions from such committee. 17 rate of Receipt 1 30 2013 Transaction ID : PR2576147531763 mount of Each Receipt this Period 78.00 R Deduction (\$39.00 Bi-Weekly) 78.00 78.00 rate of Receipt 78.00 78.00 11 30 2013 77.00 rate of Receipt 78.00 575.22 ate of Receipt 575.22 575.22 R Deduction (\$287.61 Bi-Weekly) 575.22 ate of Receipt 73 2013 Transaction ID : PR2577379331763 73 mount of Each Receipt this Period 575.22 ate of Receipt 30 2013 Transaction ID : PR2578710731763 73 mount of Each Receipt this Period 365.00						
	Other (specify)		936.00	P,	/R Ded	uctio	on (\$	\$39.0) Bi-We	}ekly	()	
В.	Full Name (Last, First, Middle Initial) DANIEL KENIRY				Date of	f Re	eceip	ot				
	Mailing Address 5553 LITTLE FALLS ROAD				M M	/	D	D	/ Y			Y
	City	State	Zip Code		Trans	acti			R25773			5
	ARLINGTON	VA	22207-1525	/	Amount	t of	Eac	h Re	ceipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	С			575.22							
	Name of Employer United HealthCare Services Inc	Occupation VP Gov't Re										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4424.71	P/	/R Ded	uctio	on (\$	\$287.6	61 Bi-W	/eekl	ly)	
с.	Full Name (Last, First, Middle Initial) DAVID MASCIA				Date of	f Re	eceip	ot				
	Mailing Address 5 MANOR ROAD NORTH				M M 11	/			/ Y			Y
	City GREENLAWN	State NY	Zip Code 11740-2806									3
			11740-2000	- 1	Amount	t of	Eac	h Re	ceipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	С					7		7	_	365.	00
	Name of Employer	Occupation										
	United HealthCare Services Inc	Regn Grow	th Off									
	Receipt For: Primary General	Year-to-Date ▼					1005	00 D' 14				
	Other (specify)		365.00	P/R Deduction (\$365.00 Bi-Weekly)								
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т	OTAL This Period (last page this line number	only)	······				1					

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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!		Detailed Summary Page		< 11a		11		11c		12	<u> </u>		
An	y information copied from such Reports and S	tatements ma	y not be sold or used by any pe	rson f	13 for the	purr	14 pos		15 oliciting		16 ntributi	17 ons	
	for commercial purposes, other than using the												
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	-را ار مح	Inited for Health)										
\square													
Α.	Full Name (Last, First, Middle Initial) BRIAN J TIDMARSH				Date of	Re	cei	ipt					
	Mailing Address 14425 NORTH 15TH STREE	Т			м м 11	/	ľ	30	/ Y)13	Y	
	City	State	Zip Code			acti	ion		R25787			5	
	PHOENIX	AZ	85022-4454	_	Amount	of	Ead	ch Rec	ceipt th	is P	eriod		
	FEC ID number of contributing federal political committee.	С			20.00								
	Name of Employer	Occupation		\neg									
	United HealthCare Services Inc	NA Exec Pl	narm Ben Mgmt										
	Receipt For:	Aggregate	Year-to-Date ▼										
	Other (specify)	F	P/R Ded	uctio	on ((\$10.00	0 Bi-We	ekly	/)				
в.	Full Name (Last, First, Middle Initial) DEMETRIOS KOUZOUKAS				Date of	Re	cei	ipt					
	Mailing Address 15552 57TH PLACE N				M M	1		30	/ Y		13	Y	
	City	State	Zip Code		Trans	acti	ion	ID : PI	R25787				
	PLYMOUTH	MN	55446-3737	- '	Amount	of	Ea	ch Rec	ceipt th	is P	eriod		
	FEC ID number of contributing federal political committee.	С				_	3	_	7		1000.	00	
	Name of Employer United HealthCare Services Inc	Occupation	Gen Counsel										
	Receipt For:	· ·	Year-to-Date ▼	\neg									
	Primary General	Ayyreyale	Year-to-Date ▼ 1500.00	P.	VR Dedu	uctic	on ((\$500.0)0 Bi-W	'eek	ly)		
	Other (specify) v		1500.00										
с.	Full Name (Last, First, Middle Initial) PHIL KRAUSE				Date of	Re	cei	ipt					
	Mailing Address 326 LAKEWOOD				м м 11	/	ſ	30	/ Y		y 13	Y	
	City	State	Zip Code		Trans	acti	ion	ו ID : P	R25787	7421	31763	3	
	BLOOMFIELD HILLS	MI	48304-3533	_ '	Amount	of	Ea	ch Rec	ceipt th	is P	eriod		
	FEC ID number of contributing federal political committee.	С				_	7		7		28.	00	
	Name of Employer	Occupation		-									
	United HealthCare Services Inc	Assc Dir Hl	thcare Econ										
	Receipt For:	Aggregate	Year-to-Date ▼										
	Other (specify) ▼		336.00	F	P/R Ded	uctio	on ((\$14.00	0 Bi-W€	ekly	/)		
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s	UBTOTAL of Receipts This Page (optional)		•••••				,		7		1048.0	00	
т	OTAL This Period (last page this line number	only)					T						

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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			Detailed Summary Page		11a 13		11b 14	11c		12	1 47
	y information copied from such Reports and for commercial purposes, other than using th				or the		pose of				
$\left\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporat	ed PAC (l	Jnited for Health)								
A.	Full Name (Last, First, Middle Initial) JEFFREY FOLKS			[Date of	Re	ceipt				
	Mailing Address 2216 ESSEX STREET				M M	1	30	1		y y 2013	Y
	City BALTIMORE	State MD	Zip Code 21231-3211				ion ID :				3
	FEC ID number of contributing federal political committee.	С			Amount	OT	Each R	eceipt	tnis		.12
	Name of Employer United HealthCare Services Inc	Occupation Dir Govt Re									
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 283.92] Р/	/R Ded	uctio	on (\$40.	56 Bi-\	Neek	(ly)	
в.	Full Name (Last, First, Middle Initial) LAURA CIAVOLA				Date of	Re	ceipt				
	Mailing Address 1686 WILDFIRE LANE				м м 11	1	30	1		2013	Y
	City FRISCO	State TX	Zip Code 75033-7325				on ID : Each R				3
	FEC ID number of contributing federal political committee.			. 01	,	,		1111.	10		
	Name of Employer United HealthCare Services Inc	Occupation SVP Ops									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3888.85	P/	R Dedu	uctio	on (\$555	.55 Bi	Wee	⊧kly)	
с.	Full Name (Last, First, Middle Initial)				Date of	Re	ceipt				
	Mailing Address 1929 ALBIZIA COURT				м м 11	/	30	/		2013	Y
	City BATON ROUGE	State LA	Zip Code 70808-3973	A			<mark>ion ID :</mark> Each R				3
	FEC ID number of contributing federal political committee.	С					7			91	.26
	Name of Employer	Occupation									
	United HealthCare Services Inc Receipt For:	Popoint For:									
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 273.78	P/R Deduction (\$45.63 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)			•			5			1283.	48
т	OTAL This Period (last page this line number	r only)					,				

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

Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only	one)		
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	11b 11c	12	
Any information copied from such Reports a	nd Statements ma		erson for the p	14 15 purpose of solicitin	g contributio	17 Dns
or for commercial purposes, other than using	the name and a	ddress of any political committee	e to solicit con	tributions from suc	committe	э.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (I	United for Health)				
Full Name (Last, First, Middle Initial) LAURA GROSCHEN			Date of	Receipt		
Mailing Address 3872 KENNET CIRCLE			M M 1_1	/ D D / Y	2013	
City EAGAN	State MN	Zip Code 55123-3952		of Each Receipt t		
FEC ID number of contributing federal political committee.	С			3 3	2500.0	0
Name of Employer United HealthCare Services Inc Receipt For:	Occupation VP IT Aggregate	Year-to-Date ▼	_			
Primary General Other (specify) ▼		2500.00	P/R Dedu	ction (\$1250.00 Bi	-Weekly)	
Full Name (Last, First, Middle Initial) B. SHERRI GIORGIO			Date of	Receipt		
Mailing Address 311 WHITWORTH WAY	-		M M 11	/ D D / Y 30	2013	
City NASHVILLE	State TN	Zip Code 37205-5017		ction ID : PR2600 of Each Receipt t		
FEC ID number of contributing federal political committee.	С			9 9	222.2	2
Name of Employer United HealthCare Services Inc	Occupation Dir Govt Re					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 777,77	P/R Dedu	ction (\$111.11 Bi-\	Veekly)	
Full Name (Last, First, Middle Initial) C. MARIANNE SHORT			Date of	Receipt		
Mailing Address 2215 SUMMIT AVENUE			M M 11	/ D D / 30	2013	
City SAINT PAUL	State MN	Zip Code 55105-1002		action ID : PR2601 of Each Receipt t		
FEC ID number of contributing federal political committee.	С				769.2	22
Name of Employer	Occupation	1				
United HealthCare Services Inc	EVP Gen C	Counsel				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4230.71	P/R Dedu	uction (\$384.61 Bi-\	Weekly)	
SUBTOTAL of Receipts This Page (optiona	l)			7 7	3491.4	4
TOTAL This Period (last page this line num	ber only)					

SCHEDULE A (FEC Form 3X) _ _ _

Use separate schedule(s)

FOR LINE NUMBER:

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Any information copied from such Reports and Sta or for commercial purposes, other than using the r NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated Full Name (Last, First, Middle Initial) A. MICHAEL CHRIST Mailing Address 23 BRIARWOOD ROAD	Detailed Si tements may not be sold ame and address of any I PAC (United for	political committee	to solicit con					
or for commercial purposes, other than using the r NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated Full Name (Last, First, Middle Initial) MICHAEL CHRIST	tements may not be sold ame and address of any I PAC (United for	or used by any per political committee	to solicit con	purpose of a	soliciting	contribut	ions	
or for commercial purposes, other than using the r NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated Full Name (Last, First, Middle Initial) MICHAEL CHRIST	ame and address of any	political committee	to solicit con					
Full Name (Last, First, Middle Initial) MICHAEL CHRIST		Health)						
A. MICHAEL CHRIST								
Mailing Address 23 BRIARWOOD ROAD			Date of	Receipt				
			M M 11	/ D D 30	/ Y	2013	Y	
City WEST HARTFORD	State Zip Code CT 06107-29			action ID : F of Each Re			3	
FEC ID number of contributing federal political committee.	C					222.	22	
Name of Employer United HealthCare Services Inc Receipt For:	Occupation Dir Govt Rel	_	_					
Primary General Other (specify) ▼	Aggregate Year-to-Date	777.77	P/R Dedu	uction (\$111	.11 Bi-W	/eekly)		
Full Name (Last, First, Middle Initial) B. KATHRYN HAYLEY			Date of	Receipt				
Mailing Address 7 BRIARWOOD LANE	State Zin Code		1 <u>1</u>	/ D D 30		2013		
City LINCOLNSHIRE	State Zip Code IL 60069-25			action ID : F of Each Re			•	
FEC ID number of contributing federal political committee.	C				,	121.	66	
Name of Employer United HealthCare Services Inc	Occupation SVP Clin Advancement		_					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	243.32	P/R Dedu	ıction (\$60.8	3 Bi-We	ekly)		
Full Name (Last, First, Middle Initial) C. STANLEY DENNIS			Date of	Receipt				
Mailing Address 1490 BENT CREEK DRIVE			M M	/ D D 30	/ Y	2013	Y	
City SOUTHLAKE	State Zip Code TX 76092-94			action ID : I of Each Re			3	
FEC ID number of contributing federal political committee.	C				7	857.	14	
Name of Employer	Occupation							
United HealthCare Services Inc Receipt For:								
Primary General Other (specify)	Aggregate Year-to-Date	2142.85	P/R Deduction (\$428.57 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)				7	5	1201.0)2	

