Image# 201704209052362702				PAGE 1 / 134
	EPORT OF R ND DISBURS Other Than An Autho	SEMENTS		Office Use Only
1. NAME OF TYP COMMITTEE (in full)	PE OR PRINT ▼	Example: If typing, typ over the lines.	•	
UnitedHealth Group Incor	porated PAC (Unite	dHealth Group PA	AC)	
ADDRESS (number and street)	01 Pennsylvania Ave, NW			
	uite 200			
Alexan and a second	Vashington			20004
2. FEC IDENTIFICATION NUMB	ER V CITY		STATE 🔺	ZIP CODE
C C00274431	3. IS T REF	HIS NEW NEW (N)	OR AME	ENDED
(Choose One) (a) Quarterly Reports: April 15	(b) Monthly Report Due On: X Apr 20	(M3) Jun 20	(M6) Sep 2	0 (M8) Nov 20 (M11) (Non-Election Year Only) 0 (M9) Dec 20 (M12) (Non-Election Year Only) 0 (M10) Jan 31 (YE)
Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31	(c) 12-Day PRE-Election Report for the: Election of	Primary (12P) Convention (12C)	General (1 Special (12	
Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30	
Termination Report (TER)	Election		D / Y Y Y Y Y	in the State of
5. Covering Period	/ D D / Y Y Y Y 01 2017	through	M M / D D / 03 31	2017
I certify that I have examined this R S Type or Print Name of Treasurer	eport and to the best of my Sherwood, Susan, , ,	y knowledge and belief	it is true, correct and	complete.
Signature of Treasurer	Susan, , ,	[Electronically Filed]	Date 04	/ D D / Y Y Y Y Y 20 2017
NOTE: Submission of false, erroneous	, or incomplete information n	nay subject the person sig	gning this Report to the	penalties of 52 U.S.C. § 3010
Office Use Only				FEC FORM 3X Rev. 05/2016

04/20/2017 16 : 05

x

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name

FEC Form 3X (Rev. 05/2016)

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

R	Report Covering the Period: From:		: 03 / D D / Y Y Y Y 31 2017
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2017		242591.24
	(b) Cash on Hand at Beginning of Reporting Period	278604.87	
	(c) Total Receipts (from Line 19)	139016.99	335138.95
	(d) Subtotal (add Lines 6(b) and6(c) for Column A and Lines6(a) and 6(c) for Column B)	417621.86	577730.19
7.	Total Disbursements (from Line 31)	55000.00	215108.33
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	362621.86	362621.86
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

UnitedHealth Group Incorporated PAC (UnitedHealth Group PAC)

Report Covering the Period: From:	/ 01 / Y Y Y Y 01 2017 To:	03 / D D / Y Y Y Y 03 31 2017
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:(a) Individuals/Persons Other	1	
Than Political Committees (i) Itemized (use Schedule A)	120595.71	249636.38
(ii) Unitemized	18421.28	80502.57
(iii) TOTAL (add Lines 11(a)(i) and (ii)►	139016.99	330138.95
(b) Political Party Committees	0.00	0.00
 (c) Other Political Committees (such as PACs)	0.00	0.00
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	139016.99	330138.95
Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
 Loan Repayments Received Offsets To Operating Expenditures 	0.00	0.00
 (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made 	0.00	0.00
to Federal Candidates and Other Political Committees	0.00	5000.00
(Dividends, Interest, etc.)	0.00	0.00
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	139016.99	335138.95
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	139016.99	335138.95

Page 3

I

DETAILED SUMMARY PAGE

of Disbursements

	FEC Form 3X (Rev. 05/2016)	of Disbursements	Page 4
	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	perating Expenditures:) Allocated Federal/Non-Federal Activity (from Schedule H4)		
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(C)) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
	ansfers to Affiliated/Other Party	0.00	0.00
Co	ontributions to ederal Candidates/Committees ad Other Political Committees		
	nd Other Political Committees	57000.00	224000.00
(u Co	se Schedule E)	0.00	0.00
(5 (u	2 U.S.C. § 30116(d)) se Schedule F)	0.00	0.00
Lc	oan Repayments Made	0.00	0.00
	pans Made	0.00	0.00
Re (a	efunds of Contributions To:) Individuals/Persons Other Than Political Committees	0.00	208.33
4			
(b (c)	, <u>,</u> , , , , , , , , , , , , , , , , ,	0.00	0.00
(d	(such as PACs)) Total Contribution Refunds	0.00	0.00
(u	(add Lines 28(a), (b), and (c))	0.00	208.33
	ther Disbursements (Including		
	on-Federal Donations)	-2000.00	-9100.00
Fe (a	ederal Election Activity (52 U.S.C. § 30101(2) Allocated Federal Election Activity (from Schedule H6)	0))	
	(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
	tal Disbursements (add Lines 21(c), 22, 3, 24, 25, 26, 27, 28(d), 29 and 30(c))	55000.00	215108.33
	tal Federal Disbursements		
	ubtract Line 21(a)(ii) and Line 30(a)(ii) om Line 31)	55000.00	215108.33
	•		210106.33

DETAILED SUMMARY PAGE

of Disbursements

COLUMN A

Total This Period

FEC Form 3X (Rev. 05/2016)

III. Net Contributions/ Operating Expenditures

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

		-7			-7	139016.99
		-			-	0.00
	÷		-	-		139016.99
÷	÷	-	÷	÷	-	
	-	7	-	-	-7-	0.00
1.1						0.00
- Longer	1	-7	1		- 7	
F	÷	-7-	÷	÷	-7	0.00

330138.95 208.33 329930.62 0.00 0.00 0.00

COLUMN B

Calendar Year-to-Date

Page **5**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

PAGE 6 OF

		Detailed Summary Page	×	11a 13		11b		11c	12	17	
Any information copied from such Reports or for commercial purposes, other than us				or the		rpose		oliciting	contribu	tions	
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorp	orated PAC (I	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Mid GILL, PETER M, , ,	[Date of	Re	eceip	ot						
Mailing Address 8673 SHERWOOD BL	03 / D D / Y Y Y Y 10 2017										
City EDEN PRAIRIE	State MN		Transaction ID : 40639481 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C			_		- J -		-	4999.	90	
Name of Employer (for Individual) United HealthCare Services Inc							m				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4999.90	1								
Full Name of Individual (Last, First, Mid HOSTETLER, BARBARA, , , Mailing Address 1107 4TH STREET	Idle Initial) or Full O	rganization Name		Date of	f Re		ot		YY	V	
City	State	Zip Code	_	03	acti		31	071889	2017	T	
STEILACOOM	WA	98388	A						is Period		
FEC ID number of contributing federal political committee.	C					Ţ		-7-	365.	00	
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Prgm Cnslt Sr		Me	emo	o Itei	m				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 365.00]								
Full Name of Individual (Last, First, Mic ECKERT, CHRISTINE A, , ,	Idle Initial) or Full O	rganization Name		Date of	Re	eceip	ot				
Mailing Address 33 BRIGHTVIEW DRIV	1			03	L.		31		2017 ^Y	Y	
City WEST HARTFORD	State CT	Zip Code 06117-2002						071890 ceipt th	0 is Period		
FEC ID number of contributing federal political committee.	С					y		y	200.	00	
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) T Architecture		Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 246.14	1								
SUBTOTAL of Receipts This Page (option	nal)		•			9		9	5564.	90	
TOTAL This Period (last page this line n	umber only)							-,-			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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				etailed Summary Page	×	11a 13		11		11c 15		12 16	17		
	y information copied from such Reports and Star for commercial purposes, other than using the n					or the		pos	se of s	oliciting		ntributi	ons		
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (L	Unit	edHealth Group PA	C)										
A.	Full Name of Individual (Last, First, Middle Initia OLIN, STEPHEN, , ,	l) or Full Oi)rgani	ization Name	Date of Receipt										
	Mailing Address 5432 HALIFAX LANE				03	/	ľ	13	/ Y	Y 2() 017	Y			
	City EDINA	State MN		Zip Code 55424-1437		Transaction ID : 40725752 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.				-		49	Ę	5000.0	0					
	Name of Employer (for Individual) United HealthCare Services Inc		M	emc	o Ite	əm									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year	-to-Date ▼ 5000.00											
в.	Full Name of Individual (Last, First, Middle Initia CARNISH, ERIN, , ,	l) or Full Oi	Organi	ization Name		Date of	Re	ecei	pt						
	Mailing Address 7350 BUSH LAKE DRIVE					^M 03	/		07	/ Y	20)17	Y		
	City BLOOMINGTON	State Zip Code Transact MN 55438-1682 Amount of the state										eriod			
	FEC ID number of contributing federal political committee.	С				-		-9-	Ę	5000.0	0				
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP (M	emc	o Ite	əm								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year	-to-Date ▼ 5000.00											
C.	Full Name of Individual (Last, First, Middle Initia WILSON, JOHN, , ,	l) or Full Oi	Organi	ization Name		Date of	Re	ecei	pt						
	Mailing Address 9450 E BECKER LANE APT 1044					03	Ŀ.	L	15	/ Y	20)17	Y		
	City SCOTTSDALE	State AZ		Zip Code 85260-6718	/					072578 ceipt th		eriod			
	FEC ID number of contributing federal political committee.	С						9		y	Ę	5000.0	0		
	Name of Employer (for Individual) Optum Services, Inc Receipt For:	Optu	um Ex			M	emo	o Ite	em						
	Primary General Other (specify)	Aggregate	Year	-to-Date ▼ 5000.00											
s	UBTOTAL of Receipts This Page (optional)							,		,	15	5000.0	0		
т	OTAL This Period (last page this line number on	ıly)		••••••											

FOR LINE NUMBER:

PAGE

8 OF

	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
			person for the purpose of soliciting contributions to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)		laite dl le alth Oraun D								
UnitedHealth Group Incorport	brated PAC (I	United Health Group P	AC)							
Full Name of Individual (Last, First, Mide HEROMAN, WILLIAM, , ,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 13645 GLENCLIFF WA	Y		03 / D D / Y Y Y Y 2017							
City SAN DIEGO	State CA	Zip Code 92130-1324	Transaction ID : 40725784 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		5000.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Dir/CMO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00	1							
			1							
Full Name of Individual (Last, First, Mide B. WICHMANN, DAVID S, , ,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 7000 ANTRIM ROAD			03 / 0 0 / Y Y Y Y 03 31 2017							
City EDINA	State MN	Zip Code 55439-1708	Transaction ID : PR1159814745395 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) s UHG	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Mide C. MUNSELL, WILLIAM A, , ,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 2119 WINDSONG CIRC			03 / D D / Y Y Y Y 2017							
City WAYZATA	State MN	Zip Code 55391-2259	Transaction ID : PR1159816645395 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		200.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) dvsr to Office of CEO	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 600.00	P/R Deduction (\$100.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (option	' al)		5584.60							
TOTAL This Period (last page this line nu	mber only)									

Use separate schedule(s)

FOR LINE NUMBER:

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			Use separate schedule(s)	(ch	(check only one)							
ITEMIZED RE			for each category of the Detailed Summary Page	×	11a		11b	11c	12			
			y not be sold or used by any p ddress of any political committee									
NAME OF COM	. ,	ited PAC (L	JnitedHealth Group PA	AC)								
Full Name of Ind PENSHORN,	lividual (Last, First, Middle JOHN S, , ,	Initial) or Full O	rganization Name		Date of	Re	ceipt					
Mailing Address	120 BLACK OAKS LANE				03	/	D 31) / Y	ү ү 2017	Y		
City WAYZATA		Zip Code 55391-1363						81694539 nis Period				
	EC ID number of contributing deral political committee.						,		384.	60		
Name of Employ United HealthCar	rer (for Individual) re Services Inc	upation (for Individual) 9 UnitedHlth Group		Me	emo	Item						
Receipt For: Primary Other (spec	General cify) ▼	Aggregate	Year-to-Date ▼ 1153.80] F	P/R Dedu	uctic	on (\$192	2.30 Bi-V	Veekly)			
Full Name of Ind B. KALLMEYER	lividual (Last, First, Middle R, PAUL D, , ,	Initial) or Full O	rganization Name		Date of	Re	ceipt					
	468 HERALD DR				03	/	D D D 31	/ Y	2017	Ŷ		
City AMBLER		State PA	Zip Code 19002-1530	-					3 1744539 nis Period	-		
FEC ID number federal political c	0	С	С				100.00					
Name of Employ United HealthCar	ver (for Individual) e Services Inc		upation (for Individual) uty Gen Counsel Mgr		Me	emo	ltem					
Receipt For: Primary Other (spec	General cify) ▼	Aggregate	Year-to-Date ▼ 300.00	P	/R Dedu	uctio	ın (\$50.	00 Bi-We	eekly)			
Full Name of Ind	lividual (Last, First, Middle	Initial) or Full O	rganization Name		Date of	Re	ceipt					
	6458 ORCHID LANE				03	/	D 10 31	JL	2017			
City DALLAS		State TX	Zip Code 75230-4121				-		81914539 nis Period	-		
FEC ID number federal political c	0	С					9		192.	30		
United HealthCar	er (for Individual) re Services Inc		upation (for Individual) Care Initiv		Me	∋mo	Item					
Receipt For: Primary Other (spec	General cify)	Aggregate	Year-to-Date ▼ 576.90]	P/R Dedu	uctio	on (\$96	.15 Bi-W	eekly)			
SUBTOTAL of Rec	ceipts This Page (optional).		•	•			,	. ,	676.	90		
TOTAL This Period	d (last page this line numb	er only)		•			,					

SCHEDULE A (FEC Form 3X) DEOEIDTO

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 1	H	111		11c	12			
Any information copied from such Reports and			erson for			e of so					
or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	he name and a	doress of any political committee	e to solic	t cont	ributic	ons from	n such	committ	ee.		
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle I MIGLIORI, RICHARD J, , ,	nitial) or Full C	rganization Name	Da	te of I	Receij	pt					
Mailing Address PO BOX 72			IV	03 ^M	/	31	/ Y	ү ү 2017	Y		
City WAYZATA								2744539 s Period	5		
FEC ID number of contributing federal political committee.	ů l				-1		-37	384.0	60		
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Consumr Hlth Med Care		Mer	no Ite	em					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R	Dedu	ction ((\$192.30	0 Bi-W	eekly)			
Full Name of Individual (Last, First, Middle I B. RIVET, JEANNINE M, , ,	nitial) or Full C	rganization Name	Da	te of I	Receij	pt					
Mailing Address 4305 TRILLIUM WAY			M	03 ^M	/	31	/ Y	2017	Y		
City MINNETRISTA	State MN	Zip Code 55364-7708						3004539	5		
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P UnitedHIth Grp		Mer	no Ite	em					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R	Deduc	ction (\$192.30) Bi-We	eekly)			
Full Name of Individual (Last, First, Middle I C. MATTEO, MICHAEL C, , ,	nitial) or Full C	rganization Name	Da	te of I	Receij	pt					
Mailing Address 25 JEREMIAHS WAY			IV	03 ^M	/	31	/ Y	y y 2017	Y		
City SOUTH GLASTONBURY	State CT	Zip Code 06073-3621						3344539 s Period	5		
FEC ID number of contributing federal political committee.	С				y		y	230.	76		
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) of Growth Off		Mei	no Ite	em					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 692.28	P/R	Dedu	ction ((\$115.3	8 Bi-W	eekly)			
SUBTOTAL of Receipts This Page (optional)					,		9	999.9	96		
TOTAL This Period (last page this line numbe	r only)				-		-	4			

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 11 OF

			13 14 15 16 17										
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	JnitedHealth Group PA	.C)										
Full Name of Individual (Last, First, Middle Init A. CARR, ANTHONY R, , ,	Date of Receipt												
Mailing Address 5201 THOROUGHBRED LN			03 / D D / Y Y Y Y 2017										
City SOUTHWEST RANCHES	State FL	Zip Code 33330-2406	Transaction ID : PR1554323445395										
	1.	33330-2400	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		238.09										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP PEOs Trusts	Memo Item										
Receipt For:		Year-to-Date ▼											
Primary General Other (specify) ▼	P/R Deduction (\$238.09 Bi-Weekly)												
Full Name of Individual (Last, First, Middle Init B. MILLER, KATHERINE V, , ,	tial) or Full C	rganization Name	Date of Receipt										
Mailing Address 2321 HARBOR LAKE DRIVE	03 / D D / Y Y Y Y 03 31 2017												
City	State	Zip Code	Transaction ID : PR1554324345395										
ORANGE PARK	FL	32003-7799	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		76.92										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In Pres Ntwk Mgmt	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Middle Init c. ANDERSON, CRAIG C, , ,	tial) or Full C	rganization Name	Date of Receipt										
Mailing Address 47 AMATO CIRCLE			03 31 2017										
City	State	Zip Code	Transaction ID : PR1575957345395										
WETHERSFIELD	СТ	06109-3971	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		267.39										
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item										
United HealthCare Services Inc	Reg	n Pres Ntwk Mgmt											
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 421.23	P/R Deduction (\$228.93 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)			582.40										
TOTAL This Period (last page this line number of		F											

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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	EWIZED RECEIPTS			or each category of the Detailed Summary Page	×	11a			111	b		11c	<u> </u>	12		
						13		1	14			15		16	17	
	y information copied from such Reports and Statems for commercial purposes, other than using the name															
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated P.	AC (l	Uni	tedHealth Group PA	C)											
Α.	Full Name of Individual (Last, First, Middle Initial) or ERICKSON, KAREN L, , ,	r Full O	rgar	nization Name		Date	of R	lec	ceij	pt						
	Mailing Address 15348 RED OAKS ROAD SE					03 / D D / Y Y Y Y 2017									Y	
		tate IN		Zip Code 55372-1834								R15759			i	
		33372-1034						Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	;	384.60									0				
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) Exec		Memo Item										
	Receipt For: Ago	pregate	Yea	r-to-Date ▼												
	Primary General Other (specify) ▼		-	1153.80	P	/R De	duct	tio	n (\$192	2.3	80 Bi-W	eekly	y)		
	Full Name of Individual (Last, First, Middle Initial) or MONFILETTO, ERNEST, , ,	r Full O	rgar	nization Name		Date	of R	lec	ceij	pt						
	Mailing Address 3062 COMFORT ROAD					03 / D D / Y Y Y Y 03 31 2017										
	,	tate		Zip Code								15759				
	NEW HOPE F	PA		18938-5622	4	Amou	nt o	fE	Ead	ch R	lec	eipt th	is Pe	eriod		
	FEC ID number of contributing federal political committee.	С						4	,		_	-9		153.8	4	
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) k Prgms			Mem	10	lte	m						
	Receipt For: Agg Primary General Other (specify) ▼	gregate	Yea	r-to-Date ▼ 461.52	P.	/R De	duct	ioi	n (\$76.	.92	Bi-We	ekly))		
с.	Full Name of Individual (Last, First, Middle Initial) or VALENTA, LEE D, , ,	r Full O	rgar	nization Name		Date	of R	lec	ceij	pt						
	Mailing Address 5033 PARK TERRACE					[™] 03		/		31)	/ Y	y 201	17 [°]	Y	
	3	tate		Zip Code		Tra	nsac	tic	on	ID :	PF	R15759)585/	45395	5	
	EDINA	ИN		55436-1098	_	Amou	nt o	fE	Ead	ch R	lec	eipt th	is Pe	eriod		
	FEC ID number of contributing federal political committee.	;				<u> </u>			,		_	y		384.6	0	
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) n Mgmt			Mem	10	lte	em						
	Receipt For: Agg Primary General Other (specify)	gregate	Yea	r-to-Date ▼ 1153.80	P	P/R De	educ	tio	on ((\$19)	2.3	80 Bi-W	/eekl	y)		
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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PAGE 13 OF

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	AME OF COMMITTEE (In Full) JnitedHealth Group Incorporated	I PAC (I	Un	itedHealth Grou	ıp PA(C)										
A	ull Name of Individual (Last, First, Middle Initia KELLY, JOHN W, , ,		Drga	nization Name	Date of Receipt											
	ailing Address 568 HAWTHORNE WOODS DR	State		Zip Code		03 31 2017 Transaction ID : PR1575959745395										
	AGAN	MN		55123-3059												
F	EC ID number of contributing deral political committee.	С					Amount of Eac					iece			9.70	
	ame of Employer (for Individual) nited HealthCare Services Inc		cupa Tax	tion (for Individual)				Me	emo) Ite	em					
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	ull Name of Individual (Last, First, Middle Initia VEBB, ROBERT THOMAS, , ,	l) or Full C	Orga	nization Name		1	Dat	e of	Re	cei	ipt					
	ailing Address 4516 DREXEL AVENUE			03 / 0 0 / 2017 Transaction ID : PR1580865345395												
	ity DINA	StateZip CodeMN55424-1130								-				653453 s Peric		
	FEC ID number of contributing federal political committee.							_		-			-9-	38	4.60	
	ame of Employer (for Individual) nited HealthCare Services Inc		•	tion (for Individual) nitedHlth Grp				Me	emo) Ite	em					
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	ull Name of Individual (Last, First, Middle Initia HUGHES, RICHARD J, , ,	l) or Full C	Orga	nization Name		1	Dat	e of	Re	cei	ipt					
	ailing Address 3905 COUNTY ROAD 44	-		1			(03 ^M	1	L	31			2017		
	ity /INNETRISTA	State MN		Zip Code 55364-9572						-				04145		
	EC ID number of contributing deral political committee.	С						Jun	U	La			sipt tinis	s Peric 20	0.00	
U	ame of Employer (for Individual) nited HealthCare Services Inc	Occupation (for Individual) SVP COO of Human Capital							emo) It	em					
R(eceipt For: Primary General Other (specify)	Aggregate	e Yea	ar-to-Date ▼ 600.0		P	⁄/R∣	Dedi	uctio	on	(\$10	0.0	0 Bi-W	eekly)		
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SCHEDULE A (FEC Form 3X) DEAEIDTA

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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		× 11a	11b	11c	12				
	ny information copied from such Reports and Sta for commercial purposes, other than using the r											
$\overline{\langle}$	NAME OF COMMITTEE (In Full)											
\rangle	UnitedHealth Group Incorporated	I PAC (l	UnitedHealth Group F	PAC)								
Α.		l) or Full O	Drganization Name		Date of	Receipt						
	Mailing Address 9741 GLACIER BAY				03 31 2017 Transaction ID : PR1596304345395 Amount of Each Receipt this Period							
	City EDEN PRAIRIE	State MN	Zip Code 55347-2615									
	FEC ID number of contributing federal political committee.	С				- Age		384	.60			
	Name of Employer (for Individual) United HealthCare Services Inc	ealthCare Services Inc Mkt Group G				mo Item						
	Receipt For: Primary General Other (specify) ▼	e Year-to-Date ▼ 1153.80		P/R Dedu	ction (\$1	92.30 Bi-	Weekly)					
в.	Full Name of Individual (Last, First, Middle Initia SCHUMACHER, DANIEL J, , ,	ll) or Full O	Drganization Name		Date of	Receipt						
	Mailing Address 5401 LARADA LANE			M M 03	/ D 3	D / 1	2017	Y				
	City EDINA	State MN	Zip Code 55436-1024				: PR1596		-			
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period 384.60							
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) tt Group COO		Me	mo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1153.80		P/R Dedu	ction (\$1	92.30 Bi-\	Weekly)				
С.	Full Name of Individual (Last, First, Middle Initia	ll) or Full O	Drganization Name		Date of	Receipt						
	Mailing Address 306 CHIPPEWA AVENUE	1 -			03 ^M		31	2017				
	City TAMPA	State FL	Zip Code 33606-3614				Receipt t					
	FEC ID number of contributing federal political committee.	С			<u> </u>	y	,	192	.30			
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) n Plan CEO		Me	mo Item	I					
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 576.90		P/R Dedu	iction (\$§	96.15 Bi-W	/eekly)				
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the	(ch	(check only one)								
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	AME OF COMMITTEE (In Full) InitedHealth Group Incorporated	PAC (L	InitedHealth Group PA	AC)									
/	Il Name of Individual (Last, First, Middle Initial			,									
A	DBERRENDER, ROBERT W, , ,				Date of Receipt								
Μ	ailing Address 4505 MOORLAND AVENUE				M M / D D / Y Y Y Y 03 31 2017								
	ty DINA	State MN	Zip Code 55424-1158		Transaction ID : PR1596307045395 Amount of Each Receipt this Period								
	EC ID number of contributing deral political committee.	С				U			384				
	ame of Employer (for Individual) nited HealthCare Services Inc		pation (for Individual) Treasurer		Me	əmc	Item						
R	eceipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 1153.80]	P/R Dedu	ucti	on (\$19:	2.30 Bi-W	/eekly)				
	III Name of Individual (Last, First, Middle Initial) or Full Or	ganization Name		Date of	Re	eceipt						
	ailing Address 3318 FOXRIDGE CIRCLE	State	Zip Code		м м 03	/	31) / Y	2017	Y			
	ty AMPA	State FL					PR15963 Receipt th						
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	ame of Employer (for Individual) otum Services, Inc		pation (for Individual) n Exec Dir		Me	emc	tem						
R	eceipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 234.00	l F	P/R Dedu	uctio	on (\$39.	.00 Bi-We	ekly)				
	III Name of Individual (Last, First, Middle Initial DAVIDSON, TRACY L, , ,) or Full Or	ganization Name		Date of	Re	eceipt						
	ailing Address 6058 HARBOUR TOWN CIR	1			03 ^M	1	31		ү ү 2017	Y			
Ci	ty VESTERVILLE	State OH	Zip Code 43082-8144					PR1596					
	EC ID number of contributing deral political committee.	С			<u> </u>		y .	. ,	384	.60			
U	ame of Employer (for Individual) nited HealthCare Services Inc		pation (for Individual) Plan CEO		Me	emo	tem Item						
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	y information copied from such Reports and Sta for commercial purposes, other than using the n										
$\overline{\langle}$	NAME OF COMMITTEE (In Full)										
\rangle	UnitedHealth Group Incorporated	I PAC (l	UnitedHealth Group PA	AC)							
Α.	Full Name of Individual (Last, First, Middle Initia GARCIA, STEVAN D, , ,	l) or Full O	Drganization Name	Date of Receipt							
	Mailing Address 1375 GRAYHAWK PLACE			M M M M M Y							
	City LARKSPUR	State CO	Zip Code 80118-8623								
	FEC ID number of contributing federal political committee.	С		4999.90							
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) P Ops	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4999.90	P/R Deduction (\$0.00 Bi-Weekly)							
в.	Full Name of Individual (Last, First, Middle Initia MALLATT, KATHLEEN A, , ,	l) or Full O	Drganization Name	Date of Receipt							
	Mailing Address 4304 SOUTH 167 AVENUE	03 31 YYYYY 2017									
	City OMAHA	State NE	Zip Code 68135-1353	Transaction ID : PR1596315445395 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		76.92							
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) h Plan CEO	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)							
C.	Full Name of Individual (Last, First, Middle Initia ROSENTHAL, DANIEL I, , ,	l) or Full O	Drganization Name	Date of Receipt							
	Mailing Address 8 VIA HERMOSA			03 / D D / Y Y Y Y 2017							
	ORINDA	State CA	Zip Code 94563-1828	Transaction ID : PR1596317345395 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		384.60							
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) s Ntwk	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
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		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middle A. RUTH, KEVIN J, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 16621 ALEXANDER MAN			03 31 2017 Transaction ID : PR1596317445395 Amount of Each Receipt this Period								
City SILVER SPRING	State MD	Zip Code 20905-5028									
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) United HealthCare Services Inc	Occ SVF	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. STURKEY, DAVID C, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 1941 MARINA ROAD			03 / D D / Y Y Y Y 2017								
City	State	Zip Code	Transaction ID : PR1596318445395								
IRMO	SC	29063-8579	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		78.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP Acct Mgmt	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify) ▼		234.00	P/R Deduction (\$39.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle TURNAU, CHRIS B, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address PO BOX 43216 	State	Zip Code									
BROOKLYN PARK	MN	55443-0216	Transaction ID : PR1596319145395 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.92								
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP ⁻	upation (for Individual) Fax	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)		539.52								
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ITEMIZED RECEIPTS for each category of the		Use separate schedule(s)	(check on	(check only one)								
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NAME OF COMMITTEE (In Full)		in the point of the point of the first of the point of th										
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)									
Full Name of Individual (Last, First, Middle DODDY, JOHN P, , ,	Initial) or Full C	organization Name	Date o	f Receipt								
Mailing Address 1 ROXITICUS VIEW			м м 03	03 31 Y Y Y Y Y 2017								
City CHESTER	State NJ	Zip Code 07930-3020			D:PR1600		5					
FEC ID number of contributing federal political committee.	C					78.0	00					
Name of Employer (for Individual) Optum Services, Inc	Occ VP	M	lemo Iten	ı								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 234.00	P/R Dec	luction (\$	39.00 Bi-Wo	eekly)						
Full Name of Individual (Last, First, Middle B. ILE, MICHAEL L, , ,	Initial) or Full C	organization Name	Date o	f Receipt								
Mailing Address 14924 PONDVIEW CIRCLE					31 [/] Y	2017	Y					
City WAYZATA	State MN	Zip Code 55391-2249		597645395 nis Period	5							
FEC ID number of contributing federal political committee.	С			384.60								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Prod	M	lemo Iten	ı							
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify) ▼		1153.80	P/R Ded	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle MICHAUX, MICHAEL D, , ,	Initial) or Full C	organization Name	Date o	f Receipt								
Mailing Address 742 GOODRICH AVE			03	JL	31	2017						
City SAINT PAUL	State MN	Zip Code 55105-3343			D:PR1600		5					
FEC ID number of contributing federal political committee.	С			,		200.0	00					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) GM PCM	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 600.00	P/R Deduction (\$100.00 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)				. ,		662.6	60					
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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	AME OF COMMITTEE (In Full)												
/ L	InitedHealth Group Incorporated	PAC (U	InitedHealth Group PA	AC)									
	ull Name of Individual (Last, First, Middle Initial SANDY, LEWIS G, , ,) or Full Or	ganization Name		Date of	Re	ceipt						
M	ailing Address 4800 SUNNYSLOPE ROAD E				03 / D D / Y Y Y Y 2017								
	ity DINA	State MN	Zip Code 55424-1163	_	Transaction ID : PR1600598745395 Amount of Each Receipt this Period								
	EC ID number of contributing deral political committee.	С		200						00			
U	ame of Employer (for Individual) nited HealthCare Services Inc		pation (for Individual) Clin Advancement		Me	emo	tem						
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	ull Name of Individual (Last, First, Middle Initial PETERSON, MATTHEW W, , ,) or Full Or	ganization Name		Date of	Re	ceipt						
	ailing Address 2260 FOX STREET			03	1	^D 31	/ Y	2017	Y				
	ity IRONO	State MN	Zip Code 55356-8316				-		6994539	5			
	EC ID number of contributing deral political committee.	С				т. г. т. г.		384.0	60				
	ame of Employer (for Individual) nited HealthCare Services Inc		pation (for Individual) Ancillary & Ind/Sgt CAO		Me	emo	Item						
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	ull Name of Individual (Last, First, Middle Initial MALONEY, JEFFREY W, , ,) or Full Or	ganization Name		Date of	Re	ceipt						
_	ailing Address 6327 PASADENA POINT BLVD				^M 03	/	31		2017 [°]				
	ity GULFPORT	State FL	Zip Code 33707-3867						24354539 is Period	5			
	EC ID number of contributing deral political committee.	С			<u> </u>		y .		192.:	30			
0	ame of Employer (for Individual) ptum Services, Inc		pation (for Individual) en Mgmt		Me	emo	tem						
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (l	Jni	itedHealth Group PA	C)									
Α.	Full Name of Individual (Last, First, Middle Initial) BELLAMY, THOMAS J, , ,	or Full O	rgar	nization Name		Date of Receipt								
	Mailing Address 2743 THOMAS AVENUE SOUTH					M M / D D / Y Y Y Y 31 2017								
	5	State MN		Zip Code		Transaction ID : PR1653444345395 Amount of Each Receipt this Period								
				55416-4346		٩m	ount	of	Ea	ach R	lec	eipt thi	is Perio 282	
	Name of Employer (for Individual) United HealthCare Services Inc	Occi VP S	•	ion (for Individual)			Me	emo) Ite	em		7		
	Pagaint For:			r-to-Date ▼ 512.85		/R	Dedu	uctic	on	(\$224	4.3	35 Bi-W	'eekly)	
	Full Name of Individual (Last, First, Middle Initial)	or Full O	rgar	nization Name		Dat	te of	Re	ecei	ipt				
	Mailing Address 57 QUORN HUNT ROAD		Zip Code	03 / D D / Y Y Y Y Y 2017										
	City SIMSBURY	State CT									458453 is Perio			
	FEC ID number of contributing federal political committee.	C							-			-9	76	.92
	Name of Employer (for Individual) United HealthCare Services Inc	Occi VP	•	tion (for Individual)			Me	emo) Ite	em				
	Receipt For: Ag Primary General Other (specify) ▼	ggregate	Yea	r-to-Date ▼ 230.76	P/	/R I	Dedu	uctio	on	(\$38.	.46	6 Bi-We	ekly)	
с.	Full Name of Individual (Last, First, Middle Initial)	or Full O	rgai	nization Name		Dat	te of	Re	ecei	ipt				
	Mailing Address 18855 MEADOW VIEW BLVD						03 ^M	/	L	31			2017	_
	City : PRIOR LAKE :	State MN		Zip Code 55372-3133									7503453 is Perior	
	FEC ID number of contributing federal political committee.	C					Journ	01	J			, sipt till 1	384	_
	Name of Employer (for Individual) Optum360 Services Inc		•	ion (for Individual)			Me	emo	b It	em				
	Receipt For: Ag Primary General Other (specify)	ggregate	Yea	r-to-Date ▼ 1153.80	P	/R	Dedu	uctio	on	(\$19	2.3	30 Bi-W	/eekly)	
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т	OTAL This Period (last page this line number only))		····· •					-			-		

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ITEMIZED RECEIPTS	for each category of Detailed Summary Pa							
or for commercial purposes, other than using		by any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (UnitedHealth Gro	up PAC)						
Full Name of Individual (Last, First, Middle ANDERSON, CATHERINE K, , ,	ame of Individual (Last, First, Middle Initial) or Full Organization Name ERSON, CATHERINE K, , ,							
Mailing Address 57 SIMMONS LANE		03 / D D / Y Y Y Y 2017						
City SEVERNA PARK	State Zip Code MD 21146-1921	Transaction ID : PR1903550745395						
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period						
Name of Employer (for Individual) United HealthCare Services Inc	Occupation (for Individual) SVP Strat Initiv	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 582	P/R Deduction (\$97.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. JOHNSON, CHRISTOPHER T, ,		Date of Receipt						
Mailing Address 12880 53RD STREET NO	03 / D D / Y Y Y Y 2017							
City STILLWATER	StateZip CodeMN55082-1063	Transaction ID : PR1903591145395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С	78.00						
Name of Employer (for Individual) Optum Services, Inc	Occupation (for Individual) VP Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	P/R Deduction (\$39.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. SANTELLI, JOHN C, , ,	Initial) or Full Organization Name	Date of Receipt						
Mailing Address 25510 BIRCH BLUFF RO		03 / D D / Y Y Y Y 2017						
City EXCELSIOR	State Zip Code MN 55331-8520	Transaction ID : PR1903622045395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С	384.60						
Name of Employer (for Individual) Optum Services, Inc	Occupation (for Individual) SVP CIO	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1153	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)								
TOTAL This Period (last page this line num	per only)							

FOR LINE NUMBER:

PAGE 22 OF

ITEMIZED RECEIPTS fo		Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle HANSEN, DAVID M, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 33 VIA CONOCIDO			03 / D D / Y Y Y Y Y 03 31 2017							
City SAN CLEMENTE	State CA	Zip Code 92673-7044	Transaction ID : PR2119476745395 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		270.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In Pres Ntwk Mgmt	Memo Item							
Receipt For: Primary General Other (specify) \bigtriangledown	Aggregate	Year-to-Date 810.00	P/R Deduction (\$135.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. HO, SAMUEL W, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 4220 OCEAN DR			M M / D D / Y Y Y Y 03 31 2017							
City MANHATTAN BEACH	State CA	Zip Code 90266-3059	Transaction ID : PR2119477945395 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	EC ID number of contributing									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Grp Chief Clin Off	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. NEURURER, SCOTT A, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 23822 VIA MONTE			03 31 2017							
City COTO DE CAZA	State CA	Zip Code 92679-4001	Transaction ID : PR2119484945395 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		115.38							
Name of Employer (for Individual) Optum Services, Inc	Occ VP (upation (for Individual) Ops	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 346.14	P/R Deduction (\$57.69 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			769.98							
TOTAL This Period (last page this line number	er only)									

Use separate schedule(s)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a ☐ 11b ☐ 11c ☐ 12									
Δ	uniformation conied from such Departs and 21 1		, ,	13 14 15 16 17									
	y information copied from such Reports and Statem for commercial purposes, other than using the nam												
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (U	InitedHealth Group PA	C)									
A.	Full Name of Individual (Last, First, Middle Initial) c PITTMAN, AUSTIN T, , ,	or Full Or	ganization Name	Date of Receipt									
	Mailing Address 4621 EDINA BLVD			03 / D D / Y Y Y Y 03 31 2017									
	- 3	State	Zip Code	Transaction ID : PR2119486745395									
	EDINA	MN	55424-1154	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.			384.60									
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Segment CEO	Memo Item									
	Boogint For:		/ear-to-Date ▼	-									
	Primary General Other (specify) ▼	gregate	1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
В.	Full Name of Individual (Last, First, Middle Initial) c TUCKER, STEVEN M, , ,	or Full Or	ganization Name	Date of Receipt									
	Mailing Address 12331 COUNTRY LANE		03 / D D / Y Y Y Y 2017										
		State	Zip Code	Transaction ID : PR2119492045395									
	SANTA ANA	CA	92705-3330	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.			192.00									
	Name of Employer (for Individual) Optum Services, Inc		pation (for Individual) Regl Affs	Memo Item									
	Receipt For: Ag Primary General Other (specify) ▼	igregate	/ear-to-Date ▼ 576.00	P/R Deduction (\$96.00 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial) c VANASTEN, SUSAN, , ,	or Full Or	ganization Name	Date of Receipt									
	Mailing Address N2249 NICOLE COURT			03 / D D / Y Y Y Y 03 31 2017									
	5	State	Zip Code	Transaction ID : PR2119492645395									
	KAUKAUNA	WI	54130-9462	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.			80.00									
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Telesls Dir	Memo Item									
	Receipt For: Ag Primary General Other (specify)	igregate	/ear-to-Date ▼ 240.00	P/R Deduction (\$40.00 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)			656.60									
Т	OTAL This Period (last page this line number only)		·····										

SCHEDULE A (FEC Form 3X) -

Use separate schedule(s)

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T	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)						
			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16						
	y information copied from such Reports and Sta for commercial purposes, other than using the r			person for the purpose of soliciting contributions						
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group P	AC)						
A.	Full Name of Individual (Last, First, Middle Initia MASON, JOHN TYLER, J, ,	l) or Full O	rganization Name	Date of Receipt						
	Mailing Address PO BOX 2083			M M / D D / Y Y Y Y 03 31 2017						
	City CYPRESS	State CA	Zip Code 90630-1583	Transaction ID : PR2126373845395 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		384.60						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 961.50	P/R Deduction (\$192.30 Bi-Weekly)						
B.	Full Name of Individual (Last, First, Middle Initia BURKE, FORREST G, , ,	Date of Receipt								
	Mailing Address 380 LEAF STREET	State	Zip Code	03 / D D / Y Y Y Y 2017						
	City ORONO	State MN	Zip Code 55356-9733	Transaction ID : PR2133132445395 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		384.60						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) s PS Labor Trust	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Initia HULTGREN, BROR O, , ,	l) or Full O	rganization Name	Date of Receipt						
	Mailing Address 408 22ND ST	-		03 / D D / Y Y Y Y Y 2017						
	City GOLDEN	State CO	Zip Code 80401-2452	Transaction ID : PR2133133245395 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		384.60						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n CEO	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
	UBTOTAL of Receipts This Page (optional)			1153.80						

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				e separate schedule(s)	(ch	(check only one)								
	EMIZED RECEIPTS			each category of the tailed Summary Page		× 11a		11b	11c	12				
	y information copied from such Reports and Sta													
	for commercial purposes, other than using the n NAME OF COMMITTEE (In Full)	ame and a	uures	s of any political committee	10 5	Olicit con		utions in	om suci	1 commu	ee.			
\rangle	UnitedHealth Group Incorporated	I PAC (L	Jnite	edHealth Group PA	.C)									
A.	Full Name of Individual (Last, First, Middle Initia MORISATO, SUSAN C, , ,	l) or Full O	rganiz	ation Name		Date of	Re	ceipt						
	Mailing Address 238 ARDMORE ROAD					03	/	D D D 31	/ Y	y y 2017	Y			
	City DES PLAINES	State IL	Z	ip Code 60016-2119						13384539 is Period	5			
	FEC ID number of contributing federal political committee.	С						y		384.	60			
				n (for Individual) ance Sols		Me	emo	Item						
				o-Date ▼ 1153.80		P/R Dedu	uctic	on (\$192	.30 Bi-W	/eekly)				
в.	Full Name of Individual (Last, First, Middle Initia PUTNAM, T JEFFREY, , ,	l) or Full O	rganiz	ation Name		Date of	Re	ceipt						
	Mailing Address 303 ELMWOOD PLACE WEST	dress 303 ELMWOOD PLACE WEST				03	/	D D D 31	/ Y	y y 2017	Y			
	City MINNEAPOLIS	State MN		ïp Code 55419-1349	-					3424539	5			
	FEC ID number of contributing federal political committee.	С						Amount of Each Receipt this Period 384.60						
	Name of Employer (for Individual) United HealthCare Services Inc	Occi SVF	_	Me	emo	Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-t	o-Date ▼ 1153,80	P/R Deduction (\$192.30 Bi-Weekly)									
C.	Full Name of Individual (Last, First, Middle Initia FALKENBERG, ROBERT C, , ,	l) or Full O	rganiz	ation Name	T	Date of	Re	ceipt						
	Mailing Address 6 LANTANA	1				03	/	D D D 31	/ Y	ү 2017	Y			
	City NEWPORT COAST	State CA		ip Code 92657-1646				-		72844539 is Period	5			
	FEC ID number of contributing federal political committee.	С						y .	, <u>,</u>	163.	88			
Name of Employer (for Individual) United HealthCare Services Inc			upatior Plan C	n (for Individual) CEO		Memo Item								
Receipt For: Aggregate Primary General Other (specify)			Year-t	o-Date ▼ 361.20	P/R Deduction (\$81.94 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)			•				,		933.	08			
т	OTAL This Period (last page this line number on	ly)		•••••				,						

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	-	Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12					
			13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)								
> UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)					
Full Name of Individual (Last, First, Middle A. SMITH, DANNETTE L, , ,	Initial) or Full C	rganization Name	Data of Pagaint					
Mailing Address 4200 ALDEN DRIVE			Date of Receipt					
			03 31 2017					
City EDINA	State MN	Zip Code 55416-5010	Transaction ID : PR2145729945395					
		33410-3010	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual)		upation (for Individual)	Memo Item					
United HealthCare Services Inc Receipt For:		Deputy Gen Counsel						
Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$192.30 Bi-Weekly)					
Other (specify) V								
Full Name of Individual (Last, First, Middle B. SPIVACK, DAVID A, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 37 HIDDEN TRAIL								
City IRVINE	State CA	Zip Code 92603-0212	Transaction ID : PR2162867645395					
FEC ID number of contributing	_	32003-0212	Amount of Each Receipt this Period					
federal political committee.	C		192.30					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Bus Ops	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼						
Other (specify) ▼		, 769.20	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. GIBSON, CHRISTINE W, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 8516 29TH AVE N			03 31 2017					
City	State	Zip Code	Transaction ID : PR2225166745395					
NEW HOPE	MN	55427-2622	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		76.92					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Strat Initiv	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			653.82					
TOTAL This Period (last page this line numb								

Use separate schedule(s)

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ITF			Use separate schedule(s)	(check only one)						
110			for each category of the Detailed Summary Page	X 11a 11b 11c 12						
	/ information copied from such Reports and Sta for commercial purposes, other than using the r									
	NAME OF COMMITTEE (In Full)									
\geq	UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	NC)						
Α.	Full Name of Individual (Last, First, Middle Initia BEAULE, JEAN-FRANCOIS, , ,	l) or Full O	rganization Name	Date of Receipt						
	Mailing Address 7 STRATFORD RD	1-		03 / D D / Y Y Y Y 03 31 2017						
	City FARMINGTON	State CT	Zip Code 06032-1444	Transaction ID : PR2225813645395 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		230.76						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P HIth Advancement	Memo Item						
Receipt For: Aggreg Primary General Other (specify) ▼			Year-to-Date ▼ 692.28	P/R Deduction (\$115.38 Bi-Weekly)						
	Full Name of Individual (Last, First, Middle Initia RANGEN, ERIC S, , ,	l) or Full O	rganization Name	Date of Receipt						
	Mailing Address 15348 RED OAKS ROAD SE			03 31 2017						
	City PRIOR LAKE	State MN	Zip Code 55372-1834	Transaction ID : PR2225819345395 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		192.30						
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) um Exec	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 961.50	P/R Deduction (\$192.30 Bi-Weekly)						
	Full Name of Individual (Last, First, Middle Initia RYAN, JOHN D, , ,	l) or Full O	rganization Name	Date of Receipt						
	Mailing Address 45 WESTMORELAND LN			03 / D D / Y Y Y Y 2017						
	City NAPERVILLE	State IL	Zip Code 60540-5817	Transaction ID : PR2225819645395 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ? CInt Mgmt Svc	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 346.14	P/R Deduction (\$57.69 Bi-Weekly)						
sı	JBTOTAL of Receipts This Page (optional)			538.44						
т	OTAL This Period (last page this line number or	ıly)	•							

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
Any information copied from such Reports and or for commercial purposes, other than using t			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ted PAC (JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle A. SAILOR, ROY THOMAS, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 276 COYOTE WILLOW DR	IVE		03 31 2017						
City COLORADO SPRINGS	State CO	Zip Code 80921-7631	Transaction ID : PR2225819745395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		153.84						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Bus Dvlp	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.52	P/R Deduction (\$76.92 Bi-Weekly)						
Full Name of Individual (Last, First, Middle CONNLY, MICHAEL R, , ,	Initial) or Full C	Date of Receipt							
Mailing Address 570 MONTCALM PL		03 / D D / Y Y Y Y Y 2017							
City SAINT PAUL	State MN	Zip Code 55116-1730	Transaction ID : PR2247625845395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	FEC ID number of contributing		418.18						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ef Tech Off	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) ▼		818.18	P/R Deduction (\$209.09 Bi-Weekly)						
Full Name of Individual (Last, First, Middle CARCIONE JR, JOSEPH R, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 11 CARRIAGE WAY			03 / D D / Y Y Y Y 2017						
City WHITE PLAINS	State NY	Zip Code 10605-5424	Transaction ID : PR2247626845395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		115.40						
Name of Employer (for Individual) United HealthCare Services Inc	Occ Mec	upation (for Individual) I Dir	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 346.20	P/R Deduction (\$57.70 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			687.42						
TOTAL This Period (last page this line number	er only)	······							

SCHEDULE A (FEC Form 3X) DEOEIDTO

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (UnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle KANTOLA, KEVIN DAVID, , ,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 7031 HALSTEAD DRIVE			03 31 2017						
City MINNETRISTA	State MN	Zip Code 55364-3201	Transaction ID : PR2247627045395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		78.00						
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) IT	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 234.00	P/R Deduction (\$39.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. O'BRIEN, DENNIS P, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name O'BRIEN, DENNIS P, , ,								
Mailing Address 61 LOUGHLIN AVE			03 / D D / Y Y Y Y 03 31 2017						
City COS COB	State CT	Zip Code 06807-2621	Transaction ID : PR2247627345395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) gn CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle VERNEY, JEFFERY RICHARD		Organization Name	Date of Receipt						
Mailing Address 266 WESTLEDGE ROAD			03 / D D / Y Y Y Y 2017						
City WEST SIMSBURY	State CT	Zip Code 06092-2017	Transaction ID : PR2247627445395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		192.30						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			654.90						
TOTAL This Period (last page this line number	er only)								

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 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 mane and a	L ay not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle I GARODIA, SANJAY, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 110 COVINGTON COURT			03 31 Y Y Y Y Y 2017						
City OAK BROOK	State IL	Zip Code 60523-2574	Transaction ID : PR2247627845395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) Optum Services, Inc	Occ CO	upation (for Individual) D	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I B. OHMAN, DANIEL L, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 8970 MOOR PARK RUN			03 / D D / Y Y Y Y 2017						
City DULUTH	State GA	Zip Code 30097-6621	Transaction ID : PR2247628045395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		192.30						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) gn CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I PRINCE, JOHN M, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 546 HARRINGTON ROAD	State	Zip Code	03 31 2017 Transaction ID : PR2259738445395						
WAYZATA	MN	55391-1550	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Group COO	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			653.82						
TOTAL This Period (last page this line numbe	r only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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	IVIZED RECEIPTS		Datailad Cummar D		X	11a		11t		11c		12			
			Detailed Summary Pa	age _		13	\vdash	14	F	15		16	17		
	r information copied from such Reports and or commercial purposes, other than using th									soliciti	ng con	tributi	ons		
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Gro	up PAC)											
/	Full Name of Individual (Last, First, Middle I			. ,											
۱.	CRONN, CHRISTOPHER L, , ,				Date of Receipt										
	Mailing Address 1122 COLORADO STREET SUITE 2399 City	State	Zip Code		03 / D D / Y Y Y Y 03 31 2017										
	AUSTIN	TX	78701-2132	_							052294 this Pe				
-	FEC ID number of contributing ederal political committee.	С]		nount	UI	,		eceipt		76.9	2		
	Name of Employer (for Individual) Jnited HealthCare Services Inc		upation (for Individual) t Affs Dir		C	Me	emo	lte	m						
	Receipt For: Primary General Other (specify) ▼	General Aggregate Year-to-Date ▼ 230.76									Veekly)			
3.	Full Name of Individual (Last, First, Middle I LOGAN, JAKE, , ,	,	rganization Name		Date of Receipt										
	Mailing Address 4826 EAST CALLE REDONDA							03 / D D / Y Y Y Y 03 31 2017							
	City PHOENIX	State AZ	Zip Code 85018-2931		Transaction ID : PR2402318245395 Amount of Each Receipt this Period										
	FEC ID number of contributing ederal political committee.	С	1	384.60											
	Name of Employer (for Individual) Jnited HealthCare Services Inc		upation (for Individual) /t Affs Dir		ŀ	Me	emo	Ite	m						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153		P/R	Dedu	uctic	on (S	6192	.30 Bi-	Weekly	y)			
	Full Name of Individual (Last, First, Middle I BECKER, JAMES H, , ,	nitial) or Full C	rganization Name		Da	ate of	Re	ceip	ot						
	Mailing Address 378 FERNDALE ROAD WE	ST			03 31 2017										
	City WAYZATA	State MN	Zip Code 55391-1559	_							24451				
-			55391-1559	_	Ar	nount	of	Eac	h R	eceipt	this Pe	eriod			
	FEC ID number of contributing rederal political committee.	С			Ļ	_	_	9		. ,		384.6	0		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ops		Memo Item										
	Receipt For: Primary General Other (specify)		Year-to-Date ▼ 1153	.80	P/F	R Dedi	uctio	on (\$192	2.30 Bi	-Weekl	y)			
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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or	for commercial purposes, other than using the na												
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Unit	edHealth Group PA	(C)								
Α.	Full Name of Individual (Last, First, Middle Initial) COLEMAN, JAMES C, , ,	or Full O	Organi	zation Name		Date of	Re	эсе	əipt				
	Mailing Address 4720 WEST 66TH STREET					03	/	ſ	31		/ Y	2017	Y
	City EDINA	State MN	2	Zip Code 55435-1506		Transaction ID : PR2402445245395 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C				. 01	2				314.	28	
	Name of Employer (for Individual) United HealthCare Services Inc		•	on (for Individual) SVP, Human Capital		M	emo	s l	tem				
	Receipt For: µ Primary General Other (specify) ▼	Aggregate	Year-	P/	/R Ded	uctio	ion	ı (\$21	4.2	28 Bi-W	'eekly)		
B.	Full Name of Individual (Last, First, Middle Initial)	or Full O	Drgani	Date of Receipt									
	Mailing Address 11688 TANGLEWOOD DRIVE					03 / D D / Y Y Y Y 2017							
	City EDEN PRAIRIE	State MN		Zip Code 55347-4726								4564539 is Period	-
	FEC ID number of contributing federal political committee.	C					_	-,			-7	384.	_
	Name of Employer (for Individual) Optum Services, Inc		•	on (for Individual) ment CEO		M	emo	o l	tem				
	Receipt For: A Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$192.30 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initial)	or Full O	Organi	zation Name		Date of	Re	эсе	əipt	_			
	Mailing Address 4203 BRADLEY LANE					^M 03	Ŀ.		31			2017 [°]	
	City CHEVY CHASE	State MD		Zip Code 20815-5234								2884539 is Period	-
	FEC ID number of contributing federal political committee.	С	_					,		-	,	384.	_
	Name of Employer (for Individual) United HealthCare Services Inc		•	on (for Individual) ernal Affairs		М	emo	οI	ltem				
	Receipt For: A Primary General Other (specify)	Aggregate	P.	/R Ded	luctio	ior	າ (\$19	2.3	30 Bi-W	/eekly)			
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SCHEDULE A (FEC Form 3X) DEAEIDTA