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TIEMIZED RECEIPTS			for each category of the Detailed Summary Page	×	11a 13		11 14		11c 15	12	
	y information copied from such Reports and S for commercial purposes, other than using the								soliciting	g contril	outions
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (l	Jnited for Health)								
Α.	Full Name (Last, First, Middle Initial) ROGER RODRIGUEZ			0	Date o	f Re	ecei	pt			
	Mailing Address 10501 SW 102 AVENUE	_			M M	/	Ľ	30	/ Y	2013	
	City MIAMI	State FL	Zip Code 33176-3511							176831	
	FEC ID number of contributing federal political committee.	С			Amoun	t of	Ea	cn Re	eceipt tr	nis Perio 4	00.00
	Name of Employer United HealthCare Services Inc Receipt For: Primary General Other (specify) ▼	Occupation VP Gen Mg Aggregate] P/	′R Ded	luctio	ion	(\$200	.00 Bi-V	Veekly)	
в.	Full Name (Last, First, Middle Initial) MIGUEL VENEREO Mailing Address 14700 SUNSET LANE				Date o		_				
	Maining Address 14700 SUNSET LANE				M M			30	/ Y	_2013	Y
	City SOUTHWEST RANCHES	State FL	Zip Code 33330-3416	A	Transaction ID : PR2605692131763 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С			121.66						
	Name of Employer United HealthCare Services Inc	Occupation Med Dir									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 243.32	P/	R Ded	uctio	on (\$60.8	3 Bi-We	ekly)	
<u>с</u> .	Full Name (Last, First, Middle Initial) SUSAN BUSCH NEHRING				Date o	f Re	ecei	pt			
	Mailing Address 2680 COUNTY ROAD NINET	Y			м м 11	/	Ľ	30	/ Y	2013	Y
	City MAPLE PLAIN	State MN	Zip Code 55359							698331	
	FEC ID number of contributing federal political committee.	C			Amoun		Ea	cn Re	eceipt tr	nis Perio 2	50.00
	Name of Employer	Occupation	1								
	United HealthCare Services Inc	VP Comm									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 750.00	P/R Deduction (\$125.00 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)						3		- 7	77	71.66
т	OTAL This Period (last page this line number	only)					7				

SCHEDULE A (FEC Form 3X)

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)								
ILEWIZED RECEIPIS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
Any information copied from such Reports an or for commercial purposes, other than using			13 14 15 16 erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)		and pointed committee									
UnitedHealth Group Incorpora	ated PAC (United for Health)									
Full Name (Last, First, Middle Initial) A. KELLY DAVIS			Date of Receipt								
Mailing Address 12013 TALIESIN PLACE UNIT 22			M M / D D / Y Y Y Y Y								
City	State	Zip Code	Transaction ID : PR2605734231763								
RESTON	VA	20190-3338	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		56.16								
Name of Employer	Occupatior	1									
United HealthCare Services Inc	Govt Rel A	ssc Dir	_								
Receipt For:	Aggregate	Year-to-Date ▼	Amount of Each Receipt this Period								
Other (specify)		308.88	P/R Deduction (\$28.08 Bi-Weekly)								
Full Name (Last, First, Middle Initial) B. TRACY MALONE			Date of Receipt								
Mailing Address 900 S 22ND ST		7.0.1									
City ARLINGTON	State VA	Zip Code 22202-2625									
FEC ID number of contributing federal political committee.	С										
Name of Employer United HealthCare Services Inc	Occupation Dir Govt Re										
Receipt For:		Year-to-Date ▼									
Primary General Other (specify) ▼		846.12	P/R Deduction (\$76.92 Bi-Weekly)								
Full Name (Last, First, Middle Initial) C. MICHELLE FERENSIC			Date of Receipt								
Mailing Address 404 KENTUCKY BRANCH	I LANE		M M / D D / Y Y Y Y 11 30 2013								
City JACKSONVILLE	State FL	Zip Code 32259-8863	Transaction ID : PR2605738231763 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		111.10								
Name of Employer	Occupation	1									
United HealthCare Services Inc	SVP Prov S	Service									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 388.85	P/R Deduction (\$55.55 Bi-Weekly)								
		7 7 7									
SUBTOTAL of Receipts This Page (optional)		······ I	321.10								
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ITEMIZED RECEIPTS		each category of the ailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports and St or for commercial purposes, other than using the			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	d PAC (Unite	d for Health)						
Full Name (Last, First, Middle Initial) A. WILLIAM KIEFER			Date of Receipt					
Mailing Address 2924 CREEK LANE			11 30 / Y Y Y Y Y Y Y					
City MINNETONKA		o Code 5305-2988	Transaction ID : PR2605755631763					
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period					
Name of Employer United HealthCare Services Inc	Occupation SVP Strat Dev							
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to	D-Date ▼ 230.76	P/R Deduction (\$115.38 Bi-Weekly)					
Full Name (Last, First, Middle Initial) B. LISA WERNER			Date of Receipt					
Mailing Address 1941 HAVENSWOOD PLACE			11 30 2013					
City BLACKLICK		o Code 3004-8510	Transaction ID : PR2606842831763 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		625.00					
Name of Employer United HealthCare Services Inc	Occupation Behvrl Med Dir							
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to	-Date ▼ 1875.00	P/R Deduction (\$312.50 Bi-Weekly)					
Full Name (Last, First, Middle Initial) C. MICHAEL WEISSEL			Date of Receipt					
Mailing Address 99 HAGEN ROAD			11 30 / Y Y Y Y 2013					
City NEWTON		o Code 2459-2731	Transaction ID : PR2606842931763 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		600.00					
Name of Employer	Occupation							
United HealthCare Services Inc	United HealthCare Services Inc Optum Exec							
Receipt For:								
Other (specify)		2400.00	P/R Deduction (\$300.00 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			1455.76					
TOTAL This Period (last page this line number of	nly)							

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

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		Detailed Summary Page	×	11a	Н	11b	11c	12	_
Any information copied from such Reports and S									
or for commercial purposes, other than using the									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	∋d PAC (l	Jnited for Health)							
Full Name (Last, First, Middle Initial) A. JOHN MATECZUN				Date of	Red	ceipt			
Mailing Address 700 SAINT GEORGE BARBE	R ROAD			M M	/	30	/ Y	2013	Y
City	State	Zip Code	1	Transa		on ID :	PR26068	84513176	3
DAVIDSONVILLE	MD	21035-1348		۹mount	of	Each R	eceipt thi	is Period	
FEC ID number of contributing federal political committee.	С					9	7	714	.28
Name of Employer	Occupation								
United HealthCare Services Inc	Sr Med Dir								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1785.70	P/	/R Dedı	uctic	on (\$357	7.14 Bi-W	'eekly)	
Full Name (Last, First, Middle Initial) B. THOMAS ZIESMANN			Г	Date of	Reg	ceipt			
Mailing Address 2004 ESTES PARK ROAD				11	/	2000 - 20	/ Y	2013	Y
City	State	Zip Code		Transa		on ID : I	PR26068	5443176	3
SOUTHLAKE	ТХ	76092-3855	<i>F</i>	۹mount	of	Each R	eceipt thi	is Period	
FEC ID number of contributing federal political committee.	С					7	7	146	.00
Name of Employer United HealthCare Services Inc	Occupation SVP Ops								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 219.00	P/	'R Dedu	uctio	on (\$73.0	00 Bi-We	ekly)	
Full Name (Last, First, Middle Initial) C. JAN EYER				Date of	Red	ceipt			
Mailing Address 21 AMARANTH DRIVE				M M 11	/	30	/ Y	2013	Y
	State CO	Zip Code 80127-2611					PR26068		3
	00	00121-2011		۹mount	of	Each R	eceipt thi	is Period	
FEC ID number of contributing federal political committee.	С							91	.26
Name of Employer	Occupation								
United HealthCare Services Inc	Exec Dir								
Receipt For:	Aggregate	Year-to-Date ▼		(D		··· / ··· -	60 D' '''	(بابان	
Other (specify)		273.78	^{P,}	rk Dedi	uctic	on (\$45.	.63 Bi-We	екіу)	
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Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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PAGE 194 OF