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12					
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)	using the name and a							
UnitedHealth Group Inco	prporated PAC (l	JnitedHealth Group P/	AC)					
Full Name of Individual (Last, First, WEE, KATHLYN G, , ,	Middle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 2225 46TH ST NW			03 / D D / Y Y Y Y 2017					
City WASHINGTON	State DC	Zip Code 20007-1032	Transaction ID : PR2408545045395 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		384.60					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 2 State SIs OptumI	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, B. FUENTEVILLA, ANA T, , ,	Middle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 4815 N CAMINO E	SCUELA		03 31 Y Y Y Y Y 2017					
City	State	Zip Code	Transaction ID : PR2437119845395					
TUCSON	AZ	85718-5913	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		245.71					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Seg Chief Med Off	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 285.71	P/R Deduction (\$235.71 Bi-Weekly)					
Full Name of Individual (Last, First, C. HAGAN, WILLIAM A, , ,	Middle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 6536 E GREYTHO	RN DRIVE		03 / D D / Y Y Y Y 2017					
City SCOTTSDALE	State AZ	Zip Code 85266-6761	Transaction ID : PR2437120045395 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		76.92					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) , HIth Advancement	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)					
SUBTOTAL of Receipts This Page (o	ptional)		707.23					
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	EMIZED RECEIPTS		for each category of the Detailed Summary Page		× 11a	11b	11c	12						
	y information copied from such Reports and Sta for commercial purposes, other than using the r													
<u> </u>	NAME OF COMMITTEE (In Full)													
\rangle	UnitedHealth Group Incorporated	I PAC (l	UnitedHealth Group F	PAC)										
A.	Full Name of Individual (Last, First, Middle Initia JOHNSON-MILLS, RITA FAYE, , ,	l) or Full O	Drganization Name		Date of	Receipt								
	Mailing Address 235 GOVERNORS WAY				03	/ D 3		ү ү 2017	Y					
	City BRENTWOOD	State TN	Zip Code 37027-8931				: PR2437 Receipt th		5					
	FEC ID number of contributing federal political committee.	С						424.	74					
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) h Plan CEO		Me	mo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 752.49		P/R Dedu	iction (\$2	12.37 Bi-V	Veekly)						
в.	Full Name of Individual (Last, First, Middle Initia BALTHAZOR, PAUL JOSEPH, , ,	l) or Full O	Drganization Name		Date of	Receipt								
		Address 9013 FARNSWORTH AVENUE NORTH			03	/ D		2017	Y					
	City BROOKLYN PARK	State MN	Zip Code 55443-1754	-			: PR2437 Receipt th		5					
	FEC ID number of contributing federal political committee.	С						384.0	60					
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) s Segment COO		Me	mo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1153.80	f	P/R Deduction (\$192.30 Bi-Weekly)									
С.	Full Name of Individual (Last, First, Middle Initia NESS, LAURA L, , ,	l) or Full O	Drganization Name		Date of	Receipt								
	Mailing Address 10550 PINNACLE WAY	1.0			03	/ D 3	1	2017						
	City WOODBURY	State MN	Zip Code 55129-4282				: PR2437 Receipt th		5					
	FEC ID number of contributing federal political committee.	С				,	. ,	267.8	30					
Name of Employer (for Individual) United HealthCare Services Inc			cupation (for Individual) Gen Mgmt		Me	emo Item								
Receipt For: Aggregate Year-to- Primary General Other (specify) The second seco			e Year-to-Date ▼ 423.80		P/R Dedu	uction (\$2	28.80 Bi-V	Veekly)						
s	UBTOTAL of Receipts This Page (optional)			•		,	. ,	1077. <i>*</i>	4					
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
Any information copied from such Reports and or for commercial purposes, other than using t			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle COSGRIFF, JOHN W, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 1837 SUMMIT LANE			03 / D D / Y Y Y Y 03 31 2017						
City MENDOTA HEIGHTS	State MN	Zip Code 55118-4137	Transaction ID : PR2437121645395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Strategy	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. RAINEY, PETER W, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 3115 WEST 47 STREET			03 / D D / Y Y Y Y 2017						
City MINNEAPOLIS	State MN	Zip Code 55410-1857	Transaction ID : PR2437127545395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) Fin	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle LIPPERT, ROBIN E, , ,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 3643 JENIFER STREET N		7. 0.1	M M / D D / Y Y Y Y 31 2017						
City WASHINGTON	State DC	Zip Code 20015-1751	Transaction ID : PR2439928045395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) External Affs	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			1153.80						
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or for commercial purp	from such Reports and Sta oses, other than using the n									oliciting		utions		
NAME OF COMMIT	TEE (In Full) Group Incorporated	I PAC (l	Unit	edHealth Group P/	AC)									
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name HEYMAN, STEPHEN M, , , Mailing Address 5300 SHERRILL AVENUE						Date of Receipt								
													City CHEVY CHASE	State MD
			20815-3720	A	_ Amount of Each Receipt this Period									
FEC ID number of of federal political com	0	С		384.60										
Name of Employer (for Individual) United HealthCare Services Inc		Occu SVF		Memo Item										
Receipt For:		Aggregate	_											
Primary Other (specify	General) ▼		P/	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. LANGER, DONALD S, , ,								Date of Receipt						
Mailing Address 5110 OAK RAMBLING DRIVE						03 31 Y Y Y Y Y 2017								
City		State		Zip Code		Trans	acti	on II	D : PI	R2445(0154453	95		
KATY		TX 77494-1971			A	Amount of Each Receipt this Period								
FEC ID number of of federal political com	0	C					135.24							
Name of Employer United HealthCare S		Occi Hith		М	emo	lter	n							
Receipt For: Aggregat Primary General Other (specify) ▼			Year	to-Date ▼ 215.24	P/I	P/R Deduction (\$115.24 Bi-Weekly)								
	lual (Last, First, Middle Initia SHKABERIN, AMY R		Organi	zation Name		Date of	f Re	ceip	t					
Mailing Address 4329 EWING AVE S						03 31 / Y Y Y Y 03 31 2017								
City		State		Zip Code		Trans	sacti	ion I	D : P	R2445	0164453	895		
MINNEAPOLIS		MN		55410-1342	A	moun	t of	Eacl	h Rec	ceipt th	nis Perio	d		
FEC ID number of of federal political com	0	C					340.66							
Name of Employer	(for Individual)	Occupation (for Individual)				Memo Item								
United HealthCare S		VPH	VP Human Capital											
Receipt For:		Aggregate Year-to-Date ▼				1								
Other (specify	General)		879.14			P/R Deduction (\$206.04 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 berson for the purpose of soliciting contributions e to solicit contributions from such committee. 17							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	-									
Full Name of Individual (Last, First, Midc A	lle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 5 DOVE LANE			03 / D D / Y Y Y Y 03 31 2017							
City ANDOVER	State MA	Zip Code 01810-2845	Transaction ID : PR2460168145395 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) E CHAIRMAN & CEO Optum	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Mido B. ORBUCH, DAVID B, , ,										
Mailing Address 2220 CEDAR LAKE PKV			03 / D D / Y Y Y Y 2017							
City MINNEAPOLIS	State MN	Zip Code 55416-3644	Transaction ID : PR2460168245395 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		192.30							
Name of Employer (for Individual) UHC International Services Inc		upation (for Individual) um Exec	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)							
Full Name of Individual (Last, First, Mido C. SCHICK, SUE, , ,	lle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1220 DENBIGH LANE	State	Zin Codo	03 / 31 2017 Transaction ID - DD 24806305 45305							
City WAYNE	PA	Zip Code 19087-4644	Transaction ID : PR2480620545395 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) of Growth Off	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (option	al)		961.50							
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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)									
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Any information copied from such Reports or for commercial purposes, other than usi	and Statements ma	Ay not be sold or used by any political committe	13 14 15 16 1 person for the purpose of soliciting contributions te to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)	ing the nume and a											
UnitedHealth Group Incorpo	orated PAC (I	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Mid BURNS, MATTHEW A, , ,	dle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 2724 BISON DRIVE			03 31 2017									
City EDMOND	State OK	Zip Code 73034-3475	Transaction ID : PR2484541745395 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		250.00									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	P/R Deduction (\$125.00 Bi-Weekly)									
Full Name of Individual (Last, First, Mid B. PHILLIPS, MARK A, , ,												
Mailing Address 1760 LUCY RIDGE CT			03 / D D / Y Y Y Y 03 31 2017									
City CHANHASSEN	State MN	Zip Code 55317-7661	Transaction ID : PR2484542645395 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P SIs	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Mid C. MANDERFELD, THOMAS B		rganization Name	Date of Receipt									
Mailing Address 3760 WEST CALHOUN			03 / D D / Y Y Y Y 31 2017									
City MINNEAPOLIS	State MN	Zip Code 55410-1118	Transaction ID : PR2486697945395 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		80.00									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Capital Mkt Comm	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 240.00	P/R Deduction (\$40.00 Bi-Weekly)									
SUBTOTAL of Receipts This Page (option	nal)		714.60									
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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$\overline{)}$	NAME OF COMMITTEE (In Full)											
	UnitedHealth Group Incorporated	d PAC (l	UnitedHealth Group PA	C)								
 A.	Full Name of Individual (Last, First, Middle Initia MCMAHON, DIRK C, , ,	al) or Full O	Drganization Name	Date of Receipt								
	Mailing Address 60 WILDHURST ROAD			M M / D D / Y Y Y Y Y 03 31 2017								
	City EXCELSIOR	State MN	Zip Code 55331-8461	Transaction ID : PR2491457045395 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		384.60								
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) P ENTRPRS OPS/TECH	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	• Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Initia NATHAN, DONALD H, , ,	Date of Receipt										
	Mailing Address 275 GREENWICH STREET #30			03 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y								
	City NEW YORK	State NY	Zip Code 10007-2150	Transaction ID : PR2491457345395 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		384.60								
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) P Chief Comm Off	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153,80	P/R Deduction (\$192.30 Bi-Weekly)								
C.	Full Name of Individual (Last, First, Middle Initia SULLIVAN, KATHRYN M, , ,	al) or Full O	Drganization Name	Date of Receipt								
	Mailing Address 530 N LAKE SHORE DR # 230			03 / D D / Y Y Y Y 03 31 2017								
	City CHICAGO	State IL	Zip Code 60611-7435	Transaction ID : PR2491457545395 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		194.00								
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) O E&I Regions	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 582.00	P/R Deduction (\$97.00 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)			963.20								
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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\backslash	NAME OF COMMITTEE (In Full)	//			-										
/	UnitedHealth Group Incorporate			-	(C)										
٩.	Full Name of Individual (Last, First, Middle Initi SMITH, KARA V, , ,	al) or Full O	Orga	nization Name		Date of Receipt									
	Mailing Address 610 CRESTWOOD DRIVE				03 31 Y Y Y Y Y 2017										
	City	State		Zip Code		Transaction ID : PR2540175345395									
	ALEXANDRIA	VA		22302-2533	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С			384.60										
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) /t Affs		Me	emo	o It	em						
	Receipt For:			ar-to-Date V											
	Primary General	Aggregate	16			P/R Dedu	uctio	on	(\$192	2.30 F	3i-W	eeklv	y)		
	Other (specify) V		-	1153.80					()				,		
	Full Name of Individual (Last, First, Middle Initi EDWARDS, HYLLIUS R, , ,	al) or Full O)rga	nization Name		Date of Receipt									
	Mailing Address 1541 S VINE STREET				03 31 2017										
	City	State		Zip Code		Transaction ID : PR2541300445395									
	DENVER	CO		80210-2835		Amount	of	Ea	ach Re	eceip	ot this	s Pe	eriod		
	FEC ID number of contributing federal political committee.	С		100.00											
	Name of Employer (for Individual) United HealthCare Services Inc	Occ Exte		Memo Item											
	Receipt For:	Aggregate	Ye	ar-to-Date 🔻											
	Primary General Other (specify) ▼			P/R Deduction (\$50.00 Bi-Weekly)											
	Full Name of Individual (Last, First, Middle Initi PURDY, PATRICIA A, , ,	al) or Full O	al) or Full Organization Name					ece	eipt						
	Mailing Address 7417 LYNNHURST STREET					Date of Receipt 03 31 2017									
	City	State		Zip Code		Trans	act	ior	n ID :	PR2	5413	0064	45395	5	
	CHEVY CHASE	MD		20815-3101		Amount	of	Ea	ach Re	eceip	t thi	s Pe	eriod		
	FEC ID number of contributing federal political committee.	С				<u> </u>		y		_	,	3	384.6	0	
	Name of Employer (for Individual)	Occ	upa	tion (for Individual)		Me	emc	o It	tem						
	United HealthCare Services Inc		•	ternal Affs											
	Receipt For:	Aggregate	Ye	ar-to-Date ▼											
	Primary General Other (specify)			P/R Deduction (\$192.30 Bi-Weekly)											
s	JBTOTAL of Receipts This Page (optional)			▶	I 	<u> </u>		,	-	-		5	869.2	0	
Т	OTAL This Period (last page this line number of	only)		••••••				-	_	_		_			

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 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 Incorpo	prated PAC (I	JnitedHealth Group PA	łC)								
Full Name of Individual (Last, First, Mide A. TIERNEY, JOELLE M, , ,		organization Name	Date of Receipt								
Mailing Address 5710 TAYCHOPERA RI	C State	Zip Code	03 / D D / Y Y Y Y 2017								
MADISON	WI	53705-1020	Transaction ID : PR2541300745395 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 302.19	P/R Deduction (\$109.89 Bi-Weekly)								
Full Name of Individual (Last, First, Mide VERSAGGI, JOHN, , ,											
Mailing Address 800 ALBANY AVENUE											
City ALEXANDRIA	State VA	Zip Code 22302-3501	Transaction ID : PR2541300845395 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		192.32 Memo Item								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.96	P/R Deduction (\$96.16 Bi-Weekly)								
Full Name of Individual (Last, First, Mido C. HOSTETLER, BRENDAN, , ,	dle Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 2309 W WINNEMAC AV	/E		03 / D D / Y Y Y Y 2017								
City CHICAGO	State IL	Zip Code 60625-1817	Transaction ID : PR2542541945395								
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) t Affs Dir	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$63.46 Bi-Weekly)								
SUBTOTAL of Receipts This Page (option	al)		417.59								
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17			Use separate schedule(s)	(check only one)									
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12									
An or	y information copied from such Reports and Sta for commercial purposes, other than using the r	itements ma	ay not be sold or used by any pe ddress of any political committee	13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.									
<u> </u>	NAME OF COMMITTEE (In Full)												
\rangle	UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	NC)									
Α.	Full Name of Individual (Last, First, Middle Initia RAMSAY, RICHARD E, , ,	al) or Full O	rganization Name	Date of Receipt									
	Mailing Address 543 E LURAY AVE			03 / D D / Y Y Y Y 2017									
	City ALEXANDRIA	State VA	Zip Code 22301-1605	Transaction ID : PR2542542245395 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		100.00									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Regl Affs	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	P/R Deduction (\$50.00 Bi-Weekly)									
B.	Full Name of Individual (Last, First, Middle Initia YAU, ANNE, , ,	Date of Receipt											
	Mailing Address 9905 WOODLAND DRIVE			03 31 2017									
	City SILVER SPRING	State MD	Zip Code 20902-4047	Transaction ID : PR2543582545395 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		100.73									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ernal Affs Dir	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 254.57	P/R Deduction (\$62.27 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initia PACE, JEANNE M, , ,	al) or Full O	rganization Name	Date of Receipt									
	Mailing Address 458 MORENO ROAD			03 / D D / Y Y Y Y 2017									
	City WYNNEWOOD	State PA	Zip Code 19096-1124	Transaction ID : PR2552313745395 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		78.00									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Sr Acct Exe	Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 234.00	P/R Deduction (\$39.00 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)			278.73									
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116	EMIZED RECEIPTS			ich category ed Summary		×			111	o 🗌	11c	12				
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<u> </u>	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated I											-				
Α.	Full Name of Individual (Last, First, Middle Initial) ALTER, JEFFREY D, , ,	or Full O	rganizatio	on Name		Date of Receipt										
	Mailing Address 3 WOODLAND ROAD					03 / D D / Y Y Y Y 2017										
		State		Code		Transaction ID : PR2552960245395										
	PORT JEFFERSON	NY	11	777-1053		Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	C				384.60										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (f Segment	for Individual) t CEO)		Μ	lemo	lte	m						
	Receipt For:	ggregate				1										
	Primary General Other (specify) ▼	99.09410	153.80	P/R Deduction (\$192.30 Bi-Weekly)												
	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name BRYANT, JEREMY VAUGHN, , ,							Date of Receipt								
	Mailing Address 4534 MYSTIQUE WAY					03 31 2017										
	City	State	Zip	Code			Trans	sacti	on	ID : P	R25529	6134539	5			
	ROSWELL	GA	300	075-2087		A	Amoun	t of	Eac	ch Re	ceipt thi	s Period				
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) VP Clnt Mgmt NA Accts					70.00									
	Name of Employer (for Individual) United HealthCare Services Inc						Memo Item									
	Receipt For: A Primary General Other (specify) ▼	ggregate	Year-to-E		210.00	P/R Deduction (\$35.00 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initial) FLANNERY, SCOTT F, , ,	or Full O	rganizatio	on Name			Date o	f Re	eceip	ot						
	Mailing Address 8508 TRELADY CT						^M 03	/	D	31	/ Y	2017	Y			
	5	State	· · ·	Code			Trans	sacti	ion	ID : P	R25529	6234539	5			
	PLANO	ТХ	750	024-6827		A	Amoun	t of	Eac	ch Re	ceipt th	s Period				
	FEC ID number of contributing federal political committee.	C							y		y	78.	00			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (f n Growth	for Individual) Off)		N	lemo) Ite	em						
	Receipt For: A Primary General Other (specify)	ggregate	Year-to-E		234.00	P,	/R Dec	ductio	on (\$39.0	0 Bi-We	ekly)				
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т	OTAL This Period (last page this line number only)				ĺ			,		- <u>-</u>					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

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17			Use separate schedule(s)	(check only one)										
	EMIZED RECEIPTS		for each category of the Detailed Summary Page											
	y information copied from such Reports and Sta for commercial purposes, other than using the r													
<u> </u>	NAME OF COMMITTEE (In Full)													
\rangle	UnitedHealth Group Incorporated	d PAC (l	UnitedHealth Group PA	.C)										
A.	Full Name of Individual (Last, First, Middle Initia HANNAN, CLAIRE L, , ,	al) or Full O	Organization Name	Date of Receipt										
	Mailing Address 25932 PORTAFINO DRIVE			03 / D D / Y Y Y Y 2017										
City MISSION VIEJO			Zip Code 92691-5716	Transaction ID : PR2552962745395 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		78.00										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 234.00	P/R Deduction (\$39.00 Bi-Weekly)										
в.	Full Name of Individual (Last, First, Middle Initia LOVELADY, JOHN H, , ,	Date of Receipt												
	Mailing Address 6268 ORCHARD PARK	Ototo	Zin Oode	03 / D D / Y Y Y Y 2017										
	City FRISCO	State TX	Zip Code 75034-5126	Transaction ID : PR2552964245395 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		384.60										
	Name of Employer (for Individual) United HealthCare Services Inc		supation (for Individual) gn CEO	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
С.	Full Name of Individual (Last, First, Middle Initia STREIT, BARRY R, , ,	al) or Full O	Organization Name	Date of Receipt										
	Mailing Address 5421 KELLOGG AVENUE			03 / D D / Y Y Y Y 03 31 2017										
	City EDINA	State MN	Zip Code 55424-1604	Transaction ID : PR2552966745395 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		115.38										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) R Reg VP of Sls	Memo Item										
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 346.14	P/R Deduction (\$57.69 Bi-Weekly)										
s	UBTOTAL of Receipts This Page (optional)		••••••	577.98										
т	OTAL This Period (last page this line number of	nly)	•••••											

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	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle TUFTO, DARLA, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 221 1ST AVENUE NE UNIT 35			03 31 Y Y Y Y Y 2017								
City MINNEAPOLIS	State MN	Zip Code 55413-3205	Transaction ID : PR2553474945395 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		500.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	P/R Deduction (\$500.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. RAYBURN, MONICA L, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name RAYBURN, MONICA L, , ,										
Mailing Address 5127 JACKSON PONDS C			03 / D / Y Y Y Y 2017								
City SUGAR LAND	State TX	Zip Code 77479-4656	Transaction ID : PR2553475145395 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		78.00								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify) ▼		234.00	P/R Deduction (\$39.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle THOMAS, RICHARD D, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 5121 DUPONT AVENUE S	SOUTH		03 31 Y Y Y Y Y 2017								
City MINNEAPOLIS	State MN	Zip Code 55419-1151	Transaction ID : PR2553475445395 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		194.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 582.00	P/R Deduction (\$97.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			772.00								
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a		11c	12							
Any information copied from such Reports and or for commercial purposes, other than using t				ourpose of sol									
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	UnitedHealth Group PA	NC)										
Full Name of Individual (Last, First, Middle I A. VOJTA, DENEEN, , ,	nitial) or Full C	Organization Name	Date of	Receipt									
Mailing Address 5201 KELLOGG AVENUE			M M 03	M M / D D / Y Y Y Y Y									
City EDINA	State MN	Zip Code 55424-1304		of Each Rece			j						
FEC ID number of contributing federal political committee.	С				-g=-	384.6	0						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Bus Initiv Clin Aff	Me	mo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Dedu	uction (\$192.30) Bi-We	ekly)							
Full Name of Individual (Last, First, Middle I B. FLAGSTAD, KARSTEN S, , ,	Date of	Receipt											
Mailing Address 13420 JAY ST NW	1-		03	/ D D 31	/ Y	y y 2017	Y						
City ANDOVER	State MN	Zip Code 55304-4015		of Each Rece			<u>; </u>						
FEC ID number of contributing federal political committee.	С		384.60										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Info Tech	Memo Item										
Receipt For:	Aggregate	Year-to-Date ▼		1									
Primary General Other (specify) ▼		1153.80	P/R Dedu	ction (\$192.30) Bi-We	ekly)							
Full Name of Individual (Last, First, Middle I CLUTE, DANIEL J, , ,	nitial) or Full C	Organization Name	Date of	Receipt									
Mailing Address 7756 N 85TH STREET	Otata	Zin Onde	03	/ 31		үүү 2017							
City OMAHA	State NE	Zip Code 68122-1281		of Each Rece)						
FEC ID number of contributing federal political committee.	С			y	y .	76.9	2						
Name of Employer (for Individual) United HealthCare Services Inc	Occ Mec	upation (for Individual) I Dir	Me	mo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)		••••••		,	,	846.1	2						
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SCHEDULE A (FEC Form 3X) -

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			Use separate schedule(s)	(check only one)										
			for each category of the Detailed Summary Page	X 11a 11b 11c 12										
				13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.										
	e of committee (in Full) tedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	AC)										
	lame of Individual (Last, First, Middle Initia NCURSIO, DONALD J, , ,	ll) or Full Or	rganization Name	Date of Receipt										
Mailin	g Address 72 MIDNIGHT RIDGE DR			03 / D D / Y Y Y Y Y 03 31 2017										
City LAS	VEGAS	State NV	Zip Code 89135-1680	Transaction ID : PR2560064945395Amount of Each Receipt this Period										
	ID number of contributing al political committee.	С		384.60										
	e of Employer (for Individual) n Plan of Nevada		ipation (for Individual) Plan CEO	Memo Item										
	pt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
	lame of Individual (Last, First, Middle Initia NEMUND, GREGG J, , ,	Date of Receipt												
	g Address 9040 RIVERBEND MANOR	Otata	Zin Oode	03 / D D / Y Y Y Y 2017										
City ALPH	IARETTA	State GA	Zip Code 30022-1813	Transaction ID : PR2560065345395 Amount of Each Receipt this Period										
	D number of contributing al political committee.	С		170.33										
	of Employer (for Individual) HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item										
Recei	pt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 439.57	P/R Deduction (\$103.02 Bi-Weekly)										
	lame of Individual (Last, First, Middle Initia PMAN, SHELDON, , ,	ll) or Full Or	rganization Name	Date of Receipt										
	g Address 55 CLIFFIELD ROAD			03 / D D / Y Y Y Y Y 2017										
City BEDI	FORD	State NY	Zip Code 10506-1210	Transaction ID : PR2560065445395 Amount of Each Receipt this Period										
	ID number of contributing al political committee.	С		194.00										
Unite	of Employer (for Individual) d HealthCare Services Inc	Occu Med	ipation (for Individual) Dir	Memo Item										
	pt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 582.00	P/R Deduction (\$97.00 Bi-Weekly)										
SUBTO	TAL of Receipts This Page (optional)			748.93										
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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			Detailed Summary Page	×	-		11b	11c		12				
٨	w information conied from such Reports and S	Detailed Summary Page 11a 11b 11c 12 m such Reports and Statements may not be solid or used by any person for the purpose of soliditing contril 11c 12 in the name and address of any political committee to solid contributions from such committee to solid contreleven	16 ntribut	17 ions										
\setminus	NAME OF COMMITTEE (In Full)													
	UnitedHealth Group Incorporate	ed PAC (I	UnitedHealth Group P/	AC)										
Α.	Full Name of Individual (Last, First, Middle Ini LUCHT, JEFFREY D, , ,	tial) or Full C	Organization Name		Date of Receipt									
	Mailing Address 33 FOUR SEASONS DRIVE													
	City	State	Zip Code	_	Transaction ID : PR2560065645395									
	ALTON			Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		194.00										
	Name of Employer (for Individual)				M	emo	Item							
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	Other (specify) ▼		582.00		// Deu	ucu	ση (ψ97.	DI-VV	JUNI	¥]				
– R			Date of Receipt											
υ.														
	City		Zip Code		Trans	acti	on ID :	PR25600)660)4539{	5			
	KATY	TX	77450-1303		Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			213.10									
	Name of Employer (for Individual) United HealthCare Services Inc		1 ()		Memo Item									
	Receipt For:	Aggregate	Year-to-Date ▼											
	Other (specify)		, 369.10] P	/R Ded	uctio	on (\$106	6.55 Bi-W	/eek	ly)				
<u>с</u> .	Mailing Address 33 FOUR SEASONS DRIVE City State Zip Code ALTON NH 03809-4872 FEC ID number of contributing federal political committee. C	Organization Name		Date of	f Re	eceipt								
	Mailing Address 4316 FREMONT AVENUE SC	DUTH				/) / Y) 17	Y			
					Trans	act	ion ID :	PR2560	3988	84539	5			
		MN	55409-1721		Amount	t of	Each R	leceipt th	is P	'eriod				
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		Aggregate	Year-to-Date V											
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or f	information copied from such Reports and Stai or commercial purposes, other than using the n												
	IAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	JnitedHealth	Group PA	C)								
	Full Name of Individual (Last, First, Middle Initia CRONIN, JAMES, , ,	l) or Full O	rganization Name			Date of Receipt							
ľ	Nailing Address 241 WALLACE RD					03 31 2017							
	Dity BEDFORD	State NH	Zip Code 03110-5144								3 2114539 is Period		
	EC ID number of contributing ederal political committee.	С						- -			192.	30	
	lame of Employer (for Individual) Jnited HealthCare Services Inc		pation (for Individ Ops	ual)		N	lemo	lte	m				
F	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼	576.90	F	P/R Dec	ductio	on (S	\$96.1	5 Bi-We	eekly)		
	Full Name of Individual (Last, First, Middle Initia LUND, BRIAN W, , ,	l) or Full O	rganization Name			Date c	f Re	ceip	ot				
ľ	Nailing Address 464 EAST NORTH AVE					M 03	/	D	31	/ Y	y y 2017	Y	
	Dity GRANTSBURG	State WI	Zip Code 54840-7423								5764539 is Period	-	
	EC ID number of contributing ederal political committee.	С						-		-	78.	00	
	Name of Employer (for Individual) Inited HealthCare Services Inc	Occu Dir	upation (for Individ Fax	ual)		N	lemo	lte	m				
F	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	234.00	P	/R Dec	luctio	on (\$	\$39.0	0 Bi-We	ekly)		
	ull Name of Individual (Last, First, Middle Initia	l) or Full O	rganization Name			Date c	f Re	eceip	ot				
ľ	Aailing Address 520 NE 20TH ST # 1010					^M 03	/	D	31	/ Y	2017	Y	
	City WILTON MANORS	State FL	Zip Code 33305-2162								21104539 is Period		
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I	Jame of Employer (for Individual) Jnited HealthCare Services Inc		ipation (for Individ Ben Govt Dntl Sls	,		N	lemc	b Ite	m				
ŀ	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼	234.00	F	P/R De	ducti	on (S	\$39.0	0 Bi-We	eekly)		
su	BTOTAL of Receipts This Page (optional)			••••••				9		y	348.	30	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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				Detailed Summary Page	×	11a		-	1b	-	1c	12	
۸	v information conied from such Departs and Otat	monto	<u> </u>	ot be cold or used by any		13 or tho	<u> </u>	14		1		16	17
	y information copied from such Reports and State for commercial purposes, other than using the na												
\backslash	NAME OF COMMITTEE (In Full)	- - - -			C `								
$\Big/$	UnitedHealth Group Incorporated				(C)								
Α.	Full Name of Individual (Last, First, Middle Initial) BARTON, JACQULYN M, , ,	or Full C	Drgar	nization Name		Date of Receipt							
	Mailing Address 1587 112 TH COURT WEST					м м 03	/		D D 31	/	Y	ү ү 2017	Y
	City	State		Zip Code		Trans	acti	ion	ו ID : F	PR2	5632	1124539	5
	INVER GROVE HEIGHTS	MN		55077-5412	/	Amount	of	Ea	ach Re	ecei	pt this	s Period	
	FEC ID number of contributing federal political committee.	С				_		,			-	200.0	00
	Name of Employer (for Individual)	Occ	upat	ion (for Individual)	-	Me	emo	o It	em				
	United HealthCare Services Inc	VP	Hum	nan Capital Partner									
		ggregate	Yea	ır-to-Date ▼									
	Primary General Other (specify) ▼		-	600.00	P/	'R Dedi	uctio	on	(\$100	.00	Bi-We	eekly)	
B.	Full Name of Individual (Last, First, Middle Initial) MILLER, ARTHUR R, , ,	or Full C	Drgar	nization Name		Date of	Re	ece	eipt				
	Mailing Address 509 W BAY STREET UNIT 306					м м 03	/		D D 31	/	Y	y y 2017	Y
	City	State		Zip Code		Trans	acti	ion	DID:F	PR2	56429	9694539	5
	ТАМРА	FL		33606-2738	A	Amount	of	Ea	ach Re	ecei	pt this	s Period	
	FEC ID number of contributing federal political committee.	С						-			7	76.9	92
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) Mgmt		Me	emo	o It	em				
		Aggregate	Yea	r-to-Date ▼									
	Primary General	-			P/	R Dedu	uctio	on	(\$38.4	6 B	i-Wee	ekly)	
	Other (specify) V		,	230.76									
c.	Full Name of Individual (Last, First, Middle Initial) MACKENZIE, ANDREW C, , ,	or Full C	Organ	nization Name	[Date of	Re	ece	eipt				
	Mailing Address 1912 IRVING AVE S					03 ^M	/	L	D D D 31	/	Y	y y 2017	
		State MN		Zip Code								9714539	5
	MINNEAPOLIS			55403-2823	/	Amount	of	Ea	ach Re	ecei	pt this	s Period	
	FEC ID number of contributing federal political committee.	С				_		y			,	384.6	60
	Name of Employer (for Individual)	Occ	upat	ion (for Individual)		Me	emo	o It	tem				
	United HealthCare Services Inc	Bus	Seg	ment CMO	_								
		Aggregate	Yea	r-to-Date ▼									
	Other (specify)		- y -	1153.80	P,	/R Ded	uctio	ion	(\$192	.30	Bi-W	eekly)	
s	UBTOTAL of Receipts This Page (optional)											661.5	52
Т	OTAL This Period (last page this line number only	/)		·····				- -			_		