ITEMIZED RECEIPTS		Detailed Summary Page		11a		11b		11c		2					
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Any information copied from such Reports an or for commercial purposes, other than using															
NAME OF COMMITTEE (In Full)	ated PAC (I	Jnited for Health)													
Full Name (Last, First, Middle Initial) CYNTHIA MARGRITZ				Date of	Re	ceipt									
Mailing Address 16702 L STREET				м м 11	/		D 30	/ Y	20 ²		Y				
City	State	Zip Code			acti			R2607			;				
ОМАНА	NE	68135-1324		Amount	of	Each	Re	ceipt th	nis Pe	riod					
FEC ID number of contributing federal political committee.	С					7		,		91.2	26				
Name of Employer	Occupation														
United HealthCare Services Inc	Assc Dir Cl	in Qlty													
Receipt For:	Aggregate	Year-to-Date ▼													
Primary General Other (specify) ▼		273.78] ^P	/R Dedu	uctio	on (\$4	45.6	3 Bi-W	eekly)						
Full Name (Last, First, Middle Initial) B. SHAWN SCHWARTZ				Date of	Re	ceipt									
Mailing Address 338 SNELLING AVE S			11 30 / Y Y Y Y Y												
City	State	Zip Code			acti			R2608							
SAINT PAUL	MN	55105-2048		Amount											
FEC ID number of contributing federal political committee.	C					7		7		91.2	26				
Name of Employer United HealthCare Services Inc	Occupation Assc Dir Nt														
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11	EMIZED DISBURSEMENTS	for each	category of the Summary Page			k only 21b 27	22 28a	X	23 28b		24 28c		25 29	26 30b						
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$\left \right\rangle$	NAME OF COMMITTEE (In Full)			141~)																
\bigvee	UnitedHealth Group Incorporated F		illed for Hea	un)																
Α.	Full Name (Last, First, Middle Initial) Connecticut Republican State Cen	tral Con	nmittee				Date o	_	sburse			V	Ŷ	Y						
	Mailing Address 31 Pratt Street, 4th Floor						11			11			013							
	City S Hartford Purpose of Disbursement	State CT	Zip Code 06103				Tran	sacti	ion ID):	366085	97								
	Contribution			0	11		Amour	nt of	Each	D	isburse	ment	t this	Period						
	Candidate Name	tral Cam	amittaa	Cate						7			250	0.00						
	Connecticut Republican State Cent Office Sought: House Disburser Senate President Disburser State: District: Disburser		General		ype		Contribution													
_	Full Name (Last, First, Middle Initial)						D .	(D)												
в.	Vargas for Congress	Mailing Address 330 Encinitas Blvd., Suite 101							sburse		_		V	V						
	Mailing Address 330 Encinitas Blvd., Suite 101								11 / D D / Y Y Y Y 11 11 2013											
	Encinitas	State CA	Zip Code 92024				Tran	sact	ion ID) :	366085	i98								
	Purpose of Disbursement Contribution			011 Amount of Ea						D	isburse	ment	t this	Period						
	Rep. Juan Vargas			Cate Ty	ego ype		. L.		7	_	7		100	0.00						
	Senate X	nent For: Primary Other (spe	General				Contrik	outio	า											
с.	Full Name (Last, First, Middle Initial) Pete Sessions for Congress						Date o													
	Mailing Address PO Box 823047						11			D 1			013	Y						
	CityStateZip CodeDallasTX75382-3047						Tran	sact	ion ID):	366085	99								
	Purpose of Disbursement Contribution 011				11		Amour	nt of	Each	D	lisburse	ment	t this	Period						
	Candidate Name Rep. Pete Sessions	ndidate Name Categ								1			250	_						
	•	nent For: Primary Other (spe	General		, , , , , , , , , , , , , , , , , , , ,	Contribution														
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S	CHEDULE B (FEC Form 3X)			F)B		NU	MBER:				PA	GE	196	OF 222
	EMIZED DISBURSEMENTS		arate schedule(s) category of the			k only		ie)		1		L			
			Summary Page		$\left - \right $	21b 27		22 28a	×	23 28b	Н	24 28c		25 29	26 30b
	y information copied from such Reports and Stater for commercial purposes, other than using the nan					pers		for the		pose (licitir		ntribu	tions
$\left \right\rangle$	NAME OF COMMITTEE (In Full)														
$ \rangle$	UnitedHealth Group Incorporated F	PAC (Ur	nited for Hea	alth)											
~	Full Name (Last, First, Middle Initial)							Doto -	f D:-	bur-	mer				
А.	Rodney for Congress							Date of		sburse		_		Y	V
	Mailing Address PO Box 344							11	ĺ		3			013	
	5	State IL	Zip Code					Trans	acti	ion ID	: 36	6132	16		
	Taylorville Purpose of Disbursement	IL	62568-0344												
	Contribution			C)11		,	Amount	t of	Each	Disb	urse	men	t this	Period
	Candidate Name			Cate		y/		-						100	0.00
	Rep. Rodney L. Davis Office Sought: V House Disburser	ment For:	2014	T	ype				-	7	-	7	-	100	
		Primary Other (spe	General				(Contribu	ution	١					
	State: IL District: 13														
в	Full Name (Last, First, Middle Initial) Freedom Fund							Date of	f Die	shurse	men	ŀ			
υ.	Fleedon Fund								_	D			Y Y	Y	Y
	Mailing Address 701 8th Street NW, Suite 500							11	ĺ		3			013	
	V State Zip Code ushington DC 20001 pose of Disbursement							Trans	sacti	ion ID	: 36	6132	217		
	Contribution			(011			Amount	t of	Each	Disb	urse	men	t this	Period
	Candidate Name			Cate	egor	y/			1					200	0.00
	Freedom Fund				ype	, 		_	-	7	-	7	-	300	5.00
	Office Sought: House Disburser Senate President District:	ment For: Primary Other (spe	General ccify) ▼				(Contrib	utior	ו					
_	Full Name (Last, First, Middle Initial)														
C.	Friends of Patrick Murphy							Date of	f Dis	sburse	emen	t			
	Mailing Address 4521 PGA Blvd. #412							^M 11	/	D 1	3			013	Y
	City	State	Zip Code					Trans	acti	ion ID	· 36	6132	18		
	Palm Beach Gardens Purpose of Disbursement Contribution	FL	33418	_	_					U 10	. 50	5152			
	Candidate Name	011			/	Amount	t of	Each	Disb	urse	men	t this	Period		
	Rep. Patrick Murphy			Category/ Type										250	0.00
	Office Sought: House Disburser Senate President	Senate President President					C	Contribu	ution	1		7			
_	State: FL District: 18														
s	UBTOTAL of Disbursements This Page (optional)								_	,		7		6500	0.00
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	HEDULE B (FEC Form 3X)							R LINE NUMBER: PAGE 197 OF 222											
ITE	MIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(c	hec	k only 21b	one	e) 22	X	23	Γ	24		25	26				
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	r information copied from such Reports and Staten or commercial purposes, other than using the nam																		
	NAME OF COMMITTEE (In Full)																		
\vee	UnitedHealth Group Incorporated F	PAC (Ur	ited for Hea	lth)															
	Full Name (Last, First, Middle Initial) Friends of Patrick Murphy						C	Date of	Dis	burse	em	ient							
-	Mailing Address 4521 PGA Blvd. #412						[м м 11	/	D 1	D 3	/ Y		013	Y				
	,	State	Zip Code					Trans	acti	on ID)::	366132 [.]	19						
	Palm Beach Gardens Purpose of Disbursement	FL	33418								-								
	Contribution			0	011		A	mount	of	Each	D	isburser	ment	t this	Period				
	Candidate Name			Cate			1							2500	0.00				
	Rep. Patrick Murphy Office Sought: X House Disburser	Murphy Type X House Disbursement For: 2014							-	7		7	-						
	Senate President	Primary Other (spe	X General				Contribution												
	State: FL District: 18 Full Name (Last, First, Middle Initial)																		
	Adam Smith for Congress							Date of	Dis										
Ī	Mailing Address PO Box 578							м м 11	/		D 3	/ Y		013	Y				
	City Strength Strengt	State WA	Zip Code 98057					Trans	acti	ion ID):	366132	20						
Ī	Purpose of Disbursement Contribution			C)11		A	mount	of	Each	D	isburser	ment	t this	Period				
	Candidate Name			Cate	egoi	ry/	1		1					25.0	2.00				
	Rep. D. Adam Smith				ype		J.		-	7	_			250	5.00				
	Senate President	nent For: Primary Other (spe	General				С	Contribu	utior	ı									
	State: WA District: 09																		
С.	Full Name (Last, First, Middle Initial)						C	Date of	Dis										
Ī	Mailing Address							M M	/	D	D	/ Y	Ý	Y	Y				
Ō	City	Zip Code																	
Ī	Purpose of Disbursement								-		-								
ī	Candidate Name	Cate Ty						mount	t of	Each	D	isburser	nent	t this	Period				
	President	nent For: Primary Other (spe	General cify) ▼																
, `	State: District:						_		_		_								
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S	CHEDULE B (FEC Form 3X)			<u>OR</u>		NUMBER			PA	GE	198	OF 222				
IT	EMIZED DISBURSEMENTS	Use separate schedule(for each category of the	s) ((k only	one)		٦.								
		Detailed Summary Page			21b 27	22 28a		23 28b	24 28c	×	25 29	26 30b				
	y information copied from such Reports and Staten for commercial purposes, other than using the name															
\square	NAME OF COMMITTEE (In Full)															
	UnitedHealth Group Incorporated F	PAC (United for He	ealth)													
^	Full Name (Last, First, Middle Initial)					Date c	f Di	churce	mont							
А.	Biggs2014							D		VV	Y	V				
	Mailing Address 10612 S Greenfield Rd					11			3		013					
	5	State Zip Code				Tran	sact	ion ID	: 365838	42						
	Gilbert Purpose of Disbursement	AZ 85234														
	Andy Biggs, STATE SENATE 12th AZ			011		Amour	nt of	Each	Disburse	ment	this	Period				
	Candidate Name		Cat	tego	ry/											
	AZ Sen. Andy Biggs			Гуре			-	7			44(0.00				
		nent For: 2014 Primary General						0 .		4		-				
	President	Other (specify)				Andy B	iggs	, STA	TE SENA	IE 12	2th A2	<u> </u>				
	State: AZ District:	(1 1 1														
_	Full Name (Last, First, Middle Initial)															
В.	Friends of Adam Driggs					Date c	of Di	sburse								
	Mailing Address 4231 E. Clarendon Avenue					M M	/		D /)3		013	Y				
	City S Phoeniz	State Zip Code AZ 85018				Tran	sact	tion ID	: 365838	843						
	Purpose of Disbursement Adam Driggs, STATE SENATE 28th AZ			011		Amour	nt of	Each	Disburse	ment	this	Period				
	Candidate Name			ego							44	0.00				
	AZ Sen. Adam Driggs Office Sought: House Disbursen	nent For: 2014		ӯре		_	-	7		-						
		Primary General				Adam	Dria	72 ac	ATE SEN		28th	۸ 7				
		Other (specify)				Audini	Jing	ys, 51	ATE SEN		2001	<i>٦</i> ٢				
_	State: AZ District:															
C.	Full Name (Last, First, Middle Initial) Anna Tovar for Senate					Date c	of Di	sburse	ement							
						M M	/	D			Y	Y				
	City State Zip Code					11		0	3	20	013					
						Tran	sact	ion ID	: 365838	844						
	Tolleson AZ 85353 Purpose of Disbursement															
	Anna Tovar, STATE SENATE 19th AZ			011		Amour	nt of	Each	Disburse	ment	this	Period				
	Candidate Name	Catego									11	0.00				
	AZ Sen. Anna Tovar Office Sought: House Disburser	went Fem. co. (уре				7	7		440	5.00				
	Senate President	nent For: 2014 Primary General Other (specify) ▼				Anna T	ova	r, STA	TE SENA	TE 1	9th A	Z				
	State: AZ District:															
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	y information copied from such Reports and Stater for commercial purposes, other than using the nan											
$\left \right $	NAME OF COMMITTEE (In Full)											
	UnitedHealth Group Incorporated F	PAC (United	d for Heal	lth)								
Α.	Full Name (Last, First, Middle Initial) Elect Steve Pierce						Date o	f Dis	burser	ment		
							M M	/	D	D /	Y Y Y	Y
	Mailing Address 4340 E Indian School Rd, Ste 21-5	5					11		03	3	2013	_
	5		Code				Trans	actio	on ID ·	: 365838	45	
	Phoenix	AZ 85	018				mana				-10	
	Purpose of Disbursement Steve Pierce, STATE SENATE 1st AZ			01	1	1	Amoun	t of E	Each I	Disburse	ment this	Period
	Candidate Name			Categ	aorv	/						
	AZ Sen. Steve Pierce			Тур					7		44	0.00
	Office Sought: House Disburser Senate President	nent For: 2014 Primary Other (specify)	General ▼				Steve P	Pierce	e, STA	TE SEN	ATE 1st A	Z
_	State: AZ District:											
_	Full Name (Last, First, Middle Initial)											
в.	Shooter for Senate - Primary						Date o	_				
	Mailing Address 2901 S Palo Verde Lane, Unit 42						м м 11	/	03		2013	Y
	Yuma		Code 365				Trans	sactio	on ID	: 365838	46	
	Purpose of Disbursement Don Shooter, STATE SENATE 13th AZ			01	11	1	Amoun	t of E	Each I	Disburse	ment this	Period
	Candidate Name			Categ	gory	/					44	0.00
	AZ Sen. Don Shooter			Тур	pe		<u> </u>	-	7			0.00
		nent For: 2014 Primary Other (specify)	General				Don Sh	ootei	r, STA	TE SEN	ATE 13th	AZ
с.	Full Name (Last, First, Middle Initial) Bob Worsley for State Senate						Date o	f Dis	burser	ment		
	Mailing Address PO Box 31086	iling Address PO Box 31086										Y
	City State Zip Code Mesa AZ 85275						Trans	sactio	on ID	: 365838	47	
	Mesa Purpose of Disbursement	<u>, ~ 00</u>	215		_							
	Bob Worsley, STATE SENATE 25th AZ Candidate Name	Vorsley, STATE SENATE 25th AZ		01	1		Amoun	t of E	Each I	Disburse	ment this	Period
	AZ Sen. Bob Worsley			Cateo Typ		/					44	0.00
	•	nent For: 2014 Primary Other (specify)	General ▼		<u> </u>		Bob Wo	orsley	, STA	TE SEN	ATE 25th	AZ
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SC	HEDULE B (FEC Form 3X)			FC	FOR LINE NUMBER: PAGE 2					GE_200	OF 222					
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	y information copied from such Reports and Stater for commercial purposes, other than using the nar															
\square	NAME OF COMMITTEE (In Full)															
	UnitedHealth Group Incorporated I	PAC (U	nited for Hea	lth)												
	Full Name (Last, First, Middle Initial) Robert Meza for State Senate 201	4					Date o	f Dist	ourser	ment						
	Mailing Address 1833 W Lewis Avenue						11	/	03		2013	Y				
	Phoenix	State AZ	Zip Code 85007				Trans	actio	on ID :	365838	48					
	Purpose of Disbursement Robert Meza, STATE SENATE 30th AZ			0	11	1	Amoun	t of E	Each [Disburse	ment this	Period				
	Candidate Name AZ Sen. Robert Meza				egory/ /pe						44	0.00				
	Office Sought: House Disburser Senate President	ment For: Primary Other (spe	General		,		Robert	Meza	, STA	TE SEN/	ATE 30th	AZ				
	State: AZ District: Full Name (Last, First, Middle Initial) Committee to Elect Kelli Ward			Date o	f Dist	ourser										
	Mailing Address 1990 McCulloch Blvd N, # D-228						м м 11	/	03		2013	Y				
	City Lake Havasu City	Zip Code 86403		Transaction ID : 36583849												
	Purpose of Disbursement Kelli Ward, STATE SENATE 5th AZ								Each [Disburse	ment this	Period				
	Candidate Name AZ Sen. Kelli Ward				egory/ /pe			,			44	0.00				
		ment For: Primary Other (spe	General				Kelli W	ard, S	STATE	E SENAT	E 5th AZ					
	Full Name (Last, First, Middle Initial) Hobbs 2014						Date o									
	Mailing Address PO Box 15642						M M	/	03		2013	- Y				
	State Zip Code AZ 85060						Trans	sactio	on ID :	: 365838	50					
	Purpose of Disbursement Katie Hobbs, STATE SENATE 24th AZ	bbs, STATE SENATE 24th AZ 011					Amoun	t of E	Each [Disburse	ment this	Period				
	Candidate Name AZ Sen. Katie Hobbs				egory/ /pe						44	0.00				
	Office Sought: House Disburse Senate President State: AZ District:	ment For: Primary Other (spe	General				Katie Hobbs, STATE SENATE 24th AZ									
s	UBTOTAL of Disbursements This Page (optional))	▶ -	Ľ.				132	0.00				
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S	CHEDULE B (FEC Form 3X)			NUMBER: PAGE 201 OF 222
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Ar or	y information copied from such Reports and Stater for commercial purposes, other than using the nam	ments may not be sold or me and address of any po	used by any pers litical committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	UnitedHealth Group Incorporated F	PAC (United for H	ealth)	
Δ.	Full Name (Last, First, Middle Initial) Vote Rick Gray			Date of Disbursement
	VOLE RICK Glay			
	Mailing Address 9521 W. Cedar Hill Circle			11 03 2013
	5	State Zip Code AZ 85351		Transaction ID : 36583851
	Sun City Purpose of Disbursement	AZ 85351		-
	Rick Gray, STATE HOUSE 21st AZ		011	Amount of Each Disbursement this Period
	Candidate Name		Category/	440.00
	AZ Rep. Rick Gray		Туре	440.00
	Senate X President	ment For: 2014 Primary Genera Other (specify)	I	Rick Gray, STATE HOUSE 21st AZ
	State: AZ District: 21			1
В.	Full Name (Last, First, Middle Initial) Friends of Ruben Gallego			Date of Disbursement
	Mailing Address 101 N 7th St., Unit 103			11 / D D / Y Y Y Y 11 03 2013
	Phoenix	State Zip Code AZ 85034		Transaction ID : 36583853
	Purpose of Disbursement Ruben Gallego, STATE HOUSE 27th AZ		011	Amount of Each Disbursement this Period
	Candidate Name		Category/	440.00
	AZ Rep. Ruben Gallego		Туре	440.00
		ment For: 2014 Primary Genera Other (specify) ▼	I	Ruben Gallego, STATE HOUSE 27th AZ
C.	Full Name (Last, First, Middle Initial) Elect J.D. Mesnard - Primary			Date of Disbursement
	Mailing Address 1427 W. Homestead Ct.		11 03 2013	
	City Standler	State Zip Code AZ 85286		Transaction ID : 36583854
	Purpose of Disbursement Javan Mesnard, STATE HOUSE 17th AZ		011	-
	Candidate Name	·		Amount of Each Disbursement this Period
	AZ Rep. Javan Mesnard		Category/ Type	440.00
	Office Sought: House Disburser Senate President State: AZ District: 17	ment For: 2014 Primary Genera Other (specify) ▼	I	Javan Mesnard, STATE HOUSE 17th AZ
Г				1320.00
S	UBTOTAL of Disbursements This Page (optional)		····· ►	1320.00
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S	CHEDULE B (FEC Form 3X)			OR L	LINE N	NUMBER:			P	AGE	202	OF 222			
IT	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(c		c only			1 22			1.05				
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	y information copied from such Reports and Staten for commercial purposes, other than using the nan				perso	n for the		pose (of soliciti	ng co	ntribu	itions			
\square	NAME OF COMMITTEE (In Full)														
	UnitedHealth Group Incorporated F	PAC (United for Hea	alth)												
Δ	Full Name (Last, First, Middle Initial) VOTE Heather Carter					Date of	f Die	shurse	ment						
								D		Y Y	Y	Y			
	Mailing Address 28248 N Tatum Blvd. Ste B1-299					11			3		013				
	5	State Zip Code				Trans	acti	ion ID	: 36583	355					
	Cave Creek Purpose of Disbursement	AZ 85331													
	Heather Carter, STATE HOUSE 15th AZ		0)11		Amount	t of	Each	Disburs	ement	this	Period			
	Candidate Name		Cate	eaor	v/										
	AZ Rep. Heather Carter			Type 440.00											
	Senate X President	nent For: 2014 Primary General Other (specify) ▼				Heather	[.] Ca	rter, S	TATE H	OUSE	15th	AZ			
	State: AZ District: 15														
в	Full Name (Last, First, Middle Initial)					Date of	f Die	shurse	ment						
υ.	Lovas for Arizona - Primary							D		Y Y	V	V			
	Mailing Address 7197 W Mariposa Grande Lane			11	ĺ)3		013						
	Peoria	State Zip Code AZ 85383				Trans	acti	ion ID	: 36583	856					
	Purpose of Disbursement Phil Lovas, STATE HOUSE 22nd AZ Candidate Name		C)11		Amount	t of	Each	Disburs	ement	this	Period			
	AZ Rep. Phil Lovas		Cate	egor ype	у/						44	0.00			
	•	ment For: 2014	13	yhe					,						
	Senate	Primary General Other (specify)				Phil Lov	/as,	STAT	E HOUS	E 22r	nd AZ				
_	Full Name (Last, First, Middle Initial)														
C.	Kate Brophy McGee 2014 - Primar	у				Date of	f Dis	sburse		Y Y	Y	Y			
	Mailing Address 42 E. Butler Drive					11		0	3	20	013				
	Phoenix	StateZip CodeAZ85020				Trans	acti	ion ID	: 36583	857					
	Kate McGee, STATE HOUSE 28th AZ	urpose of Disbursement Kate McGee, STATE HOUSE 28th AZ				Amount	t of	Fach	Disburs	ment	this	Period			
	Candidate Name	011 Category/		v/	, uniouri		Laon	Biobalo			_				
	AZ Rep. Kate Brophy McGee	Туре						7			44	0.00			
	Office Sought: House Disburser Senate President State: AZ District: 28	nent For: 2014 Primary General Other (specify) ▼				Kate Mo	Gee	e, STA	ATE HOU	ISE 2	8th A	Ζ			
						_	-	_		_	_	_			
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S	CHEDULE B (FEC Form 3X)			F	OR	LIN	INE NUMBER: PAGE 203 OF 222											
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			I Summary Page			21k 27	<u> </u>	22 28a		23 28b	>	24 28c	× 25					
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\backslash	NAME OF COMMITTEE (In Full)																	
	UnitedHealth Group Incorporated I	PAC (U	nited for Hea	lth)														
_	Full Name (Last, First, Middle Initial)																	
А.	Elect Eric Meyer - Primary							Date o		sbur	ser	nent						
	Mailing Address 7765 N Foothill Dr S							11		D	03		2013					
	City	State	Zip Code					Tran	eact	ion I	. -	365838	59					
	Paradise Valley	AZ	85253					ITan	Saul		υ.	. 303030	50					
	Purpose of Disbursement Eric Meyer, STATE HOUSE 28th AZ			C	011			Amour	nt of	Eac	h [Disburse	ment th	is Period				
	Candidate Name			Cat										440.00				
	AZ Rep. Eric Meyer	ment For:		Т	ype		_	<u> </u>		7	1							
	Senate X President	Primary Other (spe	General					Eric Me	eyer,	STA	ΥE	E HOUS	E 28th A	Z				
	State: AZ District: 28																	
В.	Full Name (Last, First, Middle Initial) Elect Justin Olson							Date o	of Di	sbur	ser	nent						
								M N	/	D	- 1		Y Y Y					
	Mailing Address 524 N 38th Street							11			03	3	2013	3				
	Mesa	State Zip Code AZ 85205						Tran	sact	ion l	ID :	: 36583	359					
	Purpose of Disbursement Justin Olson, STATE HOUSE 25th AZ			(011			Amour	nt of	Eac	h [Disburse	ment th	is Period				
	Candidate Name			Cat	-	n/		-						_				
	AZ Rep. Justin Olson				ype			<u> </u>		7				440.00				
		ment For: Primary Other (spe	General					Justin	Olso	n, S⁻	ΤΑ ⁻	TE HOL	SE 25th	AZ				
_	Full Name (Last, First, Middle Initial)						+											
C.	Vote Forese							Date of	of Di	sbur	ser	nent						
								M N	1 /	D	- 1	D /	Y Y Y					
	Mailing Address 2044 E Taurus Pl							11		-	03		2013					
	City	State	Zip Code				+	Tran	sart	ion I	י חו	: 36583	260					
	Chandler	AZ	85249					man	3401			. 505050						
	Purpose of Disbursement Tom Forese, STATE HOUSE 17th AZ)11					_								
	Candidate Name							Amour	η οι	Eac	nι	JISDUrse	ment th	is Period				
	AZ Rep. Tom Forese				Category/ Type				_	_			4	440.00				
	Senate President	ment For: Primary Other (spe	General					Tom Forese, STATE HOUSE 17th AZ										
_	State: AZ District: 17																	
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	E B (FEC Form 3X)	Use separate schedule(FOR LINE	
	DISBURSEMENTS	for each category of the Detailed Summary Page	21b	22 23 24 25 26 28a 28b 28c X 29 30b
or for commerce	cial purposes, other than using the na			on for the purpose of soliciting contributions solicit contributions from such committee.
	COMMITTEE (In Full)			
/	ealth Group Incorporated	PAC (United for He	ealth)	
-	Last, First, Middle Initial) tee to Elect Doug Colema	n - Primary		Date of Disbursement
Mailing Add	ress 1474 S Royal Palm Rd			11 03 2013
City Apache Jun		StateZip CodeAZ85119	_	Transaction ID : 36583861
	Disbursement bleman, STATE HOUSE 16th AZ		011	Amount of Each Disbursement this Period
Candidate N			Category/	
	Douglas Kent Coleman		Туре	440.00
Office Soug	ht: X House Disburse Senate President	ement For: 2014 Primary General Other (specify) ▼		Douglas Coleman, STATE HOUSE 16th AZ
State: AZ	10			
_	Last, First, Middle Initial) oodale 2014 - Primary			Date of Disbursement
Mailing Add	ress 4000 Redhill Dr			11 03 2013
City Kingman		StateZip CodeAZ86409		Transaction ID : 36583862
Doris Good	Disbursement lale, STATE HOUSE 5th AZ		011	Amount of Each Disbursement this Period
Candidate N			Category/	440.00
AZ Rep Office Soug	. Doris Goodale	ement For: 2014	Туре	
State: AZ	Senate President	Primary General Other (specify) ▼		Doris Goodale, STATE HOUSE 5th AZ
-	Last, First, Middle Initial) or Arizona - Primary		Date of Disbursement	
Mailing Add	ress 1206 N Reeves Rd			11 03 Y Y Y Y Y 11 03
City Coolidge		StateZip CodeAZ85128		Transaction ID : 36583863
	Disbursement ope, STATE HOUSE 8th AZ		011	Amount of Each Disbursement this Period
Candidate N AZ Rep	l ^{ame} . Thomas Shope Jr.		Category/ Type	440.00
Office Soug	ht: X House Disburs Senate President	ement For: 2014 Primary General Other (specify) ▼	1,100	Thomas Shope, STATE HOUSE 8th AZ
				4000.00
	f Disbursements This Page (optional)			1320.00
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S	CHEDULE B (FEC Form 3X)		-l	FOR LINE I	NUMBER: PAGE 205 OF 222
	EMIZED DISBURSEMENTS	Use separate sche for each category o Detailed Summary	of the	(check only 21b 27	one) 22 23 24 25 26 28a 28b 28c X 29 30b
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\backslash	NAME OF COMMITTEE (In Full)				
	UnitedHealth Group Incorporated	PAC (United for	r Healt	th)	
Α.	Full Name (Last, First, Middle Initial) Ethan for House				Date of Disbursement
					M M / D D / Y Y Y Y
	Mailing Address 420 E Deone Ln				11 03 2013
	City Tucson	State Zip Cod AZ 85704	е		Transaction ID : 36583864
	Purpose of Disbursement	, <u>12</u> 03704			
	Ethan Orr, STATE HOUSE 9th AZ			011	Amount of Each Disbursement this Period
	Candidate Name AZ Rep. Ethan Orr			Category/ Type	440.00
	•	ment For: 2014		1300	
	Senate X		neral		Ethan Orr, STATE HOUSE 9th AZ
	State: AZ District: 09	Other (specify)			
	Full Name (Last, First, Middle Initial)				
В.	Eddie Farnsworth 2014				Date of Disbursement
	Mailing Address 1126 E. Harrison St.				11 / D D / Y Y Y Y 2013
	City Gilbert	State Zip Cod AZ 85295	e		Transaction ID : 36583865
	Purpose of Disbursement Eddie Farnsworth, STATE HOUSE 12th AZ			011	Amount of Each Disbursement this Period
	Candidate Name			Category/	440.00
	AZ Rep. Eddie Farnsworth Office Sought: X House Disburse	ment For: 2014		Туре	
		Primary Ger	neral		Eddie Farnsworth, STATE HOUSE 12th AZ
	State: AZ District: 12	Other (specify)			
с С	Full Name (Last, First, Middle Initial)				Date of Disbursement
0.	Re-Elect Debbie Lesko - Primary				
	Mailing Address PO Box 5292				11 03 2013
	City Peoria	State Zip Cod AZ 85385	е		Transaction ID : 36583866
	Purpose of Disbursement Debbie Lesko, STATE HOUSE 21st AZ				
	Candidate Name	TE HOUSE 21ST AZ		011	Amount of Each Disbursement this Period
	AZ Rep. Debbie Lesko			Category/ Type	440.00
	Senate President	ment For: 2014 Primary Gen Other (specify)	neral		Debbie Lesko, STATE HOUSE 21st AZ
_	State: AZ District: 21				
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	HEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 206 OF 222
	EMIZED DISBURSEMENTS	Use separate schedu for each category of Detailed Summary Pa	the 21b	one) 22 23 24 25 26 28a 28b 28c X 29 30b
An or	y information copied from such Reports and State for commercial purposes, other than using the nat	ments may not be sold on me and address of any p	or used by any perso political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\square	NAME OF COMMITTEE (In Full)			
	UnitedHealth Group Incorporated	PAC (United for I	Health)	
	Full Name (Last, First, Middle Initial)			
Α.	Vincent Gregory for Senate			Date of Disbursement
	Mailing Address 19578 San Jose Blvd.			11 05 2013
	5	State Zip Code MI 48076		Transaction ID : 36584176
	Lathrup Village Purpose of Disbursement	MI 48076		
	Vincent Gregory, STATE SENATE 14th MI		011	Amount of Each Disbursement this Period
	Candidate Name		Category/	500.00
	MI Sen. Vincent Gregory		Туре	500.00
	Senate President	ment For: 2014 Primary Gener Other (specify)	ral	Vincent Gregory, STATE SENATE 14th MI
	State: MI District:			
	Full Name (Last, First, Middle Initial) Cindy Burkett for State Represent	ative		Date of Disbursement
	Mailing Address 226 Magic Lane			11 06 2013
	City Sunnyvale	StateZip CodeTX75182		Transaction ID : 36602205
	Purpose of Disbursement Cindy Burkett, STATE HOUSE 113th TX		011	Amount of Each Disbursement this Period
	Candidate Name		Category/	500.00
	TX Rep. Cindy Burkett Office Sought: Y House Disburse	ment For: 2014	Туре	7 7 7 000.00
		Primary Gener Other (specify)	ral	Cindy Burkett, STATE HOUSE 113th TX
_	Full Name (Last, First, Middle Initial)			
C	Giovanni Capriglione Campaign			Date of Disbursement
0.				
0.	Mailing Address 1205 S. White Chapel Blvd.			11 / D D / Y Y Y Y 11 06 2013
		State Zip Code TX 76092		
	Mailing Address 1205 S. White Chapel Blvd.		011	11 06 2013 Transaction ID : 36602206
	Mailing Address 1205 S. White Chapel Blvd. City Southlake Purpose of Disbursement		011	11 06 2013
	Mailing Address 1205 S. White Chapel Blvd. City Southlake Purpose of Disbursement Giovanni Capriglione, STATE HOUSE 98th TX Candidate Name		011 Category/ Type	11 06 2013 Transaction ID : 36602206
	Mailing Address 1205 S. White Chapel Blvd. City Southlake Purpose of Disbursement Giovanni Capriglione, STATE HOUSE 98th TX Candidate Name TX Rep. Giovanni Capriglione Office Sought: House Senate President Disburse		Category/ Type	11 06 2013 Transaction ID : 36602206 Amount of Each Disbursement this Period
	Mailing Address 1205 S. White Chapel Blvd. City Southlake Purpose of Disbursement Giovanni Capriglione, STATE HOUSE 98th TX Candidate Name TX Rep. Giovanni Capriglione Office Sought:	TX 76092 ment For: 2014 Primary Gene	Category/ Type	11 06 2013 Transaction ID : 36602206 Amount of Each Disbursement this Period 500.00
	Mailing Address 1205 S. White Chapel Blvd. City Southlake Purpose of Disbursement Giovanni Capriglione, STATE HOUSE 98th TX Candidate Name TX Rep. Giovanni Capriglione Office Sought: House Senate President Disburse	TX 76092 ment For: 2014 Primary Gener Other (specify) ▼	Category/ Type	11 06 2013 Transaction ID : 36602206 Amount of Each Disbursement this Period 500.00

SC	HEDULE B (FEC Form 3X)		F	FOR LINE NUMBER: PAGE 207 OF									OF 222	
IT	EMIZED DISBURSEMENTS		parate schedule(s) a category of the	(C	hec	-	only o			1.00	-			
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	y information copied from such Reports and Stater for commercial purposes, other than using the nan					y pe	erson	for the		pose		soliciti	ng contri	butions
$\left \right\rangle$	NAME OF COMMITTEE (In Full)													
	UnitedHealth Group Incorporated F	PAC (U	nited for Hea	alth)										
_	Full Name (Last, First, Middle Initial)							Data	(D)					
Α.	Myra Crownover Campaign							Date o	of Di					
	Mailing Address PO Box 1784							11	/	D	06		2013	Y
	City	State	Zip Code					Tron		ion II	. .	266025	07	
	Lake Dallas	ТХ	75065					Trans	sact		: כ	366022	.07	
	Purpose of Disbursement Myra Crownover, STATE HOUSE 64th TX			0	11			Amoun	it of	Each	۱C	Disburse	ment thi	s Period
	Candidate Name			Cate	egoi	ry/							10	00.00
	TX Rep. Myra Crownover			Ty	уре			_	-	7	-			00.00
	Office Sought: House Disburser Senate President State: TX District: 64	ment For: Primary Other (sp	General					Myra C	rowr	nover	, S	TATE H	IOUSE 6	4th TX
_	Full Name (Last, First, Middle Initial)													
В.	Fallon for Texas							Date o	_		en		Y Y Y	
	Mailing Address 3876 Shady Creek Court							м м 11	1		06		2013	
	Frisco	State TX	Zip Code 75033					Trans	sact	ion II	D :	366022	209	
	Purpose of Disbursement Patrick Fallon, STATE HOUSE 106th TX			C)11			Amoun	it of	Each	۱C	Disburse	ment thi	s Period
	Candidate Name			Cate	egoi	ry/	- L				1		F	00.00
	TX Rep. Patrick Fallon			Ty	ype		_	<u> </u>		7	-	- 7		00.00
		ment For: Primary Other (sp	General					Patrick	Fall	on, S	TA	TE HO	USE 106	th TX
~	Full Name (Last, First, Middle Initial)							Date o	f Di	shure	on	oont		
С.	Charlie Geren Campaign									_				
	Mailing Address PO Box 1440							M M	/		06		2013	= Y
	City S Fort Worth	State TX	Zip Code 76101					Trans	sact	ion II	D :	366022	211	
	Purpose of Disbursement Charles Geren, STATE HOUSE 99th TX				-									
	Candidate Name			0	11			Amoun	t of	Each	۱C	Disburse	ment thi	s Period
	TX Rep. Charles Geren			Cate	egoi ype						1		10	00.00
	•	ment For:	2014		ype		_	<u> </u>		7	-	- 7		
	State: TX District: 99	Primary Other (sp	General					Charles	s Ge	ren, S	БΤ	ATE HC	USE 991	h TX
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			category of the Summary Page			21 27	L	22 28a	_	23 28b	24 28c		25 29	26 30b
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\mathbb{N}	NAME OF COMMITTEE (In Full)													
\backslash	UnitedHealth Group Incorporated F	PAC (U	nited for Hea	lth)										
Δ	Full Name (Last, First, Middle Initial) Craig Goldman Campaign							Date of	of Di	sburse	ment			
	Craig Goldman Campaign							M N		D		YY	Y	Y
	Mailing Address PO Box 100039							11		0	6	_201		
	5	State	Zip Code					Tran	sact	ion ID	: 366022	212		
	Fort Worth Purpose of Disbursement	ТХ	76185											
	Craig Goldman, STATE HOUSE 97th TX			C	011			Amour	nt of	Each	Disburse	ement t	this P	eriod
	Candidate Name			Cate									500.	00
	TX Rep. Craig Goldman	nent For:	2014	Т	ype		_	_		7		_		
		Primary Other (spe	General					Craig (Goldr	nan, S	TATE H	OUSE 9	97th 1	ГХ
	State: TX District: 97													
R	Full Name (Last, First, Middle Initial)							Date o	of Die	shuree	mont			
υ.	Texans for Kelly Hancock							M - N		D		Y Y	Y	Y
	Mailing Address 4908 Dory Court							11			6	202		
	City S North Richland Hills	State TX	Zip Code 76180					Tran	sact	ion ID	: 36602	214		
	Purpose of Disbursement Kelly Hancock, STATE SENATE 9th TX			C)11			Amour	nt of	Each	Disburse	ement t	this P	eriod
	Candidate Name			Cate	eaoi	rv/		1						
	TX Sen. Kelly Hancock				ype			<u> </u>		7	7	_	2500	00
	X Senate	nent For: Primary Other (spe	General					Kelly F	lanco	ock, S ⁻	TATE SE	NATE	9th T	x
_	Full Name (Last, First, Middle Initial)													
C.	Linda Harper-Brown Campaign							Date o	of Di	sburse	ment			
	Mailing Address 100 Decker Court, Suite 160							M N 11	1 /	0		201	13	Y
	City S Irving	State TX	Zip Code 75062					Tran	sact	ion ID	: 36602	215		
	Purpose of Disbursement			-	_	_								
	Linda Harper-Brown, STATE HOUSE 105th TX Candidate Name			C)11			Amour	nt of	Each	Disburse	ement t	this P	eriod
	TX Rep. Linda Harper-Brown			Cate	egoi ype								1000.	00
		nent For:	2014		ype		_			7	- 7			
	Senate President	Primary Other (spe	General					Linda H	Harpe	er-Brov	wn, STA⁻	LE HOI	USE 1	05th TX
	State: TX District: 05							_	_	_			_	_
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SCHEDULE B (FEC Form 3X)			IE NUMBER: PAGE 209 OF 22							
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)							
	Detailed Summary Page	21b	22 23 24 25 26 28a 28b 28c x 29 30b							
Any information copied from such Reports and State	ments may not be cold or use									
or for commercial purposes, other than using the na	me and address of any politication	al committee to	solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorporated	PAC (United for Heal	lth)								
Full Name (Last, First, Middle Initial)			Data of Dishurasment							
A. Bennett Ratliff for State Represen	ative		Date of Disbursement							
Mailing Address 556 Arbor Brook										
City	State Zip Code		Transaction ID : 36602216							
Coppell Purpose of Disbursement	TX 75019									
William Ratliff, STATE HOUSE 115th TX		011	Amount of Each Disbursement this Period							
Candidate Name		Category/	500.00							
TX Rep. William Bennett Ratliff		Туре	500.00							
Office Sought: X House Disburse	ment For: 2014 Primary General		William Ratliff, STATE HOUSE 115th TX							
President	Other (specify)		······							
State: TX District: 15										
Full Name (Last, First, Middle Initial) B. Scott Sanford for State Represent	otivo		Date of Disbursement							
B. Scott Sanford for State Represent	alive									
Mailing Address 1507 Crown Point Rd.			11 06 2013							
City McKinney	State Zip Code TX 75070		Transaction ID : 36602217							
Purpose of Disbursement William Sanford, STATE HOUSE 70th TX		011	Amount of Each Disbursement this Period							
Candidate Name		Category/	500.00							
TX Rep. William Scott Sanford Office Sought: Y House Disburse	mont For: 0044	Туре								
	ment For: 2014 Primary General		William Sanford STATE HOUSE 70th TY							
President	Other (specify)		William Sanford, STATE HOUSE 70th TX							
State: TX District: 70										
Full Name (Last, First, Middle Initial)			Data of Diskurgement							
C. Kenneth Sheets for State Represe	entative		Date of Disbursement							
Mailing Address 4607 Surf Drive			11 06 2013							
City	State Zip Code		Transaction ID : 36602219							
Dallas Burnaga of Disburgement	TX 75214		Transaction ID . 30002213							
Purpose of Disbursement Kenneth Sheets, STATE HOUSE 107th TX		011	Amount of Each Disburgement this Devi-							
Candidate Name		Category/	Amount of Each Disbursement this Period							
TX Rep. Kenneth F. Sheets		Туре	1000.00							
Senate President	ment For: 2014 Primary General Other (specify) ▼		Kenneth Sheets, STATE HOUSE 107th TX							
State: TX District: 07										
SUBTOTAL of Disbursements This Page (optional).		•	2000.00							