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

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				or each category of the Detailed Summary Page		× 11			11I 14	b	11c			17
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	ME OF COMMITTEE (In Full) hitedHealth Group Incorporated	I PAC (I	Uni	tedHealth Group PA	C)									
Full A. SI	Name of Individual (Last, First, Middle Initia VANSON, STEPHEN E, , ,	l) or Full C	Drgai	nization Name	Date of Receipt									
	ling Address 3001 HUNTINGTON COURT						3 ^M	/		31	/ Y	Y 201		Ŷ
City KA		State TX		Zip Code		Tra	ansa	acti	on	ID : I	PR2564	29734	5395	
				77493-1159	_	Amo	unt	of I	Ead	ch Re	eceipt tl	nis Per	iod	
	C ID number of contributing eral political committee.	С							,		-		78.00	C
	ne of Employer (for Individual) ted HealthCare Services Inc		•	ion (for Individual) Acct Mgmt			Me	emo	lte	m				
Rec	ceipt For:	Aggregate	Yea	r-to-Date ▼										
	Primary General Other (specify) ▼		-	234.00		P/R C)edu	uctic	on (\$39.(00 Bi-W	eekly)		
	Name of Individual (Last, First, Middle Initia		Orgai	nization Name		Date	e of	Ree	ceij	ot				
Mai	ling Address 10618 WEST RIVER ROAD					M 0	™ 3	/	D	31	/ Y	y 2017		ŕ
City	,	State		Zip Code		Tra	insa	actio	on	ID : F	PR2564	802645	5395	
BR	OOKLYN PARK	MN		55443-1233		Amo	unt	of I	Ead	ch Re	eceipt tl	nis Per	iod	
	C ID number of contributing eral political committee.	С							,			3	84.60	0
	ne of Employer (for Individual) ed HealthCare Services Inc		•	ion (for Individual) mr & Cust Experience			Me	emo	lte	em				
Rec	eipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 1153.80	F	P/R D	edu	ictio	on (\$192	.30 Bi-V	Veekly)		
	Name of Individual (Last, First, Middle Initia	l) or Full C	Drgai	nization Name		Date	e of	Ree	ceij	ot				
Mai	ling Address 18430 62ND PLACE NORTH						з ^м	/	6	31	/ Y	2017	Y	Y
City		State		Zip Code		Tra	ansa	acti	on	ID :	PR2564	80274	5395	
MA	PLE GROVE	MN		55311-4585	_	Amo	unt	of I	Ead	ch Re	eceipt tl	nis Per	iod	
	C ID number of contributing eral political committee.	С				Ē			,		, <u>,</u>	1	94.00	0
	ne of Employer (for Individual) ted HealthCare Services Inc			ion (for Individual) er Mkt Grp			Me	emo	lte	em				
Rec	eipt For: Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 582.00		P/R [Dedu	uctic	on (\$97.0	00 Bi-W	eekly)		
SUB1	OTAL of Receipts This Page (optional)			•••••					,			6	56.60)
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

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			1	category of the Summary Page	×	11a		11	- H	11c	12	17
	y information copied from such Reports and State for commercial purposes, other than using the na					for the		rpos	se of	soliciting	g contribu	tions
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	JnitedH	ealth Group P/	AC)							
Α.	Full Name of Individual (Last, First, Middle Initial) KENNY, KATHERINE L, , ,	or Full C	organization	Name		Date o	of Re	ecei	ipt			
	Mailing Address 22408 FITZGERALD DRIVE	State	Zip Co	do		03		L	31		2017	
	City LAYTONSVILLE	MD		2-2301							80324539 iis Period	-
	FEC ID number of contributing federal political committee.	С				Amou		La			78.	_
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for VP of Acct N	,		N	lemo	o Ite	em			
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Year-to-Dat	e▼ 234.00] P	/R De	ducti	ion	(\$39.0	00 Bi-We	eekly)	
в.	Full Name of Individual (Last, First, Middle Initial) MARDEN, PAUL O, , ,	or Full C	organization	Name		Date o	of Re	ecei	ipt			
	Mailing Address 718 HICKORY HILL RD	1				^M 03	/		31	/ Y	2017	Y
	City FRANKLIN LAKES	State NJ	Zip Co 07417	de 7-1707							30334539 iis Period	
	FEC ID number of contributing federal political committee.	С						-		- 7	78.	00
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Plan CEO	Individual)		N	/lemo	o Ite	em			
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Year-to-Dat	e ▼ 234.00	P	/R Deo	ductio	ion	(\$39.0)0 Bi-We	eekly)	
с.	Full Name of Individual (Last, First, Middle Initial)	or Full C	organization	Name		Date d	of Re	ecei	ipt			
	Mailing Address 5004 ARDEN AVE	I				^M 03		L	^D 31	L	ү ү 2017	
	City EDINA	State MN	Zip Co	de I-1314							80344539	
	FFC ID number of contributing	С				Amour		Ea		eceipt tr	iis Period 311.	_
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Segment C	,		N	/lemo	o It	em			
	Receipt For: A Primary General Other (specify)	Aggregate	Year-to-Dat	e ▼ 696.00]	P/R De	ducti	ion	(\$215	5.20 Bi-V	Veekly)	
s	UBTOTAL of Receipts This Page (optional)				•			,			467.	36
т	OTAL This Period (last page this line number only	y)			•			-		-		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)	
			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1
	y information copied from such Reports and Sta for commercial purposes, other than using the			erson for the purpose of soliciting contributions
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	AC)
A.	Full Name of Individual (Last, First, Middle Initia O'HARE, TAMMY A, , ,	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 2420 SAINT GEORGE WAY			M M / D D / Y Y Y Y 03 31 2017
	City BROOKEVILLE	State MD	Zip Code 20833-3265	Transaction ID : PR2564803945395 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		78.00
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) VP SIs	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 234.00	P/R Deduction (\$39.00 Bi-Weekly)
в.	Full Name of Individual (Last, First, Middle Initia BERNS, DEBRA J, , ,	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 3209 GALLERIA UNIT 1705	Otata	Zie Oode	03 / D D / Y Y Y Y 2017
	City EDINA	State MN	Zip Code 55435-2556	Transaction ID : PR2564804045395 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		384.60
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef CompInc/Ethics Off	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)
с.	Full Name of Individual (Last, First, Middle Initia WICKS, TIMOTHY A, , ,	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 2600 WEST LAFAYETTE ROA PO BOX 454 City	D State	Zip Code	03 / D D / Y Y Y Y 31 2017 Transaction ID : PR2565448645395
	EXCELSIOR	MN	55331-9417	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		76.92
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) oOptumRx	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)
	UBTOTAL of Receipts This Page (optional)			539.52

Use separate schedule(s)

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		Use separate schedule(s)	(ch	neck only	y or	ne)	(check only one)						
11			for each category of the Detailed Summary Page	3	× 11a 13		11b	11c	12	17			
	y information copied from such Reports and Sta for commercial purposes, other than using the r				for the		pose of	soliciting	contribu	tions			
$\left\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (L	JnitedHealth Group P	AC)									
A.	Full Name of Individual (Last, First, Middle Initia ZAMORE, DENISE V, , ,	al) or Full O	rganization Name		Date of	Re	ceipt						
	Mailing Address 180 FELT ROAD				03	1	D D 31	/ Y	ү 2017	Y			
	City SOUTH WINDSOR	State CT	Zip Code 06074-3864					PR25671 eceipt th					
	FEC ID number of contributing federal political committee.	C					т. I.	-	192.	30			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ssc Gen Counsel		Me	emo	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90] '	P/R Ded	uctio	on (\$96.	15 Bi-We	ekly)				
в.	Full Name of Individual (Last, First, Middle Initia ARNONE, WENDY D, , ,	al) or Full Oi	rganization Name		Date of	Re							
	Mailing Address 5243 E DESERT PARK LANE	State	Zip Code		03		31	J L	2017				
	PARADISE VALLEY	AZ	85253-3015				-	PR25689 eceipt th		-			
	FEC ID number of contributing federal political committee.	С							384.	_			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In CEO		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80] 「	P/R Dedu	uctio	on (\$192	2.30 Bi-W	'eekly)				
с.	Full Name of Individual (Last, First, Middle Initia PARRILLO, CHRISTOPHER A, , ,	al) or Full O	rganization Name		Date of	Re	ceipt						
	Mailing Address 9501 WEXCROFT DRIVE				03	1	31		2017 ^Y				
	City BRENTWOOD	State TN	Zip Code 37027-3824					PR25717 eceipt th					
	FEC ID number of contributing federal political committee.	С			<u> </u>		,	9	76.	92			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ntwk Contrctng		Me	emc	tem						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	1	P/R Ded	ucti	on (\$38.	.46 Bi-We	ekly)				
\vdash	UBTOTAL of Receipts This Page (optional)		,		ļ.		5	<u> </u>	653.	82			
Т	OTAL This Period (last page this line number or	nly)	······]										

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ודכ			Use separate schedule(s)	(check only one)						
			for each category of the Detailed Summary Page	X 11a 11b 11c 12	1					
Any	information copied from such Reports and	Statements ma	ay not be sold or used by any p	13 14 15 16 erson for the purpose of soliciting contributions to solicit contributions from such committee.	17 ;;					
<u> </u>	IAME OF COMMITTEE (In Full)									
	JnitedHealth Group Incorporat	ed PAC (l	JnitedHealth Group PA	AC)						
A	ull Name of Individual (Last, First, Middle Ir MOYER, BRUCE E, , ,	nitial) or Full O	rganization Name	Date of Receipt						
_	failing Address 4242 BROADWAY #802			03 / D D / Y Y Y Y 03 31 2017						
	Sity SAN ANTONIO	State TX	Zip Code 78209-6463	Transaction ID : PR2571778345395 Amount of Each Receipt this Period						
	EC ID number of contributing ederal political committee.	C		78.00						
C	lame of Employer (for Individual) Dptum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item						
F	Receipt For: Primary General Other (specify) V	Aggregate	Year-to-Date ▼ 234.00	P/R Deduction (\$39.00 Bi-Weekly)						
Б	ull Name of Individual (Last, First, Middle Ir HINTON, DUSTIN, , ,	nitial) or Full O	rganization Name	Date of Receipt						
_	Aailing Address W132N6475 MARACH RD			03 / D D / Y Y Y Y Y 2017						
		State WI	Zip Code	Transaction ID : PR2571978745395						
			53051-6085	Amount of Each Receipt this Period	_					
	EC ID number of contributing ederal political committee.	С		100.00						
	Jame of Employer (for Individual) Inited HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item						
F	Receipt For:	Aggregate	Year-to-Date ▼							
	Other (specify)		300.00	P/R Deduction (\$50.00 Bi-Weekly)						
	ull Name of Individual (Last, First, Middle Ir CARLSON, KEVIN JAMES, , ,	hitial) or Full O	rganization Name	Date of Receipt						
Ν	Aailing Address 4511 BROWNDALE AVENU			03 / D D / Y Y Y Y 03 31 2017						
	City EDINA	State MN	Zip Code 55424-1142	Transaction ID : PR2572590045395 Amount of Each Receipt this Period						
	EC ID number of contributing ederal political committee.	С		192.30						
ι	lame of Employer (for Individual) Jnited HealthCare Services Inc		upation (for Individual) Ntwk Contrctng	Memo Item						
F	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)						
SU	BTOTAL of Receipts This Page (optional)			370.30						
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

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				or each category of the Detailed Summary Page	×	11a	a] 11 14	ŀ		11c 15	12	17
	y information copied from such Reports and Stater for commercial purposes, other than using the nan					or t			pos	se of		oliciting	contribu	utions
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (I	Uni	tedHealth Group PA	C)									
Α.	Full Name of Individual (Last, First, Middle Initial) WIFFLER, THOMAS P, , ,	or Full C	Orgai	nization Name	[Date	of	Re	ecei	ipt				
	Mailing Address 1421 SOMERFIELD DRIVE					[™] 0		/	Ľ	D 31)	/ Y	y y 2017	Y
	5	State		Zip Code		Tra	insa	acti	ion	ID :	PF	R25729	927453	95
	BOLINGBROOK	IL		60490-3207	_	٩mo	unt	of	Ea	ach F	Rec	eipt thi	s Period	k
	FEC ID number of contributing federal political committee.	0							-			-	384	.60
	Name of Employer (for Individual)		•	ion (for Individual) gment COO			Me	emo) Ite	em				
	United HealthCare Services Inc Receipt For:			-	_									
	Primary General Other (specify) ▼	gregate	Yea	r-to-Date ▼ 1153.80	P/	/R D	edu	uctio	on	(\$19	2.3	80 Bi-W	eekly)	
в.	Full Name of Individual (Last, First, Middle Initial)	or Full C	Orgai	nization Name		Date	of	Re	ecei	ipt				
	Mailing Address 3111 NORCREST AVE N					[™] 0		/	Γ	D 10 31		/ Y	2017	Y
	City STILLWATER	State MN		Zip Code 55082-1779									850453 9 s Period	
	FEC ID number of contributing federal political committee.	0							-			-7-	76	.92
	Name of Employer (for Individual) Optum Services, Inc		•	tion (for Individual) I Clin Ops			Me	emo) Ite	em				
	Receipt For: Ag Primary General Other (specify) ▼	ggregate	Yea	ur-to-Date ▼ 230.76	P/	′R D	edu	uctic	on	(\$38.	.46	Bi-We	ekly)	
с.	Full Name of Individual (Last, First, Middle Initial)	or Full C	Drgar	nization Name		Date	of	Re	ecei	ipt				
	Mailing Address 2799 WEST BARDONNER ROAD					0	3 3	/	Ľ	31		/ Y	2017 [°]	Y
	5	State PA		Zip Code									862453	
	GIBSONIA	r'A		15044-8462	/	٩mo	unt	of	Ea	ach F	Rec	eipt thi	s Period	kk
	FEC ID number of contributing federal political committee.	0						_	y			y	384	.60
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) n Ops		Ц	Me	emo	o It	em				
	Receipt For: Ag Primary General Other (specify)	ggregate	Yea	r-to-Date ▼ 1153.80	P	/R C)edu	uctio	on	(\$19	2.3	30 Bi-W	eekly)	
S	UBTOTAL of Receipts This Page (optional)												846	.12
т	OTAL This Period (last page this line number only)			·····	Í				-			Ŧ		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than usin			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpc	orated PAC (I	JnitedHealth Group PA	AC)
Full Name of Individual (Last, First, Midd BURNETT, JAMIE, , ,	,	rganization Name	Date of Receipt
Mailing Address 4625 EWING AVENUE		Zin Oada	03 / D D / Y Y Y Y 2017
City MINNEAPOLIS	State MN	Zip Code 55410-1745	Transaction ID : PR2574988245395 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		78.00
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) IT	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 234.00	P/R Deduction (\$39.00 Bi-Weekly)
Full Name of Individual (Last, First, Midd LANG JACOBSEN, HEATHER		organization Name	Date of Receipt
Mailing Address 11382 MOUNT CURVE			03 31 YYYYY 2017
City EDEN PRAIRIE	State MN	Zip Code 55347-2918	Transaction ID : PR2574991445395 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		76.92
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) buty Gen Counsel Mgr	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)
Full Name of Individual (Last, First, Midd ALLAZETTA, DAVID W, , ,	lle Initial) or Full C	organization Name	Date of Receipt
Mailing Address 339 DARTMOUTH HILL	I		03 / D D / Y Y Y Y 2017
City LAS VEGAS	State NV	Zip Code 89138-1544	Transaction ID : PR2574995445395 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		192.30
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)
SUBTOTAL of Receipts This Page (option	al)		347.22
TOTAL This Period (last page this line nur	mber only)	·····	

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	Use separate schedule(s)	(check only one)	
		for each category of the Detailed Summary Page	X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using t			13 14 15 16 1 erson for the purpose of soliciting contributions a to solicit contributions from such committee
	ine name and a		
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P	AC)
Full Name of Individual (Last, First, Middle WILLIAMS, JOSEPH RANDY, , ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 3221 FORSYTH DRIVE			03 / D D / Y Y Y Y 2017
City GREENSBORO	State NC	Zip Code 27407-7221	Transaction ID : PR2575008845395 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		219.78
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) R Reg VP of SIs	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 373.62	P/R Deduction (\$181.32 Bi-Weekly)
Full Name of Individual (Last, First, Middle DUNCAN, MICHELE M, , ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 3038 FAIRWAY CIRCLE			03 / D D / Y Y Y Y Y 2017
City CHASKA	State MN	Zip Code 55318-3408	Transaction ID : PR2575029645395
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Compli	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. VAN HOLMES, LORI A, , ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 4117 BRYANT AVENUE Se			03 / D D / Y Y Y Y 2017
City MINNEAPOLIS	State MN	Zip Code 55409-1423	Transaction ID : PR2575030945395 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		194.00
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Human Capital Dev	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 582.00	P/R Deduction (\$97.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional).			798.38
TOTAL This Period (last page this line number	er only)		

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

FOR LINE NUMBER:

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	Use separate schedule(s)	(check only one)						
II LIVIIZED KEGEIF 13		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports an or for commercial purposes, other than using			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P/	4C)					
Full Name of Individual (Last, First, Middle O'BRIEN, JENNIFER M, , ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 4371 BENT TREE LANE			03 31 Y Y Y Y Y Y 03 31 2017					
City EAGAN	State MN	Zip Code 55123-3054	Transaction ID : PR2575034545395 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		384.60					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef Compli Off	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. LINDSAY, VIVIAN M, , ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 14930 SW 39 ST			03 / D D / Y Y Y Y Y 2017					
City DAVIE	State FL	Zip Code 33331-2767	Transaction ID : PR2575054945395 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		192.30					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Ops	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)					
Full Name of Individual (Last, First, Middle CLACKO, MARY ANN GAVINS		rganization Name	Date of Receipt					
Mailing Address 6358 COTEAU TRAIL			03 / D D / Y Y Y Y 2017					
City EDEN PRAIRIE	State MN	Zip Code 55344-5205	Transaction ID : PR2575057945395 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		76.92					
Name of Employer (for Individual) Optum Services, Inc Receipt For:		upation (for Individual) Compli	Memo Item					
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			653.82					
TOTAL This Period (last page this line numb	per only)							

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

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	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12								
			Detailed Summary Faye	13 14 15 16 17								
or	r information copied from such Reports and Sta for commercial purposes, other than using the n	tements ma name and ac	y not be sold or used by any p Idress of any political committe	e to solicit contributions from such committee.								
\setminus	NAME OF COMMITTEE (In Full)	//										
/	UnitedHealth Group Incorporated	I PAC (L	InitedHealth Group P/	AC)								
١.	Full Name of Individual (Last, First, Middle Initia MCCARTY, CARY J, , ,	l) or Full Or	ganization Name	Date of Receipt								
	Mailing Address 8800 RUMFIELD RD	1		03 / D D / Y Y Y Y 03 31 2017								
		State TX	Zip Code	Transaction ID : PR2575059445395								
	NORTH RICHLAND HILLS		76182-6131	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		78.00								
	Name of Employer (for Individual) United HealthCare Services Inc		pation (for Individual) Sen Mgmt	Memo Item								
	Receipt For:		Year-to-Date ▼									
	Primary General Other (specify) ▼		234.00	P/R Deduction (\$39.00 Bi-Weekly)								
	Full Name of Individual (Last, First, Middle Initia	l) or Full Or	ganization Name	Date of Receipt								
	Mailing Address 11359 ENTREVAUX DRIVE			03 31 2017								
	City	State	Zip Code	Transaction ID : PR2575060245395								
	EDEN PRAIRIE	MN	55347-2862	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		76.92								
	Name of Employer (for Individual) Jnited HealthCare Services Inc		ipation (for Individual) Gen Mgmt	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 230.76	P/R Deduction (\$38.46 Bi-Weekly)								
	Full Name of Individual (Last, First, Middle Initia ZAETTA, CHRISTOPHER ROBER		ganization Name	Date of Receipt								
	Mailing Address 5840 RIDGE ROAD			03 31 2017								
	City	State	Zip Code	Transaction ID : PR2575068345395								
	EXCELSIOR	MN	55331-8153	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		454.54								
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item								
	United HealthCare Services Inc		Segment Gen Counsel									
	Primary General	Aggregate	Year-to-Date ▼ 454.54	P/R Deduction (\$227.27 Bi-Weekly)								
	Other (specify)			1								
	JBTOTAL of Receipts This Page (optional)			609.46								

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
			person for the purpose of soliciting contributions te to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorp	orated PAC (l	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Mid A. NICHOLS, SANDRA B, , ,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 12706 YOUNG LANE			03 31 2017						
City NORTH POTOMAC	State MD	Zip Code 20878-6112	Transaction ID : PR2575074545395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		192.30						
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Sha	upation (for Individual) red Svs Regn CMO	Memo Item						
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)						
Full Name of Individual (Last, First, Mid B. UPCHURCH, KAREN A, , ,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 5023 OAKMONT PLAC			03 / D D / Y Y Y Y 03 31 2017						
City WESTERVILLE	State OH	Zip Code 43082-8781	Transaction ID : PR2575084445395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Mid C. WHEELER, TISA, , ,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1750 FM 423 # 722			03 / D D / Y Y Y Y 03 / 31 2017						
City FRISCO	State TX	Zip Code 75033-0522	Transaction ID : PR2575138545395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		95.70						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Clin Ops	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 243.10	P/R Deduction (\$47.85 Bi-Weekly)						
SUBTOTAL of Receipts This Page (option	' nal)		364.92						
TOTAL This Period (last page this line nu	imber only)								

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle DEWALL, PATRICK J, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 7662 RIDGEVIEW WAY			M M / D D / Y Y Y Y 03 31 2017						
City CHANHASSEN	State MN	Zip Code 55317-4507	Transaction ID : PR2575145345395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		192.30						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) outy Gen Counsel Mgr	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. JONES, RON, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 10066 ESCAMBIA BAY CT			03 / D D / Y Y Y Y Y 2017						
City NAPLES	State FL	Zip Code 34120-4621	Transaction ID : PR2575163545395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		250.00						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P CInt Relationship	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	P/R Deduction (\$125.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. HAMANN, CHAD A, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 7638 RIDGEVIEW WAY			03 / D D / Y Y Y Y Y 2017						
City CHANHASSEN	State MN	Zip Code 55317-4507	Transaction ID : PR2575170145395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		267.39						
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) Tax	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 421.23	P/R Deduction (\$228.93 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			709.69						
TOTAL This Period (last page this line numb	er only)								

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171			Use separate schedule(s)	(check only one)						
111	EIVILLED RECEIPIS		for each category of the Detailed Summary Page							
	y information copied from such Reports and Sta for commercial purposes, other than using the r									
	NAME OF COMMITTEE (In Full)									
$\Big\rangle$	UnitedHealth Group Incorporated	d PAC (l	UnitedHealth Group PA	NC)						
Α.	Full Name of Individual (Last, First, Middle Initia MCGUIRE, THOMAS J, , ,	al) or Full O	Drganization Name	Date of Receipt						
	Mailing Address 41 CUMBERLAND ROAD			03 / D D / Y Y Y Y 03 31 2017						
	City WEST HARTFORD	State CT	Zip Code 06119-1121	Transaction ID : PR2575185445395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.				384.60						
United HealthCare Services Inc Si			cupation (for Individual) Deputy Gen Counsel	Memo Item						
			Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
в.	Full Name of Individual (Last, First, Middle Initia DEMARIS, PETER JOHN, , ,	al) or Full O	Drganization Name	Date of Receipt						
	Mailing Address 2301 OLIVER AVE S			03 / D D / Y Y Y Y 2017						
	City MINNEAPOLIS	State MN	Zip Code 55405-2448	Transaction ID : PR2575191845395 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		76.92						
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) Mktg eComm	Memo Item						
Dessint For			Year-to-Date ▼ , 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Initia STAMM, MICHAEL PATRICK, , ,	al) or Full O	Drganization Name	Date of Receipt						
	Mailing Address 6721 MOSSY GLEN DR			03 / D D / Y Y Y Y 2017						
	City FORT MYERS	State FL	Zip Code 33908-4771	Transaction ID : PR2575194645395 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		80.00						
	Name of Employer (for Individual) United HealthCare Services Inc		cupation (for Individual) 9 Ops	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 240.00	P/R Deduction (\$40.00 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)			541.52						
т	OTAL This Period (last page this line number or	וy)	•							

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		Use separate schedule(s)	(check only one)						
ILEIVILLED RECEIPIO		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle GRANBERG, MITCHELL W, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 6721 GALWAY DRIVE			03 31 Y Y Y Y Y 2017						
City EDINA	State MN	Zip Code 55439-1313	Transaction ID : PR2575196145395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		192.30						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) outy Gen Counsel Mgr	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. FRANCIS, KEVIN B, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 15815 MINNETONKA BLVE			M M / D D / Y Y Y Y 03 31 2017						
City MINNETONKA	State MN	Zip Code 55345-1410	Transaction ID : PR2575203345395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		267.39						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Acct Svs	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 421.23	P/R Deduction (\$228.93 Bi-Weekly)						
Full Name of Individual (Last, First, Middle SHORS, MATTHEW MACKINN		rganization Name	Date of Receipt						
Mailing Address 4649 EWING AVENUE SO			03 / D D / Y Y Y Y Y 2017						
City MINNEAPOLIS	State MN	Zip Code 55410-1745	Transaction ID : PR2575222345395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:		upation (for Individual) Deputy Gen Counsel	Memo Item						
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional).			844.29						
TOTAL This Period (last page this line number	er only)								

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
Any information copied from such Reports and or for commercial purposes, other than using			13 14 15 16 17 verson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)	, and enrole								
UnitedHealth Group Incorpora	ated PAC (JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle GILPIN JR, HOWARD CHARLES, , ,	Initial) or Full C	Prganization Name	Date of Receipt						
Mailing Address 1210 SHEPARD DRIVE			03 / D D / Y Y Y Y 03 31 2017						
City BLUE BELL	State PA	Zip Code 19422-3481	Transaction ID : PR2575224945395						
FEC ID number of contributing			Amount of Each Receipt this Period						
federal political committee.	C		78.00						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Act Cnslt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 234.00	P/R Deduction (\$39.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle BAILEY, DAVID, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 36 OLD MIDDLESEX RD			03 / D D / Y Y Y Y 03 31 2017						
City BELMONT	State MA	Zip Code 02478-3457	Transaction ID : PR2575228245395						
FEC ID number of contributing	_	02470-3437	Amount of Each Receipt this Period						
federal political committee.	C		365.00						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ben KA SB VP SIs AM	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify)		365.00	P/R Deduction (\$365.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. CHOATE, THOMAS C, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 8222 STONE MASON CT			03 / D D / Y Y Y Y 03 31 2017						
City WINDERMERE	State FL	Zip Code 34786-5624	Transaction ID : PR2575247845395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n CEO	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			519.92						
TOTAL This Period (last page this line numb	er only)								

Use separate schedule(s)