	CHEDULE B (FEC Form 3X)	Use sen	arate schedule(s)	-	E NUMBER: PAGE 210 OF 222									
IT -	EMIZED DISBURSEMENTS	for each	category of the Summary Page	(check or 21) 27	b 22 23 24 25 26									
Ar or	y information copied from such Reports and State for commercial purposes, other than using the nar	ments may me and add	not be sold or us ress of any politic	ed by any pe al committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.									
$\left \right\rangle$	NAME OF COMMITTEE (In Full)													
	UnitedHealth Group Incorporated	PAC (Ur	nited for Hea	lth)										
Α.	Full Name (Last, First, Middle Initial) Chris Turner Campaign				Date of Disbursement									
					M M / D D / Y Y Y Y Y									
	Mailing Address PO Box 182093				11 06 2013									
	5	State TX	Zip Code		Transaction ID : 36602223									
	Arlington Purpose of Disbursement		76096		_									
	Christopher Turner, STATE HOUSE 101st TX			011	Amount of Each Disbursement this Period									
	Candidate Name			Category/	500.00									
	TX Rep. Christopher Turner Office Sought: X House Disburse	ment For:	2014	Туре										
	Senate President	Primary Other (spe	General		Christopher Turner, STATE HOUSE 101st TX									
_	State: TX District: 01													
В.	Full Name (Last, First, Middle Initial) Scott Turner Campaign				Date of Disbursement									
					M = M / D = D / Y = Y = Y									
	Mailing Address PO Box 771				11 06 2013									
	Frisco	State TX	Zip Code 75034		Transaction ID : 36602224									
	Purpose of Disbursement Scott Turner, STATE HOUSE 33rd TX			011	Amount of Each Disbursement this Period									
	Candidate Name			Category/	500.00									
	TX Rep. Scott Turner	ment For:	2014	Туре										
	Senate	Primary	General		Scott Turner, STATE HOUSE 33rd TX									
	State: TX District: 33	Other (spe	cify) 🔻											
_	Full Name (Last, First, Middle Initial)													
C.	Naomi Gonzalez Campaign				Date of Disbursement									
	Mailing Address 405 Buena Vista				11 06 2013									
	City El Paso	State TX	Zip Code 79905		Transaction ID : 36602225									
	Purpose of Disbursement		10000	_	_									
	Naomi Gonzalez, STATE HOUSE 76th TX Candidate Name			011	Amount of Each Disbursement this Period									
	TX Rep. Naomi Gonzalez				500.00									
	•	ment For:	2014	Туре										
	State: TX District: 70	Primary Other (spe	General cify) ▼		Naomi Gonzalez, STATE HOUSE 76th TX									
	State: TX District: 76													
s	UBTOTAL of Disbursements This Page (optional).			••••••	1500.00									
Ιт	OTAL This Period (last page this line number only	/)												

SCHEDULE B (FEC Form 3X)		Use separate schedule(s)			FOR LINE NUMBER: PAGE 211								OF 222		
IT	EMIZED DISBURSEMENTS		arate schedule(s) a category of the	(c	hec	k o]21	nly or	ne)] 22		23	Г	24	25	26	
		Detailed	Summary Page		\vdash	27		28a	-	23 28b	┝	28c	X 29	30b	
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$\left \right\rangle$	NAME OF COMMITTEE (In Full)														
	UnitedHealth Group Incorporated F	PAC (U	nited for Hea	alth)											
_	Full Name (Last, First, Middle Initial)							Data	(D:						
А.	Jodie Laubenberg Campaign							Date o	_						
	Mailing Address PO Box 1154							11 06 2013							
	5	State	Zip Code					Transaction ID : 36602226							
	Wylie Purpose of Disbursement	ТХ	75098					mane	Juot			000011			
	Jodie Laubenberg, STATE HOUSE 89th TX			0	11			Amoun	t of	Each	D	isburse	ment this	Period	
	Candidate Name			Cate	ego	ry/	1	<u> </u>			1		10	00.00	
	TX Rep. Jodie Laubenberg			T	ype			_	-	7	-	- 7	10	50.00	
	č – –	nent For: Primary Other (spe	General					Jodie L	aube	enber	g,	STATE	HOUSE	89th TX	
	Full Name (Last, First, Middle Initial)														
В.	Jeff Leach Campaign							Date o	f Di	sburs	err	nent			
	Mailing Address 800 Glen Rose Drive						-	м м 11	/		06		2013	Y	
	City	State	Zip Code												
	Allen	TX	75013					Trans	sact	ion IE) :	366022	27		
	Purpose of Disbursement Jeffrey Leach, STATE HOUSE 67th TX			C)11			Amoun	t of	Each	D	isburse	ment this	Period	
	Candidate Name			Cate	one	rv/		-			2				
	TX Rep. Jeffrey C. Leach				ype					7	4	7	10	00.00	
		nent For: Primary Other (spe	General					Jeffrey	Lea	ch, S ⁻	TA	TE HOL	JSE 67th	тх	
_	Full Name (Last, First, Middle Initial)														
C.	Van Taylor Campaign							Date o	f Dis	sburs	em	nent			
	Mailing Address PO Box 261676							11 11	/	D (D6	/	2013	Y	
	City S Plano	State TX	Zip Code 75026					Trans	sact	ion IE):	366022	28		
	Purpose of Disbursement Nicholas Taylor, STATE HOUSE 66th TX				11						_				
	Candidate Name			1.00				Amoun	t of	Each	I D	lisburse	ment this	Period	
	TX Rep. Nicholas Van Taylor			Cate T	ego ype					_			100	00.00	
		ment For: Primary Other (spe	General					Nichola	s Ta	aylor,	ST	ATE HO	DUSE 66	th TX	
Г								_	-						
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т	OTAL This Period (last page this line number only))					•	L.		7					