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	,	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	४ 11a ☐ 11b ☐ 11c ☐ 12							
Any information copied from such	Reports and Statements ma	y not be sold or used by any p	13 14 15 16 17 erson for the purpose of soliciting contributions							
		ddress of any political committee	e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full		JnitedHealth Group PA	AC)							
Full Name of Individual (Last, F A. SHETTY, PRASANNA, , ,	irst, Middle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 41 HOYA ST			M M / D D / Y Y Y Y Y 03 31 2017							
City RANCHO MISSION VIEJO	State CA	Zip Code 92694-1283	Transaction ID : PR2575252045395 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		76.92							
Name of Employer (for Individua Optum Services, Inc	,	upation (for Individual) IT Sys Anlys	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, F B. KORF, GRETCHEN R, ,		rganization Name	Date of Receipt							
Mailing Address 2120 WESTON			M M / D D / Y							
City PLYMOUTH	State MN	Zip Code 55447-2372	Transaction ID : PR2575252245395 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		384.62							
Name of Employer (for Individua United HealthCare Services Inc	,	upation (for Individual) External Affs	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.54	P/R Deduction (\$192.31 Bi-Weekly)							
Full Name of Individual (Last, F C. BEAUREGARD, THOM		rganization Name	Date of Receipt							
Mailing Address 161 SPRING V			03 / D D / Y Y Y Y Y 2017							
City RIDGEFIELD	State CT	Zip Code 06877-1219	Transaction ID : PR2575295145395 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		384.60							
Name of Employer (for Individua United HealthCare Services Inc		upation (for Individual) Innovation	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page	e (optional)		846.14							
TOTAL This Period (last page this	s line number only)									

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle I CORN, BARBARA, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 12931 SUNSET BLUFF CT			03 31 2017						
City SAINT LOUIS	State MO	Zip Code 63127-1303	Transaction ID : PR2575297345395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I CUEVAS, BRANDON E, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 25 STRATHMORE			03 / D D / Y Y Y Y Y 2017						
City LADERA RANCH	State CA	Zip Code 92694-0549	Transaction ID : PR2575305645395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) gn CEO	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I HUNT, BRADLEY W, , ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 6636 W SHORE DR			03 / D D / Y Y Y Y Y 2017						
City EDINA	State MN	Zip Code 55435-1529	Transaction ID : PR2575310445395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		192.30						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CMO	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			653.82						
TOTAL This Period (last page this line number	er only)								

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
			berson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P	4C)							
Full Name of Individual (Last, First, Middl GOLDBERG, JEFFREY A, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 3410 BRADLEY LANE			M M / D D / Y Y Y Y Y							
City	State	Zip Code	03 31 2017							
CHEVY CHASE	MD	20815-3262	Transaction ID : PR2575326945395 Amount of Each Receipt this Period							
FEC ID number of contributing	С		78.00							
federal political committee.	U									
Name of Employer (for Individual)		upation (for Individual)	Memo Item							
Optum Services, Inc Receipt For:	VP	Business Development Exe								
Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$39.00 Bi-Weekly)							
Other (specify) v		234.00	The Deduction (\$33.00 Driveekly)							
Full Name of Individual (Last, First, Middl 3. VAN HAM, COLLEEN HASTING	e Initial) or Full O SS	rganization Name	Date of Receipt							
Mailing Address 727 N EVERGREEN AVE										
	-		03 31 2017							
City	State	Zip Code	Transaction ID : PR2575341945395							
ARLINGTON HEIGHTS	IL	60004-5566	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middl	e Initial) or Full O	rganization Name								
c. TELESKY, MICHAEL J, , ,			Date of Receipt							
Mailing Address 2602 PENNINGTON PLA	ACE		03 31 2017							
City	State	Zip Code	Transaction ID : PR2575350945395							
VALPARAISO	IN	46383-9163	Amount of Each Receipt this Period							
FEC ID number of contributing	С		78.00							
federal political committee.	0									
Name of Employer (for Individual)		upation (for Individual)	Memo Item							
United HealthCare Services Inc Receipt For:	I	/P SIs Acct Mgmt	_							
Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$39.00 Bi-Weekly)							
Other (specify)		234.00								
SUBTOTAL of Receipts This Page (optiona	J)		540.60							
	,									
TOTAL This Period (last page this line num	ber only)	······]	•							

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a ☐ 11b ☐ 11c ☐ 12
			13 14 15 16 17 erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	-		e to solicit contributions from such committee.
Full Name of Individual (Last, First, Middl A. WINKLER, YASMINE, , ,	-	rganization Name	Date of Receipt
Mailing Address 1429 WEST WIGWAM T	State	Zip Code	03 / 0 / Y Y Y Y 03 / 31 2017 Transaction ID : PR2575390945395
MOUNT PROSPECT	IL	60056-2940	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		76.92
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) In CEO	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)
Full Name of Individual (Last, First, Middl B. BRATTEBO, CRAIG L, , ,	e Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 10202 HARMONY CIRCI	.E		03 31 Y Y Y Y Y 2017
City EDEN PRAIRIE	State MN	Zip Code 55347-5019	Transaction ID : PR2575397245395 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.30
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) outy Gen Counsel Mgr	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)
Full Name of Individual (Last, First, Middl c. MCGAVICK, KEVIN M, , ,	e Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 705 NOTTINGHAM COU			03 / D D / Y Y Y Y 2017
City CRANBERRY TOWNSHIP	State PA	Zip Code 16066-6527	Transaction ID : PR2575421945395 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		76.92
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) S RVP Sales	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)
SUBTOTAL of Receipts This Page (optiona	l)		346.14
TOTAL This Period (last page this line num	nber only)	•	

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 70 OF

	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
Any information copied from such Reports and or for commercial purposes, other than using			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
> UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)						
Full Name of Individual (Last, First, Middle A. O'HARA, KARIN R, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1431 HENRY COURT									
City	State	Zip Code	03 31 2017						
CHANHASSEN	MN	55317-2200	Transaction ID : PR2575428745395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		76.92						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Acctng	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle CASTILLO, EFREM, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 307 JOLIET AVE			03 31 Y Y Y Y Y 2017						
City SAN ANTONIO	State TX	Zip Code 78209-5243	Transaction ID : PR2575441345395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		384.60						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) s Seg Chief Med Off	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	_						
Other (specify) ▼		1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Middle AXBERG, PAMELA JEAN STE		rganization Name	Date of Receipt						
Mailing Address 1427 BROOKSHIRE COU	1		03 / D D / Y Y Y Y Y 2017						
City NEW BRIGHTON	State MN	Zip Code 55112-6390	Transaction ID : PR2575443845395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		454.54						
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) 9 Ops	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 454.54	P/R Deduction (\$227.27 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			916.06						
TOTAL This Period (last page this line numb	er only)								

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

FOR LINE NUMBER:

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TEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)							
Full Name of Individual (Last, First, Middle SPILKER, TIMOTHY M, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 9801 MOHAWK LANE			03 31 2017							
City LEAWOOD	State KS	Zip Code 66206-2432	Transaction ID : PR2575446345395 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n CEO	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle HAUTMAN, MILLA, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 410 SYCAMORE CIRCLE			03 31 / Y Y Y Y Y 2017							
	State MN	Zip Code	Transaction ID : PR2575447145395							
PLYMOUTH	IVIIN	55441-5667	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		192.30							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ef Tech Off	Memo Item							
Receipt For:	Aggregate	Year-to-Date V								
Other (specify) ▼		576.90	P/R Deduction (\$96.15 Bi-Weekly)							
Full Name of Individual (Last, First, Middle BOOKER, ROBERT E, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 16632 HANSON BLVD NV	V		03 / D D / Y Y Y Y Y 2017							
City ANDOVER	State MN	Zip Code 55304-2089	Transaction ID : PR2575447245395 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		250.79							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 264.83	P/R Deduction (\$236.75 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			827.69							
TOTAL This Period (last page this line numb	er only)									

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		Use separate schedule(s)	(checl	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X	H	_	11b	11c	12	<u> </u>		
Any information copied from such Reports and or for commercial purposes, other than using t			erson for		ourpo						
NAME OF COMMITTEE (In Full)					uibu		UIII SUCI	Commu			
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, Middle I MURPHY, ERIC D, , ,	nitial) or Full C	organization Name	Da	te of	Rec	eipt					
Mailing Address 5201 BLAKE ROAD			N	03	1	D D D 31	/ Y	2017	Y		
City EDINA	State MN	Zip Code 55436-1127						15374539 is Period	5		
FEC ID number of contributing federal political committee.	С			_				384.0	60		
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) erprise Growth Officer		Me	mo	Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R	Dedu	ctior	n (\$192	2.30 Bi-W	/eekly)			
Full Name of Individual (Last, First, Middle I B. HOWELL, NICHOLAS F, , ,	nitial) or Full C	organization Name	Da	te of	Rec	eipt					
Mailing Address 300 ORANGE GROVE AVE			IV	03 [™]	/	D D 31	/ Y	2017	Y		
City SOUTH PASADENA	State CA	Zip Code 91030-1616						1004539	5		
FEC ID number of contributing federal political committee.	С			iount				415.8	86		
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) P Optuml Cnslt		Me	mo	Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 841.18	P/R	Dedu	ctior	n (\$207	.93 Bi-W	'eekly)			
Full Name of Individual (Last, First, Middle I C. JOSEPH, MOLLY E, , ,	nitial) or Full C	organization Name	Da	te of	Rec	eipt					
Mailing Address 9209 GRAND SUMMIT BLV	/D		N	03 ^M	/	D D 31	/ Y	2017	Y		
City DRIPPING SPRINGS	State TX	Zip Code 78620-2882				-		52174539 is Period	5		
FEC ID number of contributing federal political committee.	С			_	,		, ,	384.0	00		
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP 0	upation (for Individual) Ops		Me	mo	ltem					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1152.00	P/R	Dedu	ictio	n (\$192	2.00 Bi-W	/eekly)			
SUBTOTAL of Receipts This Page (optional)							9	1184.4	46		
TOTAL This Period (last page this line number	er only)										

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II EIVIIZED RECEIFIO		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17										
Any information copied from such Reports and or for commercial purposes, other than using the	Statements mand a	I ay not be sold or used by any p Iddress of any political committe	person for the purpose of soliciting contributions										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P	AC)										
Full Name of Individual (Last, First, Middle I A. HEBERT, PAUL B, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 13 GOVERNORS ROW			03 / D D / Y Y Y Y 2017										
City WEST HARTFORD	State CT	Zip Code 06117-1931	Transaction ID : PR2575522345395 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		250.00										
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) Fin	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	P/R Deduction (\$125.00 Bi-Weekly)										
Full Name of Individual (Last, First, Middle I DI RE, BERNADETTE, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 1 NORFOLK LANE			03 / 01 / 2017 Transaction ID : PP2575522545395										
City HOLLISTON	State MA	Zip Code 01746-2362	Transaction ID : PR2575522545395 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		76.92										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Plan CEO	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Middle I c. GREENBERG, JASON E, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 630 STILSON CANYON RC			03 / D D / Y Y Y Y 2017										
City CHICO	State CA	Zip Code 95928-9179	Transaction ID : PR2575526745395 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		192.30										
Name of Employer (for Individual) Optum Services, Inc Receipt For:		upation (for Individual) CInt Svc Acct Mgt	Memo Item										
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)			519.22										
TOTAL This Period (last page this line numbe	er only)												

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11			for each category Detailed Summary		X 11a		11b	11c	12	Г	17				
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements mane and a	ay not be sold or use address of any politica	ed by any per al committee	son for th	e pur contrit	pose of	soliciting	contri	butio	ns				
\setminus	NAME OF COMMITTEE (In Full)				•										
	UnitedHealth Group Incorporate	d PAC (I	UnitedHealth G	Froup PAG	(ئ										
<u>к</u>	Full Name of Individual (Last, First, Middle Initi HOLOVNIA, KRISTEN NOEL ANDERSC		Organization Name		Date	of Re	eceipt								
	Mailing Address 4610 LAKEVIEW DRIVE				M 03		D D 31	/ Y	2017		1				
	City EDINA	State MN	Zip Code 55424-1518		Transaction ID : PR2575533045395 Amount of Each Receipt this Period										
			00424 1010	_	_ Amou	int of	Each R	eceipt th	is Peri	od	_				
	FEC ID number of contributing federal political committee.	С			l L		-y		19	92.30					
	Name of Employer (for Individual)		upation (for Individua	,		Memo	o Item								
	United HealthCare Services Inc	Dep	outy Gen Counsel Mgr		_										
	Receipt For: Primary General	Aggregate	Year-to-Date ▼				(¢ 00		-1.1.3						
	Other (specify) ▼			576.90	P/R De	eaucti	ion (\$96. ⁻	15 BI-WE	екіу)						
	Full Name of Individual (Last, First, Middle Initi	al) or Full C	Drganization Name												
В.	HILL, JANE B, , ,				Date	of Re	eceipt								
	Mailing Address 34301 299TH PLACE	State	Zip Code		03 31 2017 Transaction ID : PR2575533145395										
	AITKIN	MN	56431-5914				ion ID : I Each Re								
	FEC ID number of contributing federal political committee.	С						00 76.92							
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individua Compli	Memo Item											
	Receipt For:		Year-to-Date ▼		_										
	Primary General Other (specify) ▼		A I A I	230.76	P/R De	educti	on (\$38.4	46 Bi-We	ekly)						
<u></u> с.	Full Name of Individual (Last, First, Middle Initi HAMLIN, THOMAS A, , ,	al) or Full C	Drganization Name		Date	of Re	eceipt								
	Mailing Address 2800 NEWMAN				03	3	D D D 31	JL	2017]				
	City HOUSTON	State TX	Zip Code 77098-1408				tion ID :								
			11000 1400	_	Amou	int of	Each R	eceipt th	is Peri	od	_				
	FEC ID number of contributing federal political committee.	С			l L		y	<u> </u>	7	76.92	_				
	Name of Employer (for Individual) Optum Services, Inc		cupation (for Individua Behvrl Med Dir	l)		Mem	o Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼	230.76	P/R Deduction (\$38.46 Bi-Weekly)										
\vdash	UBTOTAL of Receipts This Page (optional)					-	9 1 9 1		34	16.14					

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		Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17										
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions										
NAME OF COMMITTEE (In Full)		,											
UnitedHealth Group Incorpora	ted PAC (I	JnitedHealth Group P	AC)										
Full Name of Individual (Last, First, Middle I STEINBRECHER, HOLLY, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 3631 CHESAPEAKE			03 / D D / Y Y Y Y 03 31 2017										
City FRISCO	State TX	Zip Code 75034-0807	Transaction ID : PR2575544545395										
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)										
Full Name of Individual (Last, First, Middle I MOCK, CURTIS A, , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 23 KELTON STREET			03 / D D / Y Y Y Y Y 2017										
City REHOBOTH	State MA	Zip Code 02769-2530	Transaction ID : PR2575579245395										
	_	02103-2330	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		192.30										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Med Dir/CMO	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)										
Full Name of Individual (Last, First, Middle I	nitial) or Full C	rganization Name											
C. WINSOR, ELIZABETH C, , , Mailing Address 57 WILDERS PASS			Date of Receipt										
City CANTON	State CT	Zip Code 06019-2259	Transaction ID : PR2575582845395 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		384.60										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) DNA Acct	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)			769.20										
TOTAL This Period (last page this line numbe	er only)												

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)								
II EIVILED RECEIFIO		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 □								
			e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (l	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middl A. HARRIS, EUGENE M, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 2504 E DOLPHIN DR			03 31 2017								
City OAK ISLAND	State NC	Zip Code 28465-6111	Transaction ID : PR2575585445395 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.92								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) R Reg VP of Brkr Sls	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middl B. IVERSON, LISA M, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 13341 CARRACH AVEN	1		03 / D D / Y Y Y Y 2017								
City ROSEMOUNT	State MN	Zip Code 55068-4774	Transaction ID : PR2575603245395 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment CFO	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Midd C. MCNUTT, DIANE L, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 11524 ZION ROAD			03 / D D / Y Y Y Y 2017								
City BLOOMINGTON	State MN	Zip Code 55437-3636	Transaction ID : PR2575604545395 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Human Capital Partner	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optiona			846.12								
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	EMIZED RECEIPTS			each category of the tailed Summary Page		× 11a		11b	11c	12	<u> </u>							
	y information copied from such Reports and Sta for commercial purposes, other than using the n						ourp											
	NAME OF COMMITTEE (In Full)			s of any political committee	10 3													
\rangle	UnitedHealth Group Incorporated	PAC (l	Jnite	edHealth Group PA	C)													
A.	Full Name of Individual (Last, First, Middle Initia COSTA, JOEL, , ,	l) or Full O	rganiz	ration Name		Date of	Rec	ceipt										
	Mailing Address 775 WESTCHESTER AVENUE				03 / D D / Y Y Y Y 2017													
	City SHAKOPEE	State MN	Z	Zip Code 55379-4557	Transaction ID : PR2575605845395 Amount of Each Receipt this Period													
	FEC ID number of contributing federal political committee.	С						y- 1		230	.76							
	Name of Employer (for Individual) Optum Services, Inc	Occu VP I	•	n (for Individual)		Me	mo	Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-	to-Date ▼ 692.28	P/R Deduction (\$115.38 Bi-Weekly)													
в.	Full Name of Individual (Last, First, Middle Initia BERRY, LAURIE, , ,	l) or Full O	rganiz	ration Name		Date of	Red	ceipt										
	Mailing Address 5411 SCENIC HEIGHTS DRIVE							03 / 31 / 2017 Transaction ID : PR2575611845395										
	City MINNETONKA	State MN	Z	Zip Code 55345-6819	-					51184539 is Period	-							
	FEC ID number of contributing federal political committee.	С		365.00														
	Name of Employer (for Individual) Optum Services, Inc	Occi Ass	Memo Item															
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-	to-Date ▼ 365.00		P/R Dedu	ictio	n (\$365	.00 Bi-W	/eekly)								
С.	Full Name of Individual (Last, First, Middle Initia KING, SARAH D, , ,	l) or Full O	rganiz	ration Name		Date of	Red	ceipt										
	Mailing Address 116 CUTLER ROAD	1				03 ^M	/	D D D 31	/ Y	ү ү 2017	Ŷ							
	City GREENWICH	State CT		ľip Code 06831-2511						6128453 is Perioc								
	FEC ID number of contributing federal political committee.	С				<u> </u>		y .	9	400	.00							
	Name of Employer (for Individual) Optum Services, Inc		upatio Gen M	n (for Individual) Igmt	Memo Item													
	Receipt For: Primary General Other (specify)	Aggregate	Year-	to-Date ▼ 1000.00		P/R Dedu	uctio	on (\$200	.00 Bi-V	/eekly)								
s	UBTOTAL of Receipts This Page (optional)			•••••				, .		995	76							
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	NIZED RECEIPTS		for each category of the Detailed Summary Page		× 11a		11b	11c	12					
	nformation copied from such Reports and Stat commercial purposes, other than using the na													
· · · · · ·	ME OF COMMITTEE (In Full)		address of any political committee	0 10 3					r commu					
	nitedHealth Group Incorporated	PAC (L	UnitedHealth Group P/	AC)										
	ll Name of Individual (Last, First, Middle Initial HOMPSON, BRIAN R, , ,) or Full Oi	Organization Name		Date of	Re	ceipt							
	illing Address 17829 63RD AVE N	1			03	/	31	/ Y	2017	Y				
Cit M	y APLE GROVE	State MN	Zip Code 55311-4650		Transaction ID : PR2575634645395 Amount of Each Receipt this Period									
	C ID number of contributing leral political committee.	С		76.92										
Un	me of Employer (for Individual) ited HealthCare Services Inc		upation (for Individual) Segment CFO		Me	emo	Item							
Re	ceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)										
	II Name of Individual (Last, First, Middle Initial LARK, TERRENCE M, , ,) or Full Oi	Organization Name		Date of	Re	ceipt							
	illing Address 8 COOPER AVENUE	1-		03 / 01 / 2017 Transaction ID : PR2575636945395										
Cit	y DINA	State MN	Zip Code 55436-1315				-			5				
FE	C ID number of contributing	C	33430-1313		Amount of Each Receipt this Period 384.60									
	leral political committee.		upation (for Individual)		Memo Item									
Uni	ited HealthCare Services Inc		s Segment CMO											
Re	ceipt For: Primary General	Aggregate	Year-to-Date V											
	Other (specify) ▼		, 1153.80			P/R Deduction (\$192.30 Bi-Weekly)								
	ll Name of Individual (Last, First, Middle Initial DAVIS, BENTON V, , ,) or Full Oi	Organization Name		Date of	Re	ceipt							
	iling Address 9825 NORTH 53RD PLACE	1			03	/	31		2017 ^Y					
Cit P/	y ARADISE VALLEY	State AZ	Zip Code 85253-1634						53924539 is Period	5				
	C ID number of contributing leral political committee.	С					,	,	384.0	60				
Ор	me of Employer (for Individual) otum Services, Inc		upation (for Individual) GM Clin Comnty Ntwk	Memo Item										
Re	ceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 961.50]	P/R Dedi	uctio	on (\$19:	2.30 Bi-W	/eekly)					
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T	EMIZED RECEIPTS		Use separate schedule(s)	(check or	(check only one)									
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	y information copied from such Reports and Stat for commercial purposes, other than using the na			rson for the	e purpo	se of so	liciting	contribu	itions					
	NAME OF COMMITTEE (In Full)													
\rangle	UnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	C)										
Α.	Full Name of Individual (Last, First, Middle Initial HERMAN, CRAIG S, , ,) or Full Oi	rganization Name	Date of	of Rece	eipt								
	Mailing Address 9609 WYOMING CIRCLE			M 03		D D D 31	/ Y	үүү 2017	Ŷ					
	City BLOOMINGTON	State MN	Zip Code 55438-1628	Transaction ID : PR2575650245395 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С					-	384.	60					
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt		Memo It	tem								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R De	duction	ı (\$192.3	30 Bi-W	/eekly)						
в.	Full Name of Individual (Last, First, Middle Initial MCFANN, ELENA J, , ,) or Full Oi	rganization Name	Date	of Rece	eipt								
	Mailing Address 18925 24TH AVENUE NORTH			03 / D D / Y Y Y Y 2017										
	City	State MN	Zip Code					5474539						
	PLYMOUTH		55447-2072	Amour	nt of Ea	ach Rec	ceipt th	is Period						
	FEC ID number of contributing federal political committee.	С		Memo Item										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n CEO											
	Receipt For:	Aggregate	Year-to-Date ▼											
	Other (specify) V		, 1153.80	P/R Dee	duction	(\$192.3	80 Bi-W	eekly)						
C.	Full Name of Individual (Last, First, Middle Initial ZIGLER, JANICE C, , ,) or Full Oi	rganization Name	Date of	of Rece	eipt								
	Mailing Address 21 TREVINO CIRCLE			03		^D 31		2017 ^Y						
	City ANGEL FIRE	State NM	Zip Code 87710					is Period						
	FEC ID number of contributing federal political committee.	С					J	384.	_					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) n Pres Ntwk Mgmt		Memo II	tem								
	Receipt For: Primary General Other (specify)	-	Year-to-Date ▼ 1153.80	P/R De	duction	n (\$192.3	30 Bi-W	/eekly)						
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	y information copied from such Reports and State for commercial purposes, other than using the na					or th			oos	e of	sol	iciting	contribu	tions		
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	Un	itedHealth Group PA	C)											
A.	Full Name of Individual (Last, First, Middle Initial) ALLEN, CARL E, , ,	or Full C	Drga	nization Name		Date of Receipt										
	Mailing Address 8675 AZURE SKY DRIVE	01-1-		Zip Code	03 / D D / Y Y Y Y 03 / 31 / 2017 Transaction ID : PP2575569345395											
	City LAS VEGAS	State NV		Transaction ID : PR2575669345395												
	FEC ID number of contributing federal political committee.	C		89129-2227	Amount of Each Receipt this Period 78									00		
	Name of Employer (for Individual) Southwest Medical Assoc. Inc.		cupa Med	tion (for Individual)			Me	mo	lte	em						
	Receipt For:	_		ar-to-Date ▼ 234.00	 P/	/R D	edu	ictic	on ((\$39.0	00	Bi-We	ekly)			
B.	Full Name of Individual (Last, First, Middle Initial) STIDMAN, CHRISTOPHER J, , ,	or Full C	Drga	nization Name		Date	of	Re	cei	pt						
	Mailing Address 6504 CHEROKEE TRAIL	State		Zip Code	03 / 31 / 2017 Transaction ID : PR2575683845395											
	EDINA	MN		55439-1109					-				8384539 s Period			
	FEC ID number of contributing federal political committee.	С				384.60										
	Name of Employer (for Individual) Optum Services, Inc		•	tion (for Individual) t Relationship	Memo Item											
	Receipt For: µ Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 1153.80	P/	'n D	edu	ctio	on (\$192	2.30) Bi-We	eekly)			
с.	Full Name of Individual (Last, First, Middle Initial) OCHIPINTI, JOSEPH, , ,	or Full C	Drga	nization Name		Date	of	Re	cei	pt						
	Mailing Address 2751 MEETING PLACE	1		1		[™] 0		/	ſ	31		/ Y	ý ý 2017	Y		
	City ORLANDO	State FL		Zip Code 32814-6136									8574539 s Period			
	FEC ID number of contributing federal political committee.	С				AIIIO	um		J		ece	, pt tris	79.	_		
	Name of Employer (for Individual) United HealthCare Services Inc			tion (for Individual) n CEO		Memo Item										
	Receipt For: / Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 238.86	P	/R D	edu	uctio	on	(\$39.	.81	Bi-We	ekly)			
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			Detailed Summary Page				111	b	11c	12				
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An or	y information copied from such Reports and S for commercial purposes, other than using the	tatements mand a	ay not be sold or used by any po ddress of any political committee	erson e to so	for the plicit co	purp ntrib	pose outio	e of sons fro	oliciting	contribut committ	ions ee.			
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporate	ed PAC (I	JnitedHealth Group PA	AC)										
A.	Full Name of Individual (Last, First, Middle Ini FINE, BRETT M, , ,	tial) or Full C	rganization Name		Date of	f Re	eceip	pt						
	Mailing Address 607 STONINGTON ROAD				03 / D D / Y Y Y Y Y 03 31 2017									
	City SILVER SPRING	State MD	Zip Code 20902-1547	Transaction ID : PR2575692845395										
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ? Corp Strat		M	emo	o Ite	əm						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	F	P/R Ded	luctio	on ((\$38.40	6 Bi-We	ekly)				
В.	Full Name of Individual (Last, First, Middle Init FARRELL, STEPHEN J, , ,	tial) or Full C	rganization Name	Date of Receipt										
	Mailing Address 50 MAJOR DOANE RD				03 / D D / Y Y Y Y 03 31 2017									
	City WELLFLEET	State MA	Zip Code 02667-7836	Transaction ID : PR2575696245395 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С					Ţ			76.9	92			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO		M									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P	/R Ded	uctio	on ((\$38.46	6 Bi-We	ekly)				
С.	Full Name of Individual (Last, First, Middle Ini PROKOCKI, ELIZABETH SOBER		rganization Name		Date of	f Re	eceip	pt						
	Mailing Address 9746 SUNSET HILL DR				03	/	D	31	/ Y	2017	Y			
	City LONE TREE	State CO	Zip Code 80124-6720	-						70584539 is Period	5			
	FEC ID number of contributing federal political committee.	С			Amoun		,		,	192.3	30			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Plan CEO											
	Receipt For: Primary General Other (specify)		Year-to-Date ▼ 576.90		P/R Deduction (\$96.15 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	★ 11a 11b 11c 12 13 14 15 16 17										
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (JnitedHealth Group P/	AC)										
Full Name of Individual (Last, First, Middle WILSON, D ELLEN, , ,	Initial) or Full C	organization Name	Date of Receipt										
Mailing Address 400 STUART STREET 25D			03 / D D / Y Y Y Y 03 31 2017										
City BOSTON	State MA	Zip Code 02116-5011	Transaction ID : PR2575708845395 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		384.60										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) 9 Human Capital	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
Full Name of Individual (Last, First, Middle B. KNORR, MOLLY LOUISE, , ,	Initial) or Full C	organization Name	Date of Receipt										
Mailing Address 1144 PROSPECT AVENUE			03 / D D / Y Y Y Y 03 31 2017										
City HARTFORD	State CT	Zip Code 06105-1124	Transaction ID : PR2575735445395 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		76.92										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Risk Adjustment	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Middle C. GROSKLAGS, JEFFREY, , ,	Initial) or Full C	organization Name	Date of Receipt										
Mailing Address 3233 TIMBERWOLF CIRCL		7. 0.4	M M / D D / Y Y Y Y Y 03 31 2017										
City PRIOR LAKE	State MN	Zip Code 55372-3272	Transaction ID : PR2575735745395 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		192.30										
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) Fin	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional).			653.82										
TOTAL This Period (last page this line number	er only)												

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Any information copied from such Reports and or for commercial purposes, other than using	d Statements ma the name and a	I ay not be sold or used by any p ddress of any political committe	person for the purpose of soliciting contributions										
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)										
Full Name of Individual (Last, First, Middle KRAL, JESSICA C, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 4358 COOLIDGE AVE			03 / D D / Y Y Y Y 2017										
City SAINT LOUIS PARK	State MN	Zip Code 55424-1020	Transaction ID : PR2575736145395 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		76.92										
Name of Employer (for Individual) United HealthCare Services Inc	Occ VP	upation (for Individual) IT	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)										
Full Name of Individual (Last, First, Middle MURRAY, THOMAS M, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 10 CIRCLE WEST			03 / 0 0 / 2017 Transaction ID : PR2575736545395										
City EDINA	State MN	Zip Code 55436-1313	Transaction ID : PR2575736545395 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		434.78										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ops	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 652,17	P/R Deduction (\$217.39 Bi-Weekly)										
Full Name of Individual (Last, First, Middle CESARETTI, GINA L, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 5020 CIRCLE DOWN			03 / D D / Y Y Y Y 2017										
City GOLDEN VALLEY	State MN	Zip Code 55416-1304	Transaction ID : PR2575739045395 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		384.60										
Name of Employer (for Individual) Optum Services, Inc Receipt For:	Dep	upation (for Individual) uty Gen Counsel Mgr	Memo Item										
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional).			896.30										
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			Detailed Summary Page	×	11a 13	\square] 11 14		110 15	; [12 16	17		
	y information copied from such Reports and State for commercial purposes, other than using the na				or the		pos	se of a	solicit		contribut	ions		
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated													
A.	Full Name of Individual (Last, First, Middle Initial) MAURER, CARRIE J, , ,) or Full O	organization Name		Date of	Re	ecei	pt						
	Mailing Address 2899 EDGEWATER COVE				03 / 31 / 2017 Transaction ID : PR2575798145395									
	City WOODBURY	State MN	Zip Code 55125-8705	A							9814539 Period	5		
	FEC ID number of contributing federal political committee.	С		308.42										
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Mktg		Me	emo	o Ite	əm						
	Receipt For: µ Primary General Other (specify) ▼	Year-to-Date ▼ 677.66	P/	'R Dedi	uctio	on ((\$216	.11 B	i-We	ekly)				
B.	Full Name of Individual (Last, First, Middle Initial) HJERPE, ADAM C, , ,) or Full O	rganization Name		Date of	Re	ecei	pt						
	Mailing Address 13932 UTAH AVE S			03 / D D / Y Y Y Y 2017										
	City SAVAGE	State MN	Zip Code 55378-2159	A	Transaction ID : PR2575806245395 Amount of Each Receipt this Period 384.60									
	FEC ID number of contributing federal political committee.	С												
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ef of Staff		Memo Item									
	Receipt For: µ Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							ekly)			
C.	Full Name of Individual (Last, First, Middle Initial) RUSSELL, LAURIE ERIN, , ,) or Full O	organization Name		Date of	Re	ecei	pt						
	Mailing Address 3108 SONIA DRIVE				^M 03	/	L	31	/	Y	2017			
	City LAS VEGAS	State NV	Zip Code 89107-3246	A							1214539 Period	5		
	FEC ID number of contributing federal political committee.	С			_		y				78.0	00		
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) t Affs Dir		M	emo	o Ite	em						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 234.00	P	/R Ded	uctio	on	(\$39.(00 Bi-	Wee	∍kly)			
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	y information copied from such Reports and Statem for commercial purposes, other than using the nam								se of	sol				
$\left \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F													
A.	Full Name of Individual (Last, First, Middle Initial) of MECKEY, SAMUEL JAMES, , ,	or Full O	rganiz	zation Name	[Date of Receipt								
	Mailing Address 1828 WYNDAM DRIVE					03	/	′	31		/ Y	ү ү 2017	Y	
		State	Z	Zip Code		Transaction ID : PR2575814545395								
	SHAKOPEE	MN		55379-5437	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.							,			-1	384.	60	
	Name of Employer (for Individual) Optum Services, Inc	Occu VP (•	n (for Individual)		N	/lemo	o It	tem					
	Receipt For: Ag Primary General Other (specify) ▼	gregate	Year-1	to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
B.	Full Name of Individual (Last, First, Middle Initial) o MILLER, WILLIAM J, , ,	or Full O	rganiz	zation Name		Date o	of Re	ece	eipt					
	Mailing Address 27409 W 108 STREET					[™] 03	/	ľ	D D 31		/ Y	2017	Ŷ	
	3	State KS		Zip Code 66061-7533								1984539 s Period		
	FEC ID number of contributing federal political committee.							1			, pt thi	176.	_	
	Name of Employer (for Individual) Optum Services, Inc			n (for Individual) nent CEO		N	/lemo	o It	tem					
	Receipt For: Ag Primary General Other (specify) ▼	gregate	Year-1	to-Date ▼ 530.82	P/	R Deo	ducti	ion	(\$88.	.47	Bi-Wee	ekly)		
с.	Full Name of Individual (Last, First, Middle Initial) of SEXTON, ELLEN R, , ,	or Full O	rganiz	zation Name		Date d	of Re	ece	eipt					
	Mailing Address 15346 FISH POINT ROAD					^M 03	/	′	31		/ Y	y 2017	Y	
	5	State		Zip Code		Tran	sact	tio	n ID :	PR	25758	2324539	5	
	PRIOR LAKE	MN		55372-1948	A	Amour	nt of	Ea	ach R	lece	eipt thi	s Period		
	FEC ID number of contributing federal political committee.					_		,			,	192.	30	
	Name of Employer (for Individual) United HealthCare Services Inc		upatio Plan (n (for Individual) CEO		Ν	/lemo	o li	tem					
	Receipt For:			to-Date ▼ 576.90		/R De	ducti	ion	(\$96.	.15	Bi-We	ekly)		
s	UBTOTAL of Receipts This Page (optional)											753.	84	
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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
	y information copied from such Reports and State for commercial purposes, other than using the na			rson for the purpose of soliciting contributions									
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	JnitedHealth Group PA	C)									
Α.	Full Name of Individual (Last, First, Middle Initial) MCNATT, RICK E, , ,	or Full C	organization Name	Date of Receipt									
	Mailing Address 125 WHITNEY VALLEY WALK	Otata	Zie Oode	M M / D D / Y Y Y Y 03 31 2017									
	City JOHNS CREEK	State GA	Zip Code 30097-2462	Transaction ID : PR2575824945395									
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) SIs Ops	Memo Item									
	Receipt For: // Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initial) KAUFMAN, PHILIP R, , ,	Date of Receipt											
	Mailing Address 1680 NORTH FARM ROAD			03 31 2017									
	City ORONO	State MN	Zip Code 55356-9309	Transaction ID : PR2575829845395 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		326.00									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) O Spclty Ben Visn	Memo Item									
	Receipt For: // Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 787.52	P/R Deduction (\$210.62 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial) HENRY, STEPHANIE, , ,	or Full C	organization Name	Date of Receipt									
	Mailing Address 8970 VINCENT CIRCLE	1 -		03 / D D / Y Y Y Y Y 2017									
	City BLOOMINGTON	State MN	Zip Code 55431-1900	Transaction ID : PR2575831045395 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		365.00									
	Name of Employer (for Individual) United HealthCare Services Inc	Occ Dir I	upation (for Individual) T	Memo Item									
	Receipt For: // Primary General Other (specify)	Aggregate	P/R Deduction (\$365.00 Bi-Weekly)										
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NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle A. HUNTLEY, MICHELLE M, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 19503 HARMONY AVE			M M / D D / Y Y Y Y Y 03 31 2017								
City ROGERS	State MN	Zip Code 55374-4843	Transaction ID : PR2575832045395 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		192.30								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) outy Gen Counsel	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. BEESON, MARY JANE, , ,	Date of Receipt										
	Mailing Address 279 OAK COMMON AVENUE										
City SAINT AUGUSTINE	State FL	Zip Code 32095-6803	Transaction ID : PR2575839545395 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	192.30										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Adv/Tech Cnslt Sr Dir	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)								
Full Name of Individual (Last, First, Middle GOLDEN, WILLIAM J, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 106 SOUND COURT			03 / D D / Y Y Y Y 2017								
City NORTHPORT	State NY	Zip Code 11768-3527	Transaction ID : PR2575859345395 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		192.30								
Name of Employer (for Individual) United HealthCare Services Inc Receipt For:	Reg	upation (for Individual) n CEO	Memo Item								
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			576.90								
TOTAL This Period (last page this line numb	er only)										

Use separate schedule(s)

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11			for each category of the Detailed Summary Page	≭ 11a ☐ 11b ☐ 11c ☐ 12							
	y information copied from such Reports and Sta										
	for commercial purposes, other than using the n NAME OF COMMITTEE (In Full)	ame and a	doress of any political committee	to solicit contributions from such committee.							
	UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	.C)							
A.	Full Name of Individual (Last, First, Middle Initia COTTINGTON, NYLE BRENT, , ,	l) or Full O	rganization Name	Date of Receipt							
	Mailing Address 6630 EMPIRE COURT			03 31 2017							
	City MAPLE GROVE	State MN	Zip Code 55311-3433	Transaction ID : PR2575865345395 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		76.92							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Acctng	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)							
в.	Full Name of Individual (Last, First, Middle Initia PEZHMAN, PAYMAN, , ,	l) or Full O	rganization Name	Date of Receipt							
	Mailing Address 14801 CRESTVIEW LANE			03 / D D / Y Y Y Y 03 31 2017							
	City MINNETONKA	State MN	Zip Code 55345-4602	Transaction ID : PR2575883545395 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		192.30							
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Segment Gen Counsel	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initia LANGAN, PATRICK J, , ,	l) or Full O	rganization Name	Date of Receipt							
	Mailing Address 405 MEADOW LANE	1		03 / D D / Y Y Y Y 2017							
	City BENSON	State MN	Zip Code 56215-1033	Transaction ID : PR2575885045395 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		194.00							
	Name of Employer (for Individual) United HealthCare Services Inc	Occu VP I	upation (for Individual) T	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 582.00	P/R Deduction (\$97.00 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)		•	463.22							
	OTAL This Period (last page this line number or		F								

SCHEDULE A (FEC Form 3X) _____ _

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12								
			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)	ian using the name and a										
UnitedHealth Group Ind	corporated PAC (l	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First MEDEIROS, MICHAEL W, ,		rganization Name	Date of Receipt								
Mailing Address 7112 LANGMUIF	RDRIVE		03 31 2017								
City MCKINNEY	State TX	Zip Code 75071-4606	Transaction ID : PR2575930645395 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		78.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Clnt Mgmt NA Accts	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 234.00	P/R Deduction (\$39.00 Bi-Weekly)								
Full Name of Individual (Last, First, MATTERA, RICHARD J,		rganization Name	Date of Receipt								
Mailing Address 483 HIGHCROF			03 / D D / Y Y Y Y Y 2017								
City WAYZATA	State	Zip Code 55391-1548	Transaction ID : PR2575938445395 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual United HealthCare Services Inc	,	upation (for Individual) Group Gen Counsel	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First		rganization Name	Date of Receipt								
Mailing Address 4937 GREY OAk			03 31 2017								
City GLEN ALLEN	State VA	Zip Code 23059-5763	Transaction ID : PR2575968945395 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		115.38								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 346.14	P/R Deduction (\$57.69 Bi-Weekly)								
SUBTOTAL of Receipts This Page	(optional)		577.98								
TOTAL This Period (last page this	line number only)										

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ITC			Use separate schedule(s)	(check only one)								
	MIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12								
	information copied from such Reports and Stat r commercial purposes, other than using the n											
	AME OF COMMITTEE (In Full)											
	JnitedHealth Group Incorporated	PAC (L	JnitedHealth Group PA	.C)								
	ull Name of Individual (Last, First, Middle Initia SCHULTZ, STACY A, , ,) or Full O	rganization Name	Date of Receipt								
	ailing Address 4012 S XERXES AVENUE	1		03 / D D / Y Y Y Y 03 31 2017								
City Star MINNEAPOLIS MN FEC ID number of contributing federal political committee.			Zip Code 55410-1146	Transaction ID : PR2575990945395 Amount of Each Receipt this Period								
				76.92								
U	ame of Employer (for Individual) nited HealthCare Services Inc		upation (for Individual) uty Gen Counsel	Memo Item								
R	eceipt For: Primary General Other (specify) V	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)								
	ull Name of Individual (Last, First, Middle Initia SANN, DAVID, , ,	Date of Receipt										
	ailing Address 8326 ELKO DRIVE			03 31 2017								
	ity LLICOTT CITY	State MD	Zip Code 21043-6913	Transaction ID : PR2576026445395 Amount of Each Receipt this Period								
	EC ID number of contributing deral political committee.	С		76.92								
	ame of Employer (for Individual) ptum Services, Inc		upation (for Individual) Med Clin Ops	Memo Item								
R	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 230.76	P/R Deduction (\$38.46 Bi-Weekly)								
	ull Name of Individual (Last, First, Middle Initia ADAMS, GAYLE Q, , ,) or Full Oi	rganization Name	Date of Receipt								
_	ailing Address 39 CANYON RIDGE DRIVE	1 -		03 / D D / Y Y Y Y 2017								
	ity SANDIA PARK	State NM	Zip Code 87047-8509	Transaction ID : PR2576040345395 Amount of Each Receipt this Period								
	EC ID number of contributing deral political committee.	С		192.30								
U	ame of Employer (for Individual) nited HealthCare Services Inc		upation (for Individual) Strategic Acct Mgmt	Memo Item								
R	eceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)								
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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)								
I LIVILLU RECEIPIO		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
			13 14 15 16 17 Derson for the purpose of soliciting contributions Dereson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)	orated PAC (l	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Mid BYRNES, CHRISTOPHER A, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 705 IRVING PLACE			M M / D D / Y Y Y Y 03 31 2017								
City DULUTH	State MN	Zip Code 55812-1419	Transaction ID : PR2576042845395 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		192.30								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) POps	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)								
Full Name of Individual (Last, First, Mid B. KANDALAFT, KEVIN P, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 4189 WINDSOR POIN	T PLACE		03 31 2017								
City EL DORADO HILLS	State CA	Zip Code 95762-3797	Transaction ID : PR2576043645395 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.92								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) I Plan CEO	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Mid C. MONICAL, KENT, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 9795 E PIEDRA DRIV	1		03 / D D / Y Y Y Y Y 2017								
City SCOTTSDALE	State AZ	Zip Code 85255-9231	Transaction ID : PR2576051345395 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		76.92								
Name of Employer (for Individual) United HealthCare Services Inc	Occu SVP	upation (for Individual) Prd	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)								
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ITEMIZED RECEIPTS							(check only one)								
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	y information copied from such Reports and S														
	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and a		9 10 5			outions i	rom sucr	Commu	ee.					
	UnitedHealth Group Incorporate	ed PAC (l	JnitedHealth Group PA	AC)											
A.	Full Name of Individual (Last, First, Middle Ini JOHNSON, RESTOR, , ,	,	rganization Name		Date of	Re	eceipt								
	Mailing Address 2700 CRESCENT RIDGE RO	AD			M M / D D / Y Y Y Y Y 03 31 2017										
	City MINNETONKA	State MN)5164539 is Period	5						
	FEC ID number of contributing federal political committee.	С					т. т. 	-	194.0	00					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Entrprs Real Estate Svs		M	emo	tem								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 582.00]	P/R Deduction (\$97.00 Bi-Weekly)										
в.	Full Name of Individual (Last, First, Middle Ini REX, JOHN F, , ,	tial) or Full O	rganization Name		Date of	Re	eceipt								
	Mailing Address 503 HARRINGTON ROAD				03	/	D D D 31	/ Y	2017	Y					
	City WAYZATA	State MN	Zip Code 55391-1512	-					6004539	5					
	FEC ID number of contributing federal political committee.	ber of contributing							is Period 384.0	60					
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) G CFO	Memo Item											
	Receipt For: Primary General Other (specify) ▼	_	Year-to-Date ▼ 1153.80]	P/R Ded	uctio	on (\$192	2.30 Bi-W	'eekly)						
с.	Full Name of Individual (Last, First, Middle Ini MCEWAN, JOSHUA M, , ,	tial) or Full O	rganization Name		Date of	f Re	eceipt								
	Mailing Address 4711 WEST 28TH STREET				03	/	D D 31	/ Y	2017 [°]	Y					
	City SAINT LOUIS PARK	State MN	Zip Code 55416-1927						08574539 is Period	5					
	FEC ID number of contributing federal political committee.	С			<u> </u>		, .	5	76.9	92					
	Name of Employer (for Individual) United HealthCare Services Inc	Occi VP 1	upation (for Individual) Fax		Memo Item										
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76]	P/R Ded	ucti	on (\$88.	46 Bi-We	eekly)						
s	UBTOTAL of Receipts This Page (optional)		•	•			, .	,	655.5	52					
т	OTAL This Period (last page this line number	only)		•			-								

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	y information copied from such Reports and Stater for commercial purposes, other than using the nan													
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (L	Jni	tedHealth Group PA	C)									
Α.	Full Name of Individual (Last, First, Middle Initial) o DUDA, MICHAEL R, , ,	or Full Or	rgan	ization Name		Date of Receipt								
	Mailing Address 5208 RICHWOOD DRIVE					м м 03	1	D	31	/ Y	ү ү 2017	Y		
	5	State MN		Zip Code 55436-2322		Transaction ID : PR2576089945395 Amount of Each Receipt this Period								
	EEC ID number of contributing	C			192.30							30		
	Name of Employer (for Individual) United HealthCare Services Inc	Occu Dir N	•	on (for Individual)		Me	emo	lte	m					
	Receipt For: Ag Primary General Other (specify) ▼	ggregate `	Yea	r-to-Date ▼ 576.90	P/	192.30 Memo Item P/R Deduction (\$96.15 Bi-Weekly) Date of Receipt 03 / 31 2017 Transaction ID : PR2576103745395 Amount of Each Receipt this Period 267.39								
B.	Full Name of Individual (Last, First, Middle Initial)	or Full Or	rgan	ization Name		Date of Receipt								
	Mailing Address 11 BERTON COURT						1	D		/ Y		Y		
	City Since S	State DE		Zip Code 19709-9932				-				5		
	FEC ID number of contributing federal political committee.	° I								-9-	267.	39		
	Name of Employer (for Individual) United HealthCare Services Inc	ion (for Individual) n CEO		Me	emo	lte	em							
	Receipt For: Ag Primary General Other (specify) ▼	ggregate `	Yea	r-to-Date ▼ 421.23	P/	R Dedi	uctic	on (S	\$228.9	93 Bi-W	′eekly)			
с.	Full Name of Individual (Last, First, Middle Initial)	or Full Or	rgan	ization Name		Date of	Re	ceip	ot					
	Mailing Address 13273 CARLINGFORD LANE					^M 03	1	D	31	/ Y	үүү 2017	Y		
	City SEMOUNT	State MN		Zip Code 55068-6308	A						11904539 is Period	5		
	FEC ID number of contributing federal political committee.							7		y	76.	92		
	Name of Employer (for Individual) United HealthCare Services Inc		•	on (for Individual) Mgmt		Memo Item								
	Receipt For: Ag Primary General Other (specify)	ggregate `	Yea	r-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
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т	OTAL This Period (last page this line number only))						-		- 40-				

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	y information copied from such Reports and State for commercial purposes, other than using the name													
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	Jni	tedHealth Group PA	NC)									
<u> </u>	Full Name of Individual (Last, First, Middle Initial) BOADO, ANDREA M, , ,	or Full O	rgar	nization Name	[Date of Receipt								
	Mailing Address 14924 PONDVIEW CIRCLE					м м 03	/	ľ	D D 31	1	/ Y	y y 2017	Y	
	City WAYZATA	State MN		Zip Code 55391-2249	Transaction ID : PR2576144645395 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			227.27							27		
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) ity Gen Counsel		Me	emo	o It	tem					
	Receipt For: A Primary General Other (specify) ▼	ggregate	Yea	r-to-Date ▼ 227.27	P	P/R Deduction (\$227.27 Bi-Weekly)								
B.	Full Name of Individual (Last, First, Middle Initial) NELSON, STEVEN H, , ,	or Full O	rgar	nization Name		Date of	Re	ece	eipt					
	Mailing Address 640 LOCUST HILLS DRIVE					м м 03	/	l	D D 31		/ Y	ү ү 2017	Y	
	City WAYZATA	State MN		Zip Code 55391-1973								4484539 s Period	5	
	FEC ID number of contributing federal political committee.	С				,			-	384.	60			
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) gment CEO		Me	emo	o It	tem					
	Receipt For: A Primary General Other (specify) ▼	ggregate	Yea	r-to-Date ▼ 1153.80	P/	R Dedu	uctio	on	(\$192	2.3	0 Bi-W	eekly)		
с.	Full Name of Individual (Last, First, Middle Initial) FRIDNER, JOHN E, , ,	or Full O	rgar	nization Name		Date of	Re	ece	eipt					
	Mailing Address 782 PENFIELD DR					03	/	l	D D 31		/ Y	2017 ^Y		
	City CAROL STREAM	State IL		Zip Code 60188-4738	<i>F</i>							4754539 s Period	5	
	FEC ID number of contributing federal political committee.	С						7			y	78.	00	
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) /P SIs/Gen		Me	ema	o li	tem					
	Receipt For: A Primary General Other (specify) I	ggregate	Yea	r-to-Date ▼ 234.00	P	/R Ded	uctio	ion	(\$39.	00) Bi-We	ekly)		
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17								
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NAME OF COMMITTEE (In Full)											
UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middle	Initial) or Full C	organization Name									
A. MYHRAN, LYNN M, , ,			Date of Receipt								
Mailing Address 2280 FOX STREET			03 31 2017								
City	State	Zip Code	Transaction ID : PR2576158445395								
ORONO	MN	55356-9652	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		416.66								
Name of Employer (for Individual)	000	upation (for Individual)	Memo Item								
Optum Services, Inc		Grp SVP, Human Capital									
Receipt For:		Year-to-Date ▼	_								
Primary General		833.32	P/R Deduction (\$208.33 Bi-Weekly)								
Other (specify) v			1								
Full Name of Individual (Last, First, Middle	Initial) or Full C	organization Name									
B. BENSON, JEAN C, , ,			Date of Receipt								
Mailing Address 14951 HIGHLAND COURT	NE		03 31 2017								
City	State	Zip Code	Transaction ID : PR2576310945395								
PRIOR LAKE	MN	55372-4109	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	384.60										
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) Fin	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify) ▼		, 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. ELLIOTT III, THOMAS L, , ,	Initial) or Full C	Prganization Name	Date of Receipt								
Mailing Address 1880 SUGARLOAF CLUB I	DR										
City	State	Zip Code	03 31 2017 Transaction ID : PR2576313345395								
DULUTH	GA	30097-7451	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		, 192.30								
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item								
United HealthCare Services Inc	SVF	CInt Relationship									
Receipt For:	Aggregate	Year-to-Date ▼	P/R Deduction (\$96.15 Bi-Weekly)								
Other (specify)		576.90									
SUBTOTAL of Receipts This Page (optional).			993.56								
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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
	y information copied from such Reports and Sta for commercial purposes, other than using the r			erson for the purpose of soliciting contributions									
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (l	JnitedHealth Group PA	ιC)									
Α.	Full Name of Individual (Last, First, Middle Initia KENIRY, DANIEL J, , ,	al) or Full C	organization Name	_ Date of Receipt									
	Mailing Address 5553 LITTLE FALLS ROAD			03 / D D / Y Y Y Y 2017									
	City ARLINGTON	State VA	Zip Code 22207-1525	Transaction ID : PR2577379345395									
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 384.60									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1153.80 P/R Deduction (\$192.30 Bi-Weekly)											
в.	Full Name of Individual (Last, First, Middle Initia	Date of Receipt											
	Mailing Address 25 OFFSHORE			03 31 2017									
	City NEWPORT BEACH	State CA	Zip Code 92657-2162	Transaction ID : PR2578819445395 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		248.79									
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) O Med Grp Physn	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 304.95	P/R Deduction (\$234.75 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initia PRYDE, GAYLE, , ,	al) or Full C	organization Name	Date of Receipt									
	Mailing Address 8801 MIRROR LAKE WAY			03 / D D / Y Y Y Y 2017									
	City LAUREL	State MD	Zip Code 20723-4907	Transaction ID : PR2578821145395									
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Compli	Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00	P/R Deduction (\$500.00 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)		•••••	1133.39									
т	OTAL This Period (last page this line number of	nly)	••••••										

Use separate schedule(s)

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			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 Sta for commercial purposes, other than using the n												
<u>.</u>	NAME OF COMMITTEE (In Full)												
\rangle	UnitedHealth Group Incorporated	I PAC (L	JnitedHealth Group PA	C)									
A.	Full Name of Individual (Last, First, Middle Initia DUFFEY, KRISTY O, , ,	l) or Full Or	rganization Name	Date of Receipt									
	Mailing Address 8906 WINGED FOOT DRIVE			03 31 2017									
	City PASADENA	State MD	Zip Code 21122-6670	Transaction ID : PR2578823245395 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		384.60									
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) CInt Ops	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initia CIAVOLA, LAURA, , ,	Date of Receipt											
	Mailing Address 1686 WILDFIRE LANE	1		M M / D D / Y Y Y Y 03 31 2017									
	City FRISCO	State TX	Zip Code 75033-7325	Transaction ID : PR2578824345395									
	FEC ID number of contributing		73033-7323	Amount of Each Receipt this Period									
	federal political committee.	С		384.60									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Ops	Memo Item									
	Receipt For:	Aggregate `	Year-to-Date ▼										
	Other (specify) ▼		, 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
C.	Full Name of Individual (Last, First, Middle Initia BUSBEE, NATHANAEL, , ,	l) or Full Or	rganization Name	Date of Receipt									
	Mailing Address 611 ORPINGTON RD	1 -		03 / D D / Y Y Y Y 31 2017									
	City BALTIMORE	State MD	Zip Code 21229-2128	Transaction ID : PR2578826745395 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С											
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Bus Process	Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)			846.12									
т	OTAL This Period (last page this line number or	lly)											

SCHEDULE A (FEC Form 3X) _____ _

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		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full)												
UnitedHealth Group Incorpora	ted PAC (l	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middle I COHEN, JAY J, , ,	nitial) or Full C	rganization Name	Date of Receipt									
Mailing Address 2613 VICTORIA DR			03 / D D / Y Y Y Y 03 31 2017									
City LAGUNA BEACH	State CA	Zip Code 92651-3948	Transaction ID : PR2578829645395 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		192.30									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) D Med Grp Physn	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)									
Full Name of Individual (Last, First, Middle I B. FARMER, RACHEL C, , ,												
Mailing Address 1929 ALBIZIA COURT	1		03 / D D / Y Y Y Y Y 03 31 2017									
	State LA	Zip Code	Transaction ID : PR2595208345395									
BATON ROUGE		70808-3973	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		76.92									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify) ▼		230.76	P/R Deduction (\$63.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middle I C. SYNOTT, STEPHEN, , ,	nitial) or Full C	rganization Name	Date of Receipt									
Mailing Address 21756 CASTLEWOOD DR			M M / D D / Y Y Y Y 03 31 2017									
City MALIBU	State CA	Zip Code 90265-3405	Transaction ID : PR2595208845395 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		365.00									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Bus Dev	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 365.00	P/R Deduction (\$365.00 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)			634.22									
TOTAL This Period (last page this line number	er only)											