S	CHEDULE B (FEC Form 3X)			FC)B I					PA	AGE 212	OF 222		
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\backslash	NAME OF COMMITTEE (In Full)													
	UnitedHealth Group Incorporated F	PAC (U	nited for Hea	lth)										
Α.	Full Name (Last, First, Middle Initial) Committee to Elect Pete Lund for S	State Re	epresentative)			Date of Disbursement							
	Mailing Address 6881 Muirfield Dr.						11 08 2013							
	Shelby Twp.	State MI	Zip Code 48316				Trans	acti	on ID	: 366043	318			
	Purpose of Disbursement Peter Lund, STATE HOUSE 36th MI			0	11		Amoun	t of	Each	Disburse	ement this	Period		
	Candidate Name MI Rep. Peter J. Lund			Cate	egory /pe	y/					25	0.00		
	•	nent For: Primary Other (spe	General				Peter L	und,	STAT	e hous	E 36th MI			
в.	Full Name (Last, First, Middle Initial) Friends of Kate Segal Mailing Address 108 Pinehurst Lane						Date o	_	D		2013	Y		
									0	0	2013			
	City S Battle Creek	State MI	Zip Code 49015				Trans	sacti	on ID	: 36604:	320			
	Purpose of Disbursement Katherine Segal, STATE HOUSE 62nd MI Candidate Name			0 Cate	11 2000		Amoun	t of	Each	Disburse	ement this	_		
	MI Rep. Katherine S. Segal				/pe				7		35	60.00		
		nent For: Primary Other (spe	General				Katheri	ne S	egal, s	STATE H	IOUSE 62	nd MI		
C.	Full Name (Last, First, Middle Initial) Bolger Restore Michigan Fund						Date o	_	burse		Y Y Y			
	Mailing Address PO Box 638						11	Í	0		2013			
	Marshall	State MI	Zip Code 49068				Trans	sacti	on ID	: 36604	321			
	Purpose of Disbursement Contribution Candidate Name			0	11		Amoun	t of	Each	Disburse	ement this	Period		
				Cate Ty	egory /pe	y/					50	0.00		
	Office Sought: House Disburser Senate President State: District:	nent For: Primary Other (spe	General ecify) ▼				Contrib	ution	,	,				
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S	HEDULE B (FEC Form 3X)				OR	LINE	NUMBER: PAGE 213 OF 222								
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	y information copied from such Reports and Staten for commercial purposes, other than using the nam					/ perso		or the		pose		solicitin	g cor	ntribu	tions
$\left \right\rangle$	NAME OF COMMITTEE (In Full)														
	UnitedHealth Group Incorporated F	PAC (U	nited for Hea	lth)											
_	Full Name (Last, First, Middle Initial))ata a	f Di	huro		ant			
А.	Committee to Elect Mike Shirkey							Date o	_			eni			N/
	Mailing Address 11757 Sutfin Rd.						11 08 2013								
	City S Clarklake						Transaction ID : 36604322								
	Purpose of Disbursement Michael Shirkey, STATE HOUSE 65th MI					-					_				
	Candidate Name			0	11		A	moun	t of	Each	Di	sburse	ment	this I	Period
	MI Rep. Michael J. Shirkey			Cate T	egoi ype	ry/				- 1 				500	.00
		nent For:	2014		, 0							7			
		Primary	General				М	lichae	l Shi	rkey,	ST	ATE H	DUSE	65th	MI
	State: MI District: 65	Other (spe	ecity) 🔻												
_	Full Name (Last, First, Middle Initial)														
В.	Friends of Sean McCann						D	Date o	f Dis	sburse	eme	ent			
	Mailing Address PO Box 50811						M M / E				D 08	/ Y		13	Y
							_						20		
	Kalamazoo	State MI	Zip Code 49005-0811				_	Trans	sact	ion IE	D:3	366043	23		_
	Purpose of Disbursement Sean McCann, STATE HOUSE 60th MI			C)11		А	moun	t of	Each	Di	sburse	ment	this I	Period
	Candidate Name			Cate		rv/	ſ				2.1				_
	MI Rep. Sean McCann				ype	<i>J.</i>	J.			7	-			350	0.00
	Senate X	nent For: Primary Other (spe	General				S	ean M	1cCa	ann, S	STA [.]	TE HO	USE (60th I	MI
	Full Name (Last, First, Middle Initial)														
C.	Joe Hune for State Senate						D	Date o	f Dis	sburse	eme	ent			
	Mailing Address 4849 Hogback Rd.							M M	/	D (D 08	/ Y	20	ү 13	Y
	City	State	Zip Code					Tran	aat	ion IF		366043	24		
	Fowlerville Purpose of Disbursement	MI	48836					iidii	Jaul			500043	27		
	Joe Hune, STATE SENATE 22nd MI			0	11		А	moun	t of	Each	Di	sburse	nent	this I	Period
	Candidate Name			Cate	egoi	ry/					21			350	
	MI Sen. Joe Hune Office Sought: House Disburser	nent For:		Ty	ype					7				350	.00
	Senate President	Primary Other (spe	General				Jo	oe Hu	ne, S	STATI	ΕS	ENATE	22no	d MI	
_	State: MI District:														
s	UBTOTAL of Disbursements This Page (optional)						ļ			9		,		1200	.00
т	OTAL This Period (last page this line number only)						1			,					

_	CHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 214 OF 222
	EMIZED DISBURSEMENTS	for each	parate schedule(s) category of the Summary Page	(check only 21b 27	r one) 22 23 24 25 26 28a 28b 28c X 29 30b
	y information copied from such Reports and State for commercial purposes, other than using the national states of the states of				
\backslash	NAME OF COMMITTEE (In Full)				
	UnitedHealth Group Incorporated	PAC (U	nited for Heal	th)	
A.	Full Name (Last, First, Middle Initial) Committee to Elect Matt Lori State	Ronrog	sontativo		Date of Disbursement
		Repies	Sentative		M M / D D / Y Y Y Y
	Mailing Address 14941 Roberts Shores Dr.				11 08 2013
	City Constantine	State MI	Zip Code 49042		Transaction ID : 36604325
	Purpose of Disbursement Matthew Lori, STATE HOUSE 59th MI				
	Candidate Name			011	Amount of Each Disbursement this Period
	MI Rep. Matthew J. Lori			Category/ Type	500.00
	Office Sought: House Disburse Senate President State: MI District: 59	ment For: Primary Other (spe	General		Matthew Lori, STATE HOUSE 59th MI
_	Full Name (Last, First, Middle Initial)				
В.	Committee to Elect Tim Greimel				Date of Disbursement
	Mailing Address PO Box 14105				11 08 2013
	City Lansing	State MI	Zip Code 48901		Transaction ID : 36604326
	Purpose of Disbursement Tim Greimel, STATE HOUSE 29th MI			011	Amount of Each Disbursement this Period
	Candidate Name			Category/	500.00
	MI Rep. Tim A. Greimel Office Sought: X House Disburse	ment For:	2014	Туре	
		Primary	General		Tim Greimel, STATE HOUSE 29th MI
	State: MI District: 29	Other (spe	ecify)		
_	Full Name (Last, First, Middle Initial)	Other (spe	ecify) ▼		
<u></u> с.		Other (spe	ecify) 🔻		Date of Disbursement
C.	Full Name (Last, First, Middle Initial)	Other (spe	ecify)		Date of Disbursement
C.	Full Name (Last, First, Middle Initial) Committee to Elect Winnie Brinks	Other (specific data and specific data and speci	Zip Code 49506		M M / D D / Y Y Y
C.	Full Name (Last, First, Middle Initial) Committee to Elect Winnie Brinks Mailing Address 2060 Osceola Dr. SE City	State	Zip Code	011	M / D D / Y
C.	Full Name (Last, First, Middle Initial) Committee to Elect Winnie Brinks Mailing Address 2060 Osceola Dr. SE City Grand Rapids Purpose of Disbursement	State	Zip Code	011 Category/	M M / D D / Y Y Y Y 11 08 / 2013 Transaction ID : 36604327 Amount of Each Disbursement this Period
C.	Full Name (Last, First, Middle Initial) Committee to Elect Winnie Brinks Mailing Address 2060 Osceola Dr. SE City Grand Rapids Purpose of Disbursement Winnie Brinks, STATE HOUSE 76th MI Candidate Name MI Rep. Winnie T. Brinks	State MI	Zip Code 49506	011 Category/ Type	11 / 08 / 2013 Transaction ID : 36604327
с.	Full Name (Last, First, Middle Initial) Committee to Elect Winnie Brinks Mailing Address 2060 Osceola Dr. SE City Grand Rapids Purpose of Disbursement Winnie Brinks, STATE HOUSE 76th MI Candidate Name MI Rep. Winnie T. Brinks	State	Zip Code 49506 2014 General	Category/	M M / D D / Y Y Y Y 11 08 / 2013 Transaction ID : 36604327 Amount of Each Disbursement this Period
с.	Full Name (Last, First, Middle Initial) Committee to Elect Winnie Brinks Mailing Address 2060 Osceola Dr. SE City Grand Rapids Purpose of Disbursement Winnie Brinks, STATE HOUSE 76th MI Candidate Name MI Rep. Winnie T. Brinks Office Sought: House President State: District: 76	State MI ment For: Primary Other (spe	Zip Code 49506 2014 General ecify) ▼	Category/ Type	Image: Market
C.	Full Name (Last, First, Middle Initial) Committee to Elect Winnie Brinks Mailing Address 2060 Osceola Dr. SE City Grand Rapids Purpose of Disbursement Winnie Brinks, STATE HOUSE 76th MI Candidate Name MI Rep. Winnie T. Brinks Office Sought: President	State MI ment For: Primary Other (spe	Zip Code 49506 2014 General ecify) ▼	Category/ Type	Image: Market

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 215 OF 222						
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	r one)						
	Detailed Summary Page	21b	22 23 24 25 26 28a 28b 28c X 29 30b						
Any information copied from such Reports and State or for commercial purposes, other than using the na		sed by any pers	on for the purpose of soliciting contributions						
UnitedHealth Group Incorporated	PAC (United for Hea	alth)							
Full Name (Last, First, Middle Initial)									
A. Committee to Elect Rob VerHeule	en		Date of Disbursement						
Mailing Address 4167 Imperial Dr.			Transaction ID : 36604328						
City	State Zip Code								
Walker Purpose of Disbursement	MI 49534								
Robert VerHeulen, STATE HOUSE 74th MI		011	Amount of Each Disbursement this Period						
Candidate Name		Category/	250.00						
MI Rep. Robert J. VerHeulen Office Sought: V House Disburs	ement For: 2014	Туре	230.00						
Senate President	Primary General Other (specify) ▼		Robert VerHeulen, STATE HOUSE 74th MI						
State: MI District: 74									
Full Name (Last, First, Middle Initial) B. Rebekah Warren Envision Michig	an PAC		Date of Disbursement						
Mailing Address 234 8th Street			11 08 2013						
City Ann Arbor	StateZip CodeMI48103		Transaction ID : 36604329						
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period						
Candidate Name		Category/ Type	500.00						
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify) ▼		Contribution						
Full Name (Last, First, Middle Initial)									
C. Bruce Caswell for Senate			Date of Disbursement						
Mailing Address 8940 E Bacon Road			11 / D D / Y Y Y Y 11 08 2013						
City Hillsdale	StateZip CodeMI49242		Transaction ID : 36606607						
Purpose of Disbursement Bruce Caswell, STATE SENATE 16th MI Candidate Name		011	Amount of Each Disbursement this Period						
MI Sen. Bruce E. Caswell		Category/ Type	500.00						
	ement For: 2014 Primary General Other (specify) ▼	.,,,,,	Bruce Caswell, STATE SENATE 16th MI						
SUBTOTAL of Disbursements This Page (optional)		>	1250.00						
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SCHEDULE B (FEC Form 3X)		FOR LINE						
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	r one) 22 23 24 25 26 28a 28b 28c X 29 30b					
Any information copied from such Reports and State or for commercial purposes, other than using the nat								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (United for Hea	alth)						
Full Name (Last, First, Middle Initial) A. Posthumus Lyons Leadership Fun	d		Date of Disbursement					
Mailing Address 7815 Alden Nash SE			11 08 2013					
Alto	State Zip Code MI 49302		Transaction ID : 36606608					
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period					
Candidate Name		Category/ Type	500.00					
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) v		Contribution					
Full Name (Last, First, Middle Initial) B. Michigan Values Leadership Fund Mailing Address 14840 Robinwood Dr.			Date of Disbursement					
City Lansing	State Zip Code MI 48906		Transaction ID : 36606987					
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period					
Candidate Name		Category/ Type	500.00					
Office Sought: House Disburse Senate President Image: Construct to the senate of the senat of the sen	ment For: Primary General Other (specify) ▼		Contribution					
Full Name (Last, First, Middle Initial) C. John Moolenaar for State Senate			Date of Disbursement					
Mailing Address 5915 Eastman Avenue, Suite 100			11 08 Y Y Y Y Y 2013					
Midland	State Zip Code MI 48640		Transaction ID : 36606988					
Purpose of Disbursement John Moolenaar, STATE SENATE 36th MI Candidate Name		011	Amount of Each Disbursement this Period					
MI Sen. John R. Moolenaar	ment For: 2014 Primary General Other (specify)	Category/ Type	500.00 John Moolenaar, STATE SENATE 36th MI					
SUBTOTAL of Disbursements This Page (optional).			1500.00					
TOTAL This Period (last page this line number only								