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				Detailed Summary Page	×	11a 13] 11 14	1b		11c 15	12	17					
	y information copied from such Reports and State for commercial purposes, other than using the na					or the		pos	se of	sol	liciting	contribut	ions					
$\left \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated																	
A.	Full Name of Individual (Last, First, Middle Initial) LONIGRO, ANTHONY S, , ,	or Full O	rgar	nization Name		Date of Receipt												
	Mailing Address 3186 WEST CANYON AVE																	
	City SAN DIEGO	State CA		Zip Code 92123-5426		Transaction ID : PR2595225845395 Amount of Each Receipt this Period												
	FEC ID number of contributing federal political committee.	С				76.92												
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Mgmt		Memo Item												
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 230.76	P	'R Dedi	uctio	on	(\$38.4	46	Bi-We	ekly)						
B.	Full Name of Individual (Last, First, Middle Initial) SHORT, MARIANNE D, , ,	or Full O	rgar	nization Name		Date of Receipt												
	Mailing Address 2215 SUMMIT AVENUE									03 / D D / Y Y Y Y Y 2017								
	City SAINT PAUL	State MN		Zip Code 55105-1002				-				3354539 s Period	5					
	FEC ID number of contributing federal political committee.	С				384.60 Memo Item												
	Name of Employer (for Individual) United HealthCare Services Inc		•	tion (for Individual) en Counsel														
	Receipt For: A Primary General Other (specify) ▼	aggregate	Yea	r-to-Date ▼ 1153.80	P/	P/R Deduction (\$192.30 Bi-Weekly)												
C.	Full Name of Individual (Last, First, Middle Initial) SWANSON, AMY N, , ,	or Full O	rgar	nization Name	[Date of	Re	ecei	ipt									
	Mailing Address 621 SPARROW WAY					^M 03	/	E	D D D]	/ Y	2017	Y					
	City WADSWORTH	State OH		Zip Code 44281-7716	4							4074539 s Period	5					
	FEC ID number of contributing federal political committee.	С						y			y	192.3	30					
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) Bus Dev		Memo Item												
	Receipt For: A Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 576.90	P	P/R Deduction (\$96.15 Bi-Weekly)												
s	UBTOTAL of Receipts This Page (optional)				.			,		T	9	653.8	32					
Т	OTAL This Period (last page this line number only	/)						-		-	-9-							

Use separate schedule(s)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
or for commercial purposes, other than using			erson for the purpose of soliciting contributions to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	rated PAC (I	JnitedHealth Group PA	AC)									
Full Name of Individual (Last, First, Middl A. KAPROW, MARC GORDON, , ,	e Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 5079 SW 89TH AVE												
City COOPER CITY	State FL	Zip Code 33328-3636	Transaction ID : PR2601179045395									
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 76.92									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middl B. MCBEATH, ROBERT, , ,												
Mailing Address 2537 RED ARROW DRIV	Mailing Address 2537 RED ARROW DRIVE											
City LAS VEGAS	State NV	Zip Code 89135-1628	Transaction ID : PR2605708945395 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		238.09									
Name of Employer (for Individual) Southwest Medical Assoc. Inc.		upation (for Individual) O Med Grp Physn	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.09	P/R Deduction (\$238.09 Bi-Weekly)									
Full Name of Individual (Last, First, Middl C. FRANK, JOHN, , ,	e Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 10723 BAYBRIDGE WAY	(03 / D D / Y Y Y Y 2017									
City FISHERS	State IN	Zip Code 46040-9473	Transaction ID : PR2605721745395									
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2500.00	P/R Deduction (\$1500.00 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optiona	l)		1815.01									
TOTAL This Period (last page this line num	ber only)	•										

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	-	Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 11							
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
UnitedHealth Group Incorpora	ated PAC (l	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle A. DAVIS, KELLY MARIE, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name DAVIS, KELLY MARIE, , ,									
Mailing Address 905 N LEBANON ST			Date of Receipt							
City ARLINGTON	State VA	Zip Code 22205-1433	Transaction ID : PR2605734245395 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		76.92							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) t Affs Dir	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. MALONE, TRACY, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 900 S 22ND ST			03 31 2017							
City ARLINGTON	State VA	Zip Code 22202-2625	Transaction ID : PR2605736945395 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) External Affs	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼	P/R Deduction (\$192.30 Bi-Weekly)							
Other (specify) ▼		1153.80								
Full Name of Individual (Last, First, Middle C. EKEBERG, ANDREA, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 15017 LYNN TER			03 / D D / Y Y Y Y Y 03 31 2017							
City MINNETONKA	State MN	Zip Code 55345-5730	Transaction ID : PR2605753845395 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		365.00							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Compli	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 365.00	P/R Deduction (\$365.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			826.52							
TOTAL This Period (last page this line numb	er only)									

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	EMIZED RECEIPTS		for each categor Detailed Summa		X 11a 11b 11c 12 13 14 15 16 17									
	y information copied from such Reports and Sta for commercial purposes, other than using the													
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	d PAC (I	JnitedHealth	Group PAC	;)									
Α.	Full Name of Individual (Last, First, Middle Initia WEISSEL, MICHAEL E, , ,													
	Mailing Address 99 HAGEN ROAD	01-1-	7:0.0.1		03 / D D / Y Y Y Y 03 / 31 2017									
	City NEWTON	State MA	Zip Code 02459-2731		Transaction ID : PR2606842945395									
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period 384.60									
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individu um Exec	al)	Memo Item									
	Receipt For: Primary General Other (specify) ▼		Year-to-Date V	1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initia MATECZUN, JOHN MATTHEW, , ,		Date of Receipt											
	Mailing Address 1908 HARBOURSIDE DRIVE UNIT 403	03 / D D / Y Y Y 2017												
	City LONGBOAT KEY	State FL	Zip Code 34228-4207		Transaction ID : PR2606845145395 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			384.60									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individu s M&V	al)	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initia KENNEDY, SHELLEY L, , ,	al) or Full C	organization Name		Date of Receipt									
	Mailing Address 706 SUE BARNETT				03 31 Y Y Y Y 2017									
	City HOUSTON	State TX	Zip Code 77018-5412		Transaction ID : PR2607803045395 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С												
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individu Service Acct Mgmt	al)	Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date V	300.00	P/R Deduction (\$50.00 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)			•••••	869.20									
Т	OTAL This Period (last page this line number o	nly)		····· ►										

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I EIVIIZED RECEIF I S		Detailed Summary Page	X 11a 11b 11c 12									
		Detailed Summary Page										
			person for the purpose of soliciting contributions be to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)												
angle UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle LANDO, LISA MARIE, , ,	e Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 60 PINEAPPLE STREET			03 / D D / Y Y Y Y 03 / 31 / 2017									
City BROOKLYN	State NY	Zip Code 11201-6839	Transaction ID : PR2608059545395 Amount of Each Receipt this Period 76.92									
FEC ID number of contributing federal political committee.	С											
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middle FLYNN, VIRGINIA A, , ,	e Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 30 VAN TERRACE												
City	State	Zip Code	Transaction ID : PR2608061245395									
SPARKILL	NY	10976-1406	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		76.92									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Med Clin Ops	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middle FERGUSON, SANDRA, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name FERGUSON, SANDRA, , ,											
Mailing Address 710 SOUTH SHERATON	DRIVE		03 / D D / Y Y Y Y 03 31 2017									
City AKRON	State OH	Zip Code 44319-1918	Transaction ID : PR2608061945395 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		76.92									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) c Dir Med Clin Ops	Memo Item									
Receipt For:	I	Year-to-Date ▼	P/R Deduction (\$38.46 Bi-Weekly)									

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			Detailed Summary Page	×	11a 13		111		11c	12	Г	17		
	y information copied from such Reports and State for commercial purposes, other than using the na				or the		pos	e of s	soliciti	ng contril	butic	ons		
$\left\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated													
A.	Full Name of Individual (Last, First, Middle Initial) WRIGHT, NORMAN L, , ,) or Full O	rganization Name	Date of Receipt										
	Mailing Address 5205 KELSEY TERRACE				M M / D D / Y Y Y Y 03 31 2017									
	City EDINA	State MN	Zip Code 55436-1172	A	Transaction ID : PR2609812345395 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			384.60									
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) ef of Ops		Me	emo	o Ite	em						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/	R Dedu	uctio	on ((\$192	.30 Bi-	Weekly)				
B.	Full Name of Individual (Last, First, Middle Initial) STRAUSS, DAVID E, , ,) or Full O	rganization Name		Date of	Re	eceij	pt						
	Mailing Address 5000 FRANCE AVENUE S				Max / 31 / 2017 Transaction ID : PR2612521845395 Amount of Each Receipt this Period									
	City MINNEAPOLIS	State MN	Zip Code 55410-2061	A										
	FEC ID number of contributing federal political committee.	С			454.54 Memo Item									
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Total Rewards											
	Receipt For: // Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 454.54	P/	P/R Deduction (\$227.27 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial) BAKER, MICHAEL, , ,) or Full O	rganization Name		Date of	Re	ecei	pt						
	Mailing Address 2383 HIGHOVER TRAIL				03	/	L	31	/	2017				
	City CHANHASSEN	State MN	Zip Code 55317-4744	A						2530545 this Perio				
	FEC ID number of contributing federal political committee.	С					y			38	84.60			
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Cust Svs		Me	emo	o Ite	em						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$1						\$192.30 Bi-Weekly)				
s	UBTOTAL of Receipts This Page (optional)						9		,	122	3.74			
т	OTAL This Period (last page this line number onl	y)	•				-				-			

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12										
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full)	,												
UnitedHealth Group Incorpor	rated PAC (l	JnitedHealth Group P	AC)										
Full Name of Individual (Last, First, Middl DECKMANN, NATASHA, , ,	e Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 133 WEST 22 STREET #	6F		03 / D D / Y Y Y Y 2017										
City NEW YORK	State NY	Zip Code 10011-2783	Transaction ID : PR2612534645395 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		384.60										
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name VAIL, ABIGAIL LONDON, , ,												
Mailing Address 3636 DEXTER DRIVE			Date of Receipt										
City TALLAHASSEE	State FL	Zip Code 32312-1022	Transaction ID : PR2614315645395										
FEC ID number of contributing federal political committee.	С	32312-1022	Amount of Each Receipt this Period 76.92										
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ⁄t Affs Dir	Memo Item										
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 230.76	P/R Deduction (\$63.46 Bi-Weekly)										
Full Name of Individual (Last, First, Middl C. BURKHOLDER, CHAD, , ,	e Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 2423 DUBONNET DRIVE			03 / D D / Y Y Y Y Y 2017										
City MACUNGIE	State PA	Zip Code 18062-8857	Transaction ID : PR2615073445395 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		76.92										
Name of Employer (for Individual) Optum Services, Inc	Occi VP (upation (for Individual) Ops	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optiona	l)		538.44										
TOTAL This Period (last page this line num	ber only)												

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			Detailed Summary Page	X 11a 11b 11c 12								
			Detailed Summary Page									
An or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma 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.								
\setminus	NAME OF COMMITTEE (In Full)											
\rangle	UnitedHealth Group Incorporate	d PAC (l	JnitedHealth Group PA	AC)								
۱.	Full Name of Individual (Last, First, Middle Initi SOLOMON, RANDALL L, , ,	al) or Full O	rganization Name	Date of Receipt								
	Mailing Address 760 HAIGHT STREET											
	City	State	Zip Code	Transaction ID : PR2615671545395								
	SAN FRANCISCO	CA	94117-3317	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		76.92								
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Behvrl Med Dir	Memo Item								
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General			P/R Deduction (\$38.46 Bi-Weekly)								
	Other (specify) V	L	230.76]								
	Full Name of Individual (Last, First, Middle Initi BIRNBAUM, MICHAEL, , ,	Date of Receipt										
	Mailing Address 55 DEAN STREET	03 31 2017										
	City	State	Zip Code	Transaction ID : PR2615671645395								
	BROOKLYN	NY	11201-6245	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	314.28										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Hlthcare Econ	Memo Item								
	Receipt For:	Aggregate	Year-to-Date V									
	Primary General Other (specify) ▼		714.28	P/R Deduction (\$214.28 Bi-Weekly)								
	Full Name of Individual (Last, First, Middle Initi NIEMYER, ELIZABETH S, , ,	al) or Full O	rganization Name	Date of Receipt								
	Mailing Address 9237 ENGLISH MEADOW WA	Y		03 / D D / Y Y Y Y 03 31 2017								
	City	State	Zip Code	Transaction ID : PR2615682845395								
	LAYTONSVILLE	MD	20882-1348	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		384.60								
	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item								
	United HealthCare Services Inc	VP		-								
	Receipt For:		Year-to-Date ▼	—								
	Primary General Other (specify)	Aggregate	1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
	JBTOTAL of Receipts This Page (optional)											

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

Use separate schedule(s)

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Any i or foi N/ L Fu A.	r commercial purposes, other than using the AME OF COMMITTEE (In Full) InitedHealth Group Incorporate III Name of Individual (Last, First, Middle Init BAKSHI, BIKRAM, , , ailing Address 9036 BRONSON DRIVE	name and ac	InitedHealth Group PA	X 11a 11b 11c 12 13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee. AC)										
or for N/ L A. E	r commercial purposes, other than using the AME OF COMMITTEE (In Full) InitedHealth Group Incorporate III Name of Individual (Last, First, Middle Init BAKSHI, BIKRAM, , , ailing Address 9036 BRONSON DRIVE	name and ac	InitedHealth Group PA	erson for the purpose of soliciting contributions to solicit contributions from such committee.										
A. E M	AME OF COMMITTEE (In Full) InitedHealth Group Incorporate III Name of Individual (Last, First, Middle Init BAKSHI, BIKRAM, , , ailing Address 9036 BRONSON DRIVE	d PAC (L	InitedHealth Group PA											
	InitedHealth Group Incorporate III Name of Individual (Last, First, Middle Init BAKSHI, BIKRAM, , , ailing Address 9036 BRONSON DRIVE			AC)										
A. _E	BAKSHI, BIKRAM, , , ailing Address 9036 BRONSON DRIVE	ial) or Full Or	ganization Name											
_				Date of Receipt										
Ci	+. /		03 / D D / Y Y Y Y 2017											
_P	OTOMAC	State MD	Zip Code 20854-4606	Transaction ID : PR2615954845395Amount of Each Receipt this Period										
	EC ID number of contributing deral political committee.	С		384.60										
O	ame of Employer (for Individual) ptum Services, Inc		pation (for Individual) m Exec	Memo Item										
	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)										
	III Name of Individual (Last, First, Middle Init RAW, KEVIN JON, , ,	Date of Receipt												
	ailing Address 518 13TH ST			03 / D D / Y Y Y Y 2017										
Ci		State CA	Zip Code	Transaction ID : PR2617365645395										
			92648-4038	Amount of Each Receipt this Period										
	EC ID number of contributing deral political committee.	С		76.92										
	ame of Employer (for Individual) otum Services, Inc		ipation (for Individual) Bus Process	Memo Item										
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 230.76	P/R Deduction (\$38.46 Bi-Weekly)										
	III Name of Individual (Last, First, Middle Init IOHNSON, MARK OWEN, , ,	ial) or Full Or	ganization Name	Date of Receipt										
M	ailing Address 8687 RILEY CURVE			M M / D D / Y Y Y Y 03 31 2017										
Ci	ty :HANHASSEN	State MN	Zip Code 55317-4822	Transaction ID : PR2617933945395 Amount of Each Receipt this Period										
	EC ID number of contributing deral political committee.	С		92.30										
0	ame of Employer (for Individual) ptum Services, Inc		pation (for Individual) Gen Mgmt	Memo Item										
	eceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 276.90	P/R Deduction (\$46.15 Bi-Weekly)										
SUE	BTOTAL of Receipts This Page (optional)		•	553.82										

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

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	EMIZED RECEIPTS			×	11a 13		-	11b	11c		12 16	17			
	y information copied from such Reports and Stater for commercial purposes, other than using the nam					or the		rpo	ose of s	solicitir		ontribu	tions		
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (l	Jni	tedHealth Group PA	C)										
Α.	Full Name of Individual (Last, First, Middle Initial) WENGER, BRIAN, , ,	or Full O	rgar	nization Name		Date of Receipt									
	Mailing Address 818 GOODRICH AVE														
	5	State MN		Zip Code 55105-3345		Transaction ID : PR2623703345395									
						Amount of Each Receipt this Period 384.60									
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) up Gen Counsel		Memo Item									
	Receipt For: Ag Primary General Other (specify) ▼	ggregate	Yea	r-to-Date ▼ 1153.80	P/	R De	ducti	ion	n (\$192.	30 Bi-'	Wee	kly)			
B.	Full Name of Individual (Last, First, Middle Initial) MULES, REBECCA HUMBERT, , ,	or Full O	rgar	nization Name		Date of Receipt									
	Mailing Address 660 DOVER STREET					[™] 03	л /	′	D D D 31			017	Y		
	City : BALTIMORE	State MD		Zip Code 21230-2228		Transaction ID : PR2624442645395 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	0				76.92									
	Name of Employer (for Individual) United HealthCare Services Inc	Occi Dir (Memo Item											
	Receipt For: Ag Primary General Other (specify) ▼	ggregate	Yea	r-to-Date ▼ 230.76	P/1	P/R Deduction (\$63.46 Bi-Weekly)									
С.	Full Name of Individual (Last, First, Middle Initial) COLLETTE, CHRISTOPHER LOUIS		rgar	nization Name		Date of	of Re	ece	eipt						
	Mailing Address 786 CAMBERWELL DRIVE					[™] 03	И /	′	D D D 31	/		017	Y		
	City Season Seas	State MN		Zip Code					n ID : F				5		
	FEC ID number of contributing		-	55123-3939	A	moui	nt of	E	ach Re	ceipt t	his	Period 440.	56		
		_	-		41		Лет	,	ltom			110.			
	Name of Employer (for Individual) United HealthCare Services Inc			ion (for Individual) itedHlth Grp	_ '			01	item						
	Receipt For: Ag Primary General Other (specify)	ggregate	Yea	ur-to-Date ▼ 594.40	P/	P/R Deduction (\$220.28 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)							,				902.0)8		
т	OTAL This Period (last page this line number only))		•••••				,		-					

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		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12									
			13 14 15 16 1 erson for the purpose of soliciting contributions									
or for commercial purposes, other than using t	ine name and a	ddress of any political committe	e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ited PAC (l	JnitedHealth Group P	AC)									
Full Name of Individual (Last, First, Middle RELLER, TAMI, , ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 5120 MIRROR LAKES DRI	VE		03 / D D / Y Y Y Y Y 03 31 2017									
City EDINA	State MN	Zip Code 55436-1342	Transaction ID : PR2625501945395 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		384.60									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Group CFO	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. COWEN, WESLEY RYAN, , ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 825 VIRGINIA PARK CIRC	1		03 / D D / Y Y Y Y 2017									
City ATLANTA	State GA	Zip Code 30306-4081	Transaction ID : PR2625532345395									
		30300-4061	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		76.92									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Dir Acct Mgmt	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Middle CULHANE, DEBORAH ANNE, ,		rganization Name	Date of Receipt									
Mailing Address 100 COVE WAY UNIT 301	State		03 / D D / Y Y Y Y 31 2017									
City QUINCY	MA	Zip Code 02169-5857	Transaction ID : PR2626356045395 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		327.38									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 535.72	P/R Deduction (\$223.21 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional).			788.90									
TOTAL This Period (last page this line number	er only)											

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				Detailed Summary Page	×	11a 13] 11 14	- H		11c	12 16	17			
	y information copied from such Reports and State for commercial purposes, other than using the na					or the		pos	se of s			contribut	ions			
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated															
A.	Full Name of Individual (Last, First, Middle Initial) HINES, GREGORY M, , , Mailing Address 3660 SILVERWOOD RD) or Full O	Orgar	nization Name		Date of Receipt										
		Otata		Zin Oode		03 31 2017 Transaction ID : PR2626886545395										
	City WEST SACRAMENTO	State CA		Zip Code 95691-5403				-				8654539 s Period	5			
	FEC ID number of contributing federal political committee.	С						-			-y-	76.9	92			
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) t Affs		Me	emo	o Ite	em							
	Receipt For: 7 Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 230.76	P	'R Dedi	uctio	on	(\$88.4	46	Bi-We	ekly)				
в.	Full Name of Individual (Last, First, Middle Initial)) or Full O	Orgar	nization Name		Date of	Re	ecei	ipt							
	Mailing Address 1700 MAPLE AVENUE					м м 03	1	E	D D 31]	/ Y	2017	Y			
	City DOWNERS GROVE	State IL		Zip Code 60515-4447	/			-				1184539 s Period	5			
	FEC ID number of contributing federal political committee.	С								-y	365.0	00				
	Name of Employer (for Individual) United HealthCare Services Inc		upat d Dir	tion (for Individual)		Me	emo	o Ite	em							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	P/	P/R Deduction (\$365.00 Bi-Weekly)											
с.	Full Name of Individual (Last, First, Middle Initial)		Orgar	nization Name		Date of	Re	ecei	ipt							
	Mailing Address 5228 ABBOTT AVENUE SOUTH					^M 03	/	E	D D 31]	/ Y	2017 Y	Y			
	City MINNEAPOLIS	State MN		Zip Code 55410-2125								2934539 s Period	5			
	FEC ID number of contributing federal political committee.	С						y			y	76.9	92			
	Name of Employer (for Individual) Optum Services, Inc		•	ion (for Individual) Mgmt		Me	emo	o It	em							
	Receipt For: // Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 230.76	P	/R Ded	uctio	on	(\$38.4	46	Bi-We	ekly)				
s	UBTOTAL of Receipts This Page (optional)							,			9	518.8	34			
т	OTAL This Period (last page this line number onl	y)						-								

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	EMIZED RECEIFIS			tailed Summary Page	▲ 11a 11b 11c 12										
						13		14		15	16	17			
	y information copied from such Reports and Stat for commercial purposes, other than using the n														
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	Unite	edHealth Group PA	C)										
Α.	Full Name of Individual (Last, First, Middle Initia VAN DER WALDE, LAMBERT, , ,	l) or Full O	rganiz	ation Name	[Date of	Re	ceipt							
	Mailing Address 45 AUDUBON CAUSEWAY					03 / D D / Y Y Y Y 2017									
	City	State	Z	ip Code		Trans	acti	on ID	: P	R26283	33234539	5			
	LANTANA	FL		33462-4756	/	Amount	of	Each	Re	ceipt th	is Period				
	FEC ID number of contributing federal political committee.	С						-		-9	384	60			
	Name of Employer (for Individual) United HealthCare Services Inc		•	n (for Individual) Reform/Modernizatn		Me	emo	Item							
	Poppint For:	Aggregate	Year-t	o-Date ▼											
	Primary General Other (specify) ▼			1153.80	P	/R Dedu	uctio	on (\$1	92.	30 Bi-W	/eekly)				
В.	Full Name of Individual (Last, First, Middle Initia GARCIA, SUSAN, , ,	l) or Full O	rganiz	ation Name		Date of	Re	ceipt							
	Mailing Address 54 FOXGLOVE CIRCLE 11077 BIG CANOE					м м 03	/	D 3		/ Y	y y 2017	Y			
	City	State		ip Code		Transa	acti	on ID	: P	R26283	35194539	5			
	BIG CANOE	GA		30143-5142	/	Amount	of	Each	Re	ceipt th	is Period				
	FEC ID number of contributing federal political committee.	С						-		-	365.	00			
	Name of Employer (for Individual) Optum Services, Inc		upatio Case I	n (for Individual) Mgmt		Me	emo	Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-t	o-Date ▼ 365.00	P/	P/R Deduction (\$365.00 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initia SHAPIRO, VICTORIA L, , ,	l) or Full O	rganiz	ation Name		Date of	Re	ceipt							
	Mailing Address 3106 FABER DRIVE					03	/	D 3	D 1	/ Y	y y 2017	Y			
	City	State		ip Code		Trans	acti	ion ID	: P	R26288	82614539	95			
	FALLS CHURCH	VA		22044-1711	/	Amount	of	Each	Re	ceipt th	is Period				
	FEC ID number of contributing federal political committee.	С						,		y	416.	02			
	Name of Employer (for Individual)	Оссі	upatio	n (for Individual)		Me	emo	Item							
	United HealthCare Services Inc	Gov	rt Affs [Dir											
		Aggregate	Year-t	o-Date 🔻											
	Other (specify)			839.76	P	/R Dedi	uctio	on (\$2	.08.	01 Bi-W	/eekly)				
s	UBTOTAL of Receipts This Page (optional)				.			, .		9	1165.	62			
Т	OTAL This Period (last page this line number on	ly)		•••••				-		-					

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			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17										
	y information copied from such Reports and Stateme for commercial purposes, other than using the name			erson for the purpose of soliciting contributions										
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PA	AC (Un	itedHealth Group PA	.C)										
A.	Full Name of Individual (Last, First, Middle Initial) or JARVIE, BRUCE MICHAEL, , ,	Full Orga	nization Name	Date of Receipt										
	Mailing Address 18750 KIPHEART DRIVE			03 / D D / Y Y Y Y Y 03 31 2017										
	City Sta LEESBURG V/	ate A	Zip Code 20176-8220	Transaction ID : PR2629554545395										
	FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period										
	Name of Employer (for Individual) Optum Services, Inc	Occupa VP Fin	tion (for Individual)	Memo Item										
	Receipt For: Agg Primary General Other (specify) ▼	regate Ye	ar-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)										
В.	Full Name of Individual (Last, First, Middle Initial) or WONG, MING TED, , ,	Full Orga	nization Name	Date of Receipt										
	Mailing Address 21066 ASHLEY LANE			03 31 2017										
	,	ate	Zip Code	Transaction ID : PR2629556845395										
	LAKE FOREST C	A	92630-5867	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.			192.30										
	Name of Employer (for Individual) United HealthCare Services Inc		ation (for Individual) n Mgmt	Memo Item										
	Receipt For: Agg Primary General Other (specify) ▼	regate Ye	ar-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initial) or OTTESON, WILLIAM JOHN, , ,	Full Orga	nization Name	Date of Receipt										
	Mailing Address 4545 OXFORD AVE			03 / D D / Y Y Y Y 2017										
	5	ate IN	Zip Code 55436-1405	Transaction ID : PR2632082545395										
			35450 1403	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.			76.92										
	Name of Employer (for Individual) United HealthCare Services Inc		tion (for Individual) Gen Counsel Mgr	Memo Item										
	Receipt For: Agg Primary General Other (specify)	regate Ye	ar-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)										
	UBTOTAL of Receipts This Page (optional)			346.14										

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			for each category of the	X	11a] 11b	5	11c	12					
			Detailed Summary Page		13		14		15	16	17				
	y information copied from such Reports and State for commercial purposes, other than using the na								oliciting	g contrib	utions				
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (l	JnitedHealth Group	PAC)											
Α.	Full Name of Individual (Last, First, Middle Initial) GORSUCH, KIRSTEN, , ,	or Full O	rganization Name		Date of Receipt										
	Mailing Address 2780 COUNTRYSIDE DRIVE WE	ST			03 31 / Y Y Y Y 2017										
	City	State	Zip Code		Trans	acti	ion	ID : P	R2632	0878453	95				
	ORONO	MN	55356-9676		Amount	of	Eac	h Re	ceipt th	is Perio	d				
	FEC ID number of contributing federal political committee.	С			311.35										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm		Me	emo) Ite	m							
	Receipt For:	\ggregate	Year-to-Date V												
	Primary General Other (specify) ▼		695.95		/R Ded	uctic	on (\$215.	20 Bi-W	/eekly)					
В.	Full Name of Individual (Last, First, Middle Initial) TUFFIN, MICHAEL J, , ,	or Full O	rganization Name		Date of	Re	eceip	ot							
	Mailing Address 5904 ASHBY MANOR PLACE				03	/	D	31	/ Y	2017	Y				
	City	State	Zip Code		Trans	acti	on l	ID : P	R26320	0879453	95				
	ALEXANDRIA	VA	22310-2267		Amount	of	Eac	h Re	ceipt th	is Perio	d				
	FEC ID number of contributing federal political committee.	С			384.60										
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) P Public Affairs		Me	emo	lte	m							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P	P/R Deduction (\$192.30 Bi-Weekly)										
с.	Full Name of Individual (Last, First, Middle Initial) WALTER, JEFFREY D, , ,	or Full O	rganization Name		Date of	Re	eceip	ot							
	Mailing Address 1490 SETTLER ST				^M 03	/	D	31	/ Y	2017 [°]	Y				
	City	State	Zip Code							0888453					
	ELBURN	IL	60119-7841		Amount	of	Eac	h Re	ceipt th	is Perio	d				
	FEC ID number of contributing federal political committee.	С					9		y	76	5.92				
	Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) T Architecture		Me	emo) Ite	m							
	Bessint For:														
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76		P/R Ded	uctio	on (\$38.4	6 Bi-We	eekly)					
	UBTOTAL of Receipts This Page (optional)			▶		_	9		5	772	.87				
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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	★ 11a 11b 11c 12 13 14 15 16 17							
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group P/	AC)							
Full Name of Individual (Last, First, Middle TEMPLE, MARTHA R, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 194 LITTLE LANE			M M / D D / Y Y Y Y 03 31 2017							
City DURHAM	State CT	Zip Code 06422-1303	Transaction ID : PR2632873645395 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		311.35							
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 695.95	P/R Deduction (\$215.20 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. PLATT, LAWRENCE DAVID, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 3830 KING STREET			03 / D D / Y Y Y Y Y 2017							
City ALEXANDRIA	State VA	Zip Code 22302-1906	Transaction ID : PR2632880745395 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Comm	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. HOWARD, PATRICIA A, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 12 STAYMAN COURT	1		03 / D D / Y Y Y Y Y 2017							
City MANALAPAN	State NJ	Zip Code 07726-7928	Transaction ID : PR2632882745395 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		384.60							
Name of Employer (for Individual) Optum360 Services Inc		upation (for Individual) Gen Mgmt	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)		1080.55							
TOTAL This Period (last page this line numl	per only)									