S	CHEDULE B (FEC Form 3X)			F	OR	LINE	NUMBER: PAGE 217 OF 222											
IT	EMIZED DISBURSEMENTS	Use separation for each				ly one)												
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	y information copied from such Reports and Stater for commercial purposes, other than using the nam												ng contr					
\setminus	NAME OF COMMITTEE (In Full)																	
	UnitedHealth Group Incorporated F	PAC (Ur	nited for Hea	alth)														
Α.	Full Name (Last, First, Middle Initial) Pscholka Results PAC			Date o	of Di	sburse	eme	ent										
	Mailing Address 5810 Longhorn Trail						11 08 2013											
	City Stevensville	State MI	Zip Code 49127				Transaction ID : 36606989 Amount of Each Disbursement this Period 500.00											
	Purpose of Disbursement Contribution			C)11													
	Candidate Name			Cat	ego ype													
	Office Sought: House Disburser Senate President District:	ment For: Primary Other (spe	General cify) ▼		<u>, , , , , , , , , , , , , , , , , , , </u>		-	Contrib	outio	า		,						
в.	Full Name (Last, First, Middle Initial) Rick Jones for State Senate							Date o		D	D	ent	Y Y					
	Mailing Address PO Box 115						11 08 2013											
	Grand Ledge	State MI	Zip Code 48837				Transaction ID : 36606990											
	Purpose of Disbursement Rick Jones, STATE SENATE 24th MI Candidate Name			()11			Amount of Each Disbursement this Period										
	MI Sen. Rick A. Jones			250.00														
		ment For: Primary Other (spe	General				Rick Jones, STATE SENATE 24th MI											
с.	Full Name (Last, First, Middle Initial)						Date of Disbursement											
	Mailing Address 8209 Vista Royale Ln						-	M N 11	/	0	D 08	/	2013					
	City Rockford	Zip Code 49341					Tran	sact	ion ID)::	366070	004						
	Purpose of Disbursement Contribution			Amount of Each Disbursement this Period														
	Candidate Name		Cat T	ego ype		350.00												
	Office Sought: House Disburser Senate President State: District:	ment For: Primary Other (spe	General ccify) ▼				Contribution											
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S	CHEDULE B (FEC Form 3X)			F			NUMBER: PAGE 218 OF 222										
IT	EMIZED DISBURSEMENTS		ate schedule(s) ategory of the			c only	one)										
			Summary Page			21b 27	22 28a		23 28b	24 28c		25 29	26 30b				
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	for commercial purposes, other than using the nan																
	NAME OF COMMITTEE (In Full)																
	UnitedHealth Group Incorporated F	PAC (Uni	ted for Heal	lth)													
_	Full Name (Last, First, Middle Initial)		_														
Α.	Committee to Elect Tom Cochran t	h District				Date of Disbursement											
	Mailing Address 418 Coppersmith Drive						11 08 2013										
	City	State	Zip Code				Trono		an ID	. 266070	05						
	Mason	MI	48854				Trans	acti	on ID	: 366070	05						
	Purpose of Disbursement William Cochran, STATE HOUSE 67th MI			0	11	11	Amount	t of	Fach	Disburse	ment t	his F	Period				
	Candidate Name			_			, anoun		Luon	Disbuise			enou				
	MI Rep. William T. Cochran			Cate Ty	egor ype	y/			,			250	.00				
	Office Sought: House Disburser	ment For: 20	014				William Cochran, STATE HOUSE 67th MI										
	Senate X	Primary	General														
	State: MI District: 67	Other (speci	ity) 🔻														
	Full Name (Last, First, Middle Initial)																
В.	Committee to Elect Gretchen White	mer					Date of	f Dis	burse	ment							
							M M / D D / Y Y Y Y										
	Mailing Address PO Box 11063						11		0	8	201	13					
	5	State	Zip Code				Trans	sacti	on ID	: 366070	15						
	Lansing Purpose of Disbursement	MI	48901				-										
	Gretchen Whitmer, STATE SENATE 23rd MI			0)11		Amount of Each Disbursement this Period										
	Candidate Name			Cate	eaor	v/											
	MI Sen. Gretchen E. Whitmer				ype	, 	250.00										
	5		014				Gretchen Whitmer, STATE SENATE 23rd MI										
	X Senate X President	Primary Other (speci	fv)														
	State: MI District:		·y/ •														
_	Full Name (Last, First, Middle Initial)																
C.	Mark C Jansen for State Senate						Date of	f Dis	burse	ment							
	Mailing Address PO Box 13034						M M	/			201		Y				
	Maining Address PO Box 13034				11 08 2013												
	City	State	Zip Code				Trans	acti	on ID	: 366070	16						
	Lansing Purpose of Disbursement	MI	48901														
	Mark Jansen, STATE SENATE 28th MI			0	11		Amount	t of	Each	Disburse	mont t	hic F	Period				
	Candidate Name		Cate	aor	v/	Amoun		Laon	Disbuisci								
	MI Sen. Mark C. Jansen			ype	j .	500.00											
	Office Sought: House Disbursement For: 2014 X Senate Y Primary																
	X Senate President	General				Mark Jansen, STATE SENATE 28th MI											
	State: MI District:	Other (speci	(iy) V														
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$\left \right\rangle$	NAME OF COMMITTEE (In Full)																	
	UnitedHealth Group Incorporated F	PAC (Ur	nited for Hea	lth)														
Α.	Full Name (Last, First, Middle Initial) Committee to Elect Virgil Smith Sta	Date of Disbursement																
	Mailing Address PO Box 21032						11 08 2013											
	Detroit	State MI	Zip Code 48221				Transaction ID : 36607017											
	Purpose of Disbursement Virgil Smith, STATE SENATE 4th MI			04	11		Amount of Each Disbursement this Period											
	Candidate Name MI Sen. Virgil K. Smith Jr.			Cate	gory pe	/	250.00											
		nent For: Primary Other (spe	General		pe		Virgil Smith, STATE SENATE 4th MI											
в.	Full Name (Last, First, Middle Initial) Harwell PAC Mailing Address 6213 Charlotte Pike, Suite 112				Date of Disbursement													
	City S Nashville	State TN	Zip Code 37209				Transaction ID : 36613212											
	Purpose of Disbursement Contribution Candidate Name			Cate	11 gory	1	Amount of Each Disbursement this Period 2000.00											
	Office Sought: House Disbursen Senate President State: District:	nent For: Primary Other (spe	General cify) ▼	i y	he		Contribution											
с.	Full Name (Last, First, Middle Initial)				Date of Disbursement													
	Mailing Address 611 Commerce St., Suite 2927						11		D 1:		2013	Ŷ						
	Nashville	State TN	Zip Code 37203				Transaction ID : 36613213											
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	NAME OF COMMITTEE (In Full)																
\vee	UnitedHealth Group Incorporated F	PAC (Ur	nited for Hea	alth)													
	Full Name (Last, First, Middle Initial) House Republican Caucus		Date	of Di	sburse	ement											
-	Mailing Address PO Box 198814						11 / D D / Y Y Y Y 11 13 2013										
	City Nashville	State TN	Zip Code 37219				Transaction ID : 36613214										
Ì	Purpose of Disbursement Contribution			0	11	٦	Amount of Each Disbursement this Period										
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	Office Sought: House Disburser Senate President District:	Sought: House Disbursement For: Senate Primary General															
В.	Full Name (Last, First, Middle Initial) House Democratic Caucus						M	M /	sburse	D / Y	Y Y	Y					
	Mailing Address PO Box 198082	7:0.1				11 13 2013											
	Nashville	State TN	Zip Code 37219				Transaction ID : 36613215										
	Purpose of Disbursement Contribution			C)11		Amount of Each Disbursement this Period										
	Candidate Name			Cate T	egory ype	y/	500.00 Contribution										
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	Full Name (Last, First, Middle Initial) Hickenlooper for Colorado							_	sburse								
-	Mailing Address PO Box 1317						M 11	M /	2		2013	Y					
	City Source State Stat	State CO	Zip Code 80201				Trar	sact	ion ID	: 366521	66						
Ì	Purpose of Disbursement John Hickenlooper, GOVERNOR CO		٦	Amount of Each Disbursement this Period													
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	Office Sought: House Disburser Senate President State: District:	ment For: ; Primary Other (spe	General				John H	licke	nloope	er, GOVEF	RNOR CO)					
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ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 24 25 26 28a 28b 28c X 29 30b											
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NAME OF COMMITTEE (In Full)														
UnitedHealth Group Incorporated	PAC (United for Heal	lth)												
Full Name (Last, First, Middle Initial)		Date of Disbursement												
- Hickenlooper for Colorado	Hickenlooper for Colorado													
Mailing Address PO Box 1317			11 20 2013											
City Denver	State Zip Code CO 80201		Transaction ID : 36652168											
Purpose of Disbursement John Hickenlooper, GOVERNOR CO														
		011	Amount of Each Disbursement this Period											
John Hickenlooper		Category/ Type	550.00											
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Senate President	Primary X General Other (specify)		John Hickenlooper, GOVERNOR CO											
State: District:														
Full Name (Last, First, Middle Initial) B. Federation of Iowa Insurers PAC			Date of Disbursement											
Mailing Address PO Box 1756			11 / D D / Y Y Y Y Y 20 2013											
Des Moines	State Zip Code IA 50306-1756		Transaction ID : 36652172											
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period 2250.00											
Candidate Name		Category/ Type												
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼		Contribution											
Full Name (Last, First, Middle Initial)														
C. Governor Branstad Committee			Date of Disbursement											
Mailing Address 1601 22nd St., Suite 400			11 / 20 / Y Y Y Y 2013											
City West Des Moines	State Zip Code IA 50266		Transaction ID : 36652173											
Purpose of Disbursement Terry Branstad, GOVERNOR IA		011	Amount of Each Disbursement this Period											
Candidate Name		Category/	Amount of Each Disbursement this Period											
Gov. Terry E. Branstad	Туре	2000.00												
Office Sought: House Disburse Senate President State: District:		Terry Branstad, GOVERNOR IA												
SUBTOTAL of Disbursements This Page (optional).			4800.00											
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$\left \right\rangle$	NAME OF COMMITTEE (In Full)	// .																
	UnitedHealth Group Incorporated F	PAC (Ur	nited for Hea	lth)														
	Full Name (Last, First, Middle Initial)			Date o	of Di	ebure	om	pont										
Π.	Hollo for House							Date of Disbursement										
	Mailing Address PO Box 88						11 20 2013											
	City Taylorsville	State NC	Zip Code 28681					Transaction ID : 36652174										
	Purpose of Disbursement	NO	20001	-	-		-											
	Mark Hollo, STATE HOUSE 73rd NC			0	11		Amount of Each Disbursement this Period 1000.00											
	Candidate Name NC Rep. Mark Hollo			Cate	egoi /pe													
	•	ment For:	2014	• • •	700													
	Senate X	Primary	General					Mark Hollo, STATE HOUSE 73rd NC										
	State: NC District: 73	Other (spe	city) 🔻															
	Full Name (Last, First, Middle Initial)																	
В.	RAAMPAC							Date o	_									
	Mailing Address PO Box 158213							11 20 2013										
	Nashville	State TN	Zip Code 37215					Transaction ID : 36652175										
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