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P/	AC)								
Full Name of Individual (Last, First, Middle A. HAPGOOD, WADE, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 330 NW 82ND			03 / D D / Y Y Y Y Y 03 31 2017								
City TOPEKA	State KS	Zip Code 66617-2223	Transaction ID : PR2634167045395 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.92								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$63.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. CASTILLO, FLORA M, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 202 N ROSBOROUGH AVE			03 / D D / Y Y Y Y 2017								
City VENTNOR CITY	State NJ	Zip Code 08406-2022	Transaction ID : PR2634177945395 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		192.30								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. PRIBLE, JOHN M, , ,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 1923 SHIVER DR	State	Zip Code	03 / 31 2017 Transaction ID : PR2634656645395								
ALEXANDRIA	VA	22307-1629	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		384.60								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional).			653.82								
TOTAL This Period (last page this line number	er 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												
•	information panied from such D	ha				13		14		15		16	17				
	y information copied from such Reports and Stat for commercial purposes, other than using the n																
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	I PAC (l	Uni	tedHealth Group PA	AC)												
A.	Full Name of Individual (Last, First, Middle Initia SCHEID, ADREAN ELISABETH, , ,	l) or Full O	rgar	nization Name		Date of Receipt											
	Mailing Address 2915 CATHEDRAL AVENUE N	N			03 / D D / Y Y Y Y 03 31 2017 Transaction ID : PR2634880445395												
	City	State		Zip Code		Trans	acti	ion	ID : I	PR26	63488	8044539	95				
	WASHINGTON	DC		20008-3406		Amount	of	Ea	ach Re	eceip	ot this	s Period	l				
	FEC ID number of contributing federal political committee.	С						-			,	384	.60				
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) rnal Affs		Me	emo	o Ite	em								
	Receipt For:	Aggregate	Yea	r-to-Date ▼													
	Primary General Other (specify) ▼		-	1153.80	P	/R Ded	uctio	on	(\$192	.30 E	Bi-W€	eekly)					
в.	Full Name of Individual (Last, First, Middle Initia PESCATELLO, SARA M, , ,	l) or Full O	rgar	nization Name		Date of	Re	ecei	ipt								
	Mailing Address 2149 CALIFORNIA STREET NW APT #D	V				03	/	Γ	D D 31	/	Y	y y 2017	Y				
	City WASHINGTON	State DC		Zip Code 20008-1834								3854539 8 Perioc					
	FEC ID number of contributing federal political committee.	С				192.30											
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) t Affs		Me	emo	o Ite	em								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 576.90	P	P/R Deduction (\$96.15 Bi-Weekly)											
с.	Full Name of Individual (Last, First, Middle Initia ROOS, THOMAS EDWARD, , ,	l) or Full O	Orgar	nization Name		Date of	Re	ecei	ipt								
	Mailing Address 3199 KAGEN AVE NE					03	/	C	^D 31	/	Y	2017 [°]	Ŷ				
	City SAINT MICHAEL	State MN		Zip Code 55376-3416								512453					
	FEC ID number of contributing federal political committee.	С				Amount	OT	Ea	ich Re	eceip	ot this	s Perioc 384	_				
	Name of Employer (for Individual) United HealthCare Services Inc		•	ion (for Individual) ef Acctng Off		M	emo	o It	em								
	Receipt For: Primary General Other (specify)	1		r-to-Date ▼ 1153.80	I P	/R Ded	uctio	on	(\$192	2.30	Bi-We	eekly)					
s	JBTOTAL of Receipts This Page (optional)				.							961	50				
т	OTAL This Period (last page this line number on	ıly)			-			-			,						

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	 ب ا							
			13 14 15 16 berson for the purpose of soliciting contribution e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)											
UnitedHealth Group Inco	porated PAC (l	JnitedHealth Group PA	AC)								
Full Name of Individual (Last, First, MAAMS, SCOTT MARTIN, , ,	/liddle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 7019 TRUMPETER	SWAN LANE		03 31 2017								
City MANASSAS	State VA	Zip Code 20112-3293	Transaction ID : PR2636726245395 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		192.30								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) t Affs Dir	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$96.15 Bi-Weekly)								
Full Name of Individual (Last, First, M B. HILL, DAVID, , ,	liddle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 1800 RIDGE AVENU			03 / D D / Y Y Y Y 2017								
City EVANSTON	State	Zip Code 60201-5980	Transaction ID : PR2636726545395								
	112	00201-5960	Amount of Each Receipt this Period	_							
FEC ID number of contributing federal political committee.	С		365.00								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Assc Gen Counsel	Memo Item								
Receipt For:	Aggregate	Year-to-Date V									
Other (specify) ▼		365.00	P/R Deduction (\$365.00 Bi-Weekly)								
Full Name of Individual (Last, First, M SMITH, KENNETH JOHN,		rganization Name	Date of Receipt								
Mailing Address 1200 WASHINGTON			03 / D D / Y Y Y Y 03 31 2017								
City BOSTON	State MA	Zip Code 02118-2132	Transaction ID : PR2636734545395 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		76.92								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)								
SUBTOTAL of Receipts This Page (op	tional)		634.22								
TOTAL This Period (last page this line	number only)			Π							

Use separate schedule(s)

FOR LINE NUMBER:

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		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
or for commercial purposes, other than usin			erson for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpo	rated PAC (I	JnitedHealth Group PA	4C)									
Full Name of Individual (Last, First, Midd A. HAUSCHILDT, TODD CURTIS, , ,	le Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 1705 ESTATES TRAIL			03 / D D / Y Y Y Y 03 31 2017									
City BURNSVILLE	State MN	Zip Code 55306-5512	Transaction ID : PR2638114745395 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		76.92									
Name of Employer (for Individual) Optum Services, Inc	Occ VP	upation (for Individual) IT	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)									
Full Name of Individual (Last, First, Midd B. FRY, BENJAMIN HOWARD, , ,	le Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 3115 BRIARCLIFF GAB	ES CIRCLE		03 31 2017									
City ATLANTA	State GA	Zip Code 30329-2456	Transaction ID : PR2638114945395 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		76.92									
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$63.46 Bi-Weekly)									
Full Name of Individual (Last, First, Midd C. ZEGLINSKI, MICHAEL G, , ,	le Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 1 TRIMONT LANE #610A	1		03 / D D / Y Y Y Y 2017									
City PITTSBURGH	State PA	Zip Code 15211-1206	Transaction ID : PR2639701845395 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		384.60									
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Pharm Ops	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optiona	al)		538.44									
TOTAL This Period (last page this line nur	nber only)											

SCHEDULE A (FEC Form 3X) ••

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ted PAC (UnitedHealth Group P	AC)								
Full Name of Individual (Last, First, Middle SKOMO, DAVID A, , ,	Initial) or Full C	Organization Name	Date of Receipt								
Mailing Address 4002 PHILLIPS COURT			03 31 Y Y Y Y Y 2017								
City MARS	State PA	Zip Code 16046-2140	Transaction ID : PR2639702745395 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.92								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Pharm Ops	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. SURRELL, CHRISTOPHER P, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 620 DARTINGTON WAY			03 31 / Y Y Y Y Y 03 31 2017								
City JOHNS CREEK	State GA	Zip Code 30022-8045	Transaction ID : PR2639758145395 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.92								
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Mktg Bus Dev	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. BIGHAM, ANNE ELIZABETH, ,		Organization Name	Date of Receipt								
Mailing Address 1 FLETCHER PLACE			03 / D D / Y Y Y Y Y 2017								
City HOPKINS	State MN	Zip Code 55305-4428	Transaction ID : PR2639771445395 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		238.09								
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.09	P/R Deduction (\$238.09 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional).			391.93								
TOTAL This Period (last page this line number	er only)										

Use separate schedule(s)

FOR LINE NUMBER:

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TEMIZED RECEIPTS		for each category of the	X 1	l1a		11b	11c	12						
		Detailed Summary Page		13	_	14	15	16	17					
Any information copied from such Reports a or for commercial purposes, other than usin														
NAME OF COMMITTEE (In Full)														
> UnitedHealth Group Incorpo	orated PAC (I	JnitedHealth Group PA	AC)											
Full Name of Individual (Last, First, Midd THIERER, MARK A, , ,	le Initial) or Full C	rganization Name	Da	Date of Receipt										
Mailing Address 11 EAST WALTON UNIT 4701			- L	M = M / D = D / Y = Y = Y Y 03 31 2017										
City CHICAGO	State IL	Zip Code 60611-5441						77364539	5					
		00011-3441	Am	nount	of I	Each R	eceipt th	is Period						
FEC ID number of contributing federal political committee.	C					_	- 7 -	384.	60					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Segment CEO		Mer	no	Item								
Receipt For:		Year-to-Date ▼	_											
Primary General Other (specify) ▼	Aggregate	1153.80	P/R	Dedu	ctio	on (\$192	2.30 Bi-W	/eekly)						
		Agis Agis Agis												
Full Name of Individual (Last, First, Midd B. NELSON, ELLEN RUTH, , ,	le Initial) or Full C	rganization Name	Da	ite of I	Red	ceipt								
Mailing Address 11882 TILDEN PLACE			M	03	/	31	/ Y	2017	Y					
City	State	Zip Code	Т	ransa	ctio	on ID : I	PR26397	79534539	5					
WELLINGTON	FL	33414-6056						is Period						
FEC ID number of contributing federal political committee.	С				_	y		76.	92					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) CInt Svc Acct Mgmt		Mer	no	Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R	Deduc	ctio	n (\$38.4	46 Bi-We	ekly)						
Full Name of Individual (Last, First, Midd WU, LAMBERT ANTHONY, ,		rganization Name	Da	ite of I	Red	ceipt								
Mailing Address 11008 CHERWELL COL	JRT		M	03	/	31	/ Y	y y 2017	Y					
City	State	Zip Code	Т	ransa	cti	on ID :	PR26404	46164539	5					
LAS VEGAS	NV	89144-4526	Am	nount	of I	Each R	eceipt th	is Period						
FEC ID number of contributing federal political committee.	С					y I	9	76.	92					
Name of Employer (for Individual)	Occ	upation (for Individual)	- F	Mer	mo	Item								
Health Plan of Nevada	Med	1 ()												
Receipt For:	I	Year-to-Date ▼	_											
Primary General Other (specify)		230.76	P/R	Dedu	ctic	on (\$38.	46 Bi-We	eekly)						
SUBTOTAL of Receipts This Page (optiona TOTAL This Period (last page this line nur		r				y		538.	44					

SCHEDULE A (FEC Form 3X) •

Use separate schedule(s)

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(check only one)

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TEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12				
			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)	orated PAC (I	JnitedHealth Group PA	NC)				
Full Name of Individual (Last, First, Mid A. STOW, CHRISTINA L, , ,	ddle Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 4709 ALTON PL NW			03 / D D / Y Y Y Y 2017				
	State DC	Zip Code	Transaction ID : PR2640466445395				
WASHINGTON	BC	20016-2041	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		384.60				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) External Affs	Memo Item				
Receipt For:	Aggregate	Year-to-Date ▼	-				
Primary General Other (specify) ▼	P/R Deduction (\$192.30 Bi-Weekly)						
Full Name of Individual (Last, First, Mid B. BERKOWITZ, JEFFREY, , ,	Date of Receipt						
Mailing Address 5 MORNINGSIDE DRI	Mailing Address 5 MORNINGSIDE DRIVE						
City	State	Zip Code	Transaction ID : PR2640469245395				
LIVINGSTON	NJ	07039-1811	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		384.60				
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) um Exec	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)				
Full Name of Individual (Last, First, Mic c. SCHUTT, ERIC A, , ,	ddle Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 2359 US HWY 51			03 31 2017				
City	State	Zip Code	Transaction ID : PR2640846245395				
MC FARLAND	WI	53558-9142	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		384.60				
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) PExternal Affs	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)				
SUBTOTAL of Receipts This Page (option	nal)	••••••	1153.80				
TOTAL This Period (last page this line n	umber only)						

SCHEDULE A (FEC Form 3X)

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
UnitedHealth Group Incorpor	ated PAC (I	JnitedHealth Group PA	AC)						
Full Name of Individual (Last, First, Middle MINTO, RYAN J, , ,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1505 HERITAGE CLUB A	VE		03 / D D / Y Y Y Y Y 03 31 2017						
City WAKE FOREST	State NC	Zip Code 27587-7698	Transaction ID : PR2640882445395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) United HealthCare Services Inc									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$50.96 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. FOX, ELIZABETH NICOLE, , ,	Date of Receipt								
Mailing Address 1021 NORTH GARFIELD	03 / D D / Y Y Y Y 2017								
City ARLINGTON	State VA	Zip Code 22201-2548	Transaction ID : PR2642832045395						
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period						
Name of Employer (for Individual)		upation (for Individual)	Memo Item						
United HealthCare Services Inc	Dir	Govt Affs							
Receipt For:	Aggregate	Year-to-Date V							
Other (specify) V		576.90	P/R Deduction (\$96.15 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. HAMMOND, MICHAEL JOSEF		rganization Name	Date of Receipt						
Mailing Address 244 NE 59TH TERR			03 / D D / Y Y Y Y 2017						
City TOPEKA	State KS	Zip Code 66617-1661	Transaction ID : PR2644644845395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.92						
Name of Employer (for Individual) Optum Services, Inc	Occ Proc	upation (for Individual) I Dir	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 230.76	P/R Deduction (\$38.46 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)		346.14						
TOTAL This Period (last page this line num	ber only)								

SCHEDULE A (FEC Form 3X) •

Use separate schedule(s)

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171			Use separate schedule(s)	(check only one)						
111	EIVILLED RECEIPIS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
	y information copied from such Reports and Sta for commercial purposes, other than using the n									
$\overline{)}$	NAME OF COMMITTEE (In Full)									
	UnitedHealth Group Incorporated	I PAC (l	JnitedHealth Group PA	AC)						
A.	Full Name of Individual (Last, First, Middle Initia MCKOY, PHILIP GREGORY JAMES, , ,	l) or Full O	rganization Name	Date of Receipt						
	Mailing Address 927 LINCOLN AVE			03 31 / Y Y Y Y 2017						
	City SAINT PAUL	State MN	Zip Code 55105-3149	Transaction ID : PR2644651645395						
	FEC ID number of contributing			Amount of Each Receipt this Period						
	federal political committee.	С		384.60						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Grp CIO	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$192.30 Bi-Weekly)						
			7							
в.	Full Name of Individual (Last, First, Middle Initia SCHACHER, ELIZABETH ALDEN, , ,		rganization Name	Date of Receipt						
	Mailing Address 3579 13TH ST NW APT 6	03 / D D / Y Y Y Y 2017								
	City WASHINGTON	State DC	Zip Code 20010-2001	Transaction ID : PR2644918345395						
	FEC ID number of contributing	1	20010-2001	Amount of Each Receipt this Period						
	federal political committee.	С		384.60						
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item						
	Receipt For:	Aggregate	Year-to-Date 🔻	1						
	Other (specify) ▼		, 1153,80	P/R Deduction (\$192.30 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Initia MISTRY, RASHMITA, , ,	l) or Full O	rganization Name	Date of Receipt						
	Mailing Address 404 RAVENSCLIFF DR			03 / D D / Y Y Y Y 03 31 2017						
	City MEDIA	State PA	Zip Code 19063-1457	Transaction ID : PR2645169145395						
	FEC ID number of contributing	C		Amount of Each Receipt this Period						
	federal political committee.	U								
	Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Mgmt	Memo Item						
	Primary General		Year-to-Date ▼	P/R Deduction (\$238.09 Bi-Weekly)						
	Other (specify)		238.09							
s	UBTOTAL of Receipts This Page (optional)		•	1007.29						
т	OTAL This Period (last page this line number on	ly)								

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12					
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)								
UnitedHealth Group Incorpora	ited PAC (I	JnitedHealth Group P/	4C)					
Full Name of Individual (Last, First, Middle STANKIEWICZ, DENNIS ANDREW, ,		rganization Name	Date of Receipt					
Mailing Address 17761 WEAVER LAKE DRI	VE		03 31 2017					
City MAPLE GROVE	State MN	Zip Code 55311-1328	Transaction ID : PR2646304045395 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		4999.80					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Gen Auditor	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4999.90	P/R Deduction (\$0.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. AHLSTROM, ALEXIS K, , ,	Date of Receipt							
Mailing Address 3421 OAKWOOD TERRAC			M M / D D / Y					
City WASHINGTON	State DC	Zip Code 20010-1819	Transaction ID : PR2699187145395 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		76.72					
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) ⁄t Affs Dir	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.16	P/R Deduction (\$38.36 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. BETCHLEY, ROBERT, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 3371 EMERALD VALLEY D	DRIVE		03 / D D / Y Y Y Y 2017					
City ONALASKA	State WI	Zip Code 54650-8746	Transaction ID : PR2699189645395 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		200.00					
Name of Employer (for Individual) Optum Services, Inc		upation (for Individual) Gen Mgmt	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 215.86	P/R Deduction (\$100.00 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional).			5276.52					
TOTAL This Period (last page this line number	er only)							

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TEMIZED RECEIPTS			Detailed Summary Page	×	11a		11		_	1c	12	
					13		14		1	-	16	17
Any information copied from such Reports and State or for commercial purposes, other than using the na												
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (I	Uni	tedHealth Group PA	C)								
Full Name of Individual (Last, First, Middle Initial) A. FARRELL, ELIZABETH ANN, , ,	nization Name	Date of Receipt										
Mailing Address 18777 THE PINES					м м 03	/	Γ	D D D	/	Y	y y 2017	Y
City	State		Zip Code		Trans	acti	ion	1D : 1	PR2	6999	8004539	5
EDEN PRAIRIE	MN		55347	A	mount	of	Ea	ich Re	ecei	pt thi	s Period	
FEC ID number of contributing federal political committee.	С						-			- y -	384.	60
Name of Employer (for Individual) Optum Services, Inc		cupat P Op	ion (for Individual) s		Me	emo	o Ite	em				
Receipt For:	Aggregate	Yea	r-to-Date ▼									
Primary General Other (specify) ▼		Ţ	1153.80	P/	R Dedu	uctio	on	(\$192	.30	Bi-We	eekly)	
Full Name of Individual (Last, First, Middle Initial) MCCAIN, KELLY LYNN, , ,	or Full C	Drgar	nization Name		Date of	Re	ecei	ipt				
Mailing Address 531 T STREET NW APT 204			03 31 2017									
City	State		Transaction ID : PR2700923545395									
WASHINGTON	DC		20001-2087	A	mount	of	Ea	ich Re	ecei	pt thi	s Period	
FEC ID number of contributing federal political committee.	С				_		-			-	120.	00
Name of Employer (for Individual) United HealthCare Services Inc		•	iion (for Individual) I Affs Dir		Me	emo	o Ite	em				
Receipt For:	Aggregate	Yea	r-to-Date ▼	P/	P/R Deduction (\$60.00 Bi-Weekly)							
Other (specify) v		,	300.00		N Deut		511 ((ψυυ.υ	000	1 1 1 0 0 0	SKIY)	
Full Name of Individual (Last, First, Middle Initial) C. FRINGER, TRICIA LYNN, , ,	or Full C	Drgar	nization Name		Date of	Re	ecei	ipt				
Mailing Address 2809 STANFORD AVE					^M 03	/	Г	D D 31	/	Y	2017 Y	Y
City	State TX		Zip Code								1864539	
DALLAS		_	75225-7917	A	mount	of	Ea	ich Re	ecei	pt thi	s Period	
FEC ID number of contributing federal political committee.	С	-					y	_	_	9	238.	09
Name of Employer (for Individual) Optum Services, Inc	Occ VP I	•	ion (for Individual)		Me	emo	o Ite	em				
Receipt For:	1		r-to-Date ▼									
Primary General Other (specify)		Ţ	238.09	P/	'R Ded	uctio	on	(\$238	.09	Bi-W	eekly)	
SUBTOTAL of Receipts This Page (optional)											742.	69
TOTAL This Period (last page this line number only							,			,		

FOR LINE NUMBER:

PAGE 126 OF

		Use separate schedule(s)	(check only one)						
I LIVILLU KEGEIPIS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
Any information copied from such Reports and or for commercial purposes, other than using			13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee. 16 17						
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorpora	ated PAC (I	JnitedHealth Group P	AC)						
Full Name of Individual (Last, First, Middle O'CONNELL, DANIEL T, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 3325 W 18TH AVENUE			M M / D D / Y Y Y Y 03 31 2017						
City DENVER	State CO	Zip Code 80204-1681	Transaction ID : PR2701819645395 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		154.16						
Name of Employer (for Individual) United HealthCare Services Inc		upation (for Individual) Govt Affs	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 308.32	P/R Deduction (\$102.08 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B.	Date of Receipt								
Mailing Address									
City	State	Zip Code	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С								
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V]						
Full Name of Individual (Last, First, Middle C.	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address									
City	State	Zip Code	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С								
Name of Employer (for Individual)	Occ	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date V]						
SUBTOTAL of Receipts This Page (optional).			154.16						
TOTAL This Period (last page this line numb	er only)		120595.71						

S	CHEDULE B (FEC Form 3X)	11		F	OR L		NUMBER: PAGE 127 OF 134					
ITEMIZED DISBURSEMENTS			arate schedule(s) category of the	(c		only 21b						
		Detailed	Summary Page			210 28a	22 X 23 26 27 28b 28c 29 30b					
	y information copied from such Reports and State for commercial purposes, other than using the na											
$\left \right\rangle$	NAME OF COMMITTEE (In Full)			_	_							
	UnitedHealth Group Incorporated	PAC (Un	itedHealth (Grou	p F	PAC))					
Α.	Full Name (Last, First, Middle Initial) Issa for Congress						Date of Disbursement					
	Mailing Address PO Box 760						03 06 <u>Y Y Y Y Y</u> 2017					
	City	State CA	Zip Code				FEC Identification Number					
	Vista Purpose of Disbursement Contribution	CA	92085-0760	C)11		C C00350520					
	Candidate Name			Cate	egory	v/	Transaction ID : 40620689 Amount of Each Disbursement this Period					
	Issa, Darrell, E., Rep.,				ype		1000.00					
	Office Sought: x House Disburse Senate President x	ement For: 2 Primary Other (spec	General				Contribution Memo Item					
	State: CA District: 49	_										
В.	Full Name (Last, First, Middle Initial) Katko For Congress						Date of Disbursement					
	Mailing Address 228 S Washington St Ste 115		03 06 2017									
	City Alexandria		FEC Identification Number									
	Purpose of Disbursement Contribution Candidate Name			(011		C C00556365 Transaction ID : 40620691					
	Katko, John, , Rep.,				egory ype	y/	Amount of Each Disbursement this Period					
		ment For:	2018		ype		2500.00					
	Senate X	1	General				Contribution					
	State: NY District: 24	Other (spec	cify)				Memo Item					
C.	Full Name (Last, First, Middle Initial) Tom Rice For Congress						Date of Disbursement					
	Mailing Address PO Box 70098						03 / D D / Y Y Y Y 06 / 2017					
	City Myrtle Beach	State SC	Zip Code 29572				FEC Identification Number					
	Purpose of Disbursement Contribution			C)11		C C00506048 Transaction ID : 40620692					
	Rice, Tom, , Rep.,				egory ype	y/	Amount of Each Disbursement this Period					
	Office Sought: X House Disburse			2500.00								
	State: SC District: 07	Primary Other (spec	General cify) ▼				Contribution Memo Item					
	State: SC District: 07											
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S	CHEDULE B (FEC Form 3X)			FO	R LIN	IE NU	JMBER:	:			PA	GE	128 C)F 134
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		Detailed	Summary Page		28		28b		28c	\vdash	29	\vdash	30b	
	y information copied from such Reports and State for commercial purposes, other than using the nar													
$\left \right\rangle$	NAME OF COMMITTEE (In Full)		14 a - 11 1 14 1 - 17	-		\sim								
//	UnitedHealth Group Incorporated	PAC (Un	itedHealth G	sroup		C)								
Α.	Full Name (Last, First, Middle Initial) Together Holding Our Majority PA Mailing Address PO Box 97275	С	;					Date of Disbursement 03 06 2017						Ŷ
	City	State Zip Code						ontifi	ootior	- NI	mbor			
	Raleigh	NC	27624				FEC Id	entin	catior	1 NU	mber	_	-	
	Purpose of Disbursement Contribution			01	11		С	C00	57132	23				
	Candidate Name						Tra Amoun		ction Each					Period
	Together Holding Our Majority PAG			Cate Ty			Anoun		_0011	JISC	, ar sel			-
	Office Sought: House Disburse Senate President District:	ment For: Primary Other (spec	General cify) ▼				Me	mo l		Cont	ributi	-	5000.0	0
B.	Full Name (Last, First, Middle Initial) ORRINPAC Mailing Address PO Box 3986							Date of Disbursement						
	City Washington	Zip Code 20027				FEC Identification Number								
	Purpose of Disbursement Contribution Candidate Name	<u> </u>	011 Category/ Category/ Ca					Period						
	ORRINPAC			Ty										
	Office Sought: House Disburse Senate President District:	ment For: Primary Other (spec	General cify)				Ме	mo l		Cont	tributi	1	2500.0	0
с.	Full Name (Last, First, Middle Initial) Collins For Senator						Date of Disbursement							
	Mailing Address PO Box 1096						м м 03		D 1:		/ Y		017 017	Y
	City Bangor Purpose of Disbursement Contribution	State ME	Zip Code 04402	FEC Identification Number										
	Candidate Name Collins, Susan, M., Sen., 011 Category/ Type							Transaction ID : 40662425 Amount of Each Disbursement this Period						
	Office Sought: House Disbursement For: 2020 x Senate Primary General President Other (specify) ▼						Me	emo l		Con	tributi	1	2500.0	0
⊢	UBTOTAL of Disbursements This Page (optional)				-	_	[. [.		y	-	7	÷	0000.0	뉘

S	CHEDULE B (FEC Form 3X)			F		NUMBER: PAGE 129 OF 134				
ITEMIZED DISBURSEMENTS		Use sepa for each		heck only	/ one)					
			Summary Page		21b	22 X 23 26 27 28b 28c 29 30b				
	y information copied from such Reports and State for commercial purposes, other than using the nar									
\backslash	NAME OF COMMITTEE (In Full)			~						
	UnitedHealth Group Incorporated I	PAC (Un	litedHealth C	rou	p PAC	;)				
Α.	Full Name (Last, First, Middle Initial) Walberg for Congress	Date of Disbursement								
	Mailing Address PO Box 1362					03 13 2017				
	5	State MI	Zip Code			FEC Identification Number				
	Jackson Purpose of Disbursement Contribution		49204-1362	C)11	С С00390724				
	Candidate Name				egory/	Transaction ID : 40662426 Amount of Each Disbursement this Period				
	Walberg, Timothy, Lee, Rep.,				ype					
	Senate X President	ment For: 2 Primary Other (spe	General			Contribution Memo Item				
	State: MI District: 07 Full Name (Last, First, Middle Initial)									
В.	Perlmutter For Congress	Date of Disbursement								
	Mailing Address 3440 Youngfield Street #264	03 17 2017								
	City Wheat Ridge		FEC Identification Number							
	Purpose of Disbursement Contribution)11	C C00410639 Transaction ID : 40669965							
	Candidate Name				egory/	Amount of Each Disbursement this Period				
	Perlmutter, Edwin, , Rep., Office Sought: x House Disburse	ment For:	2018	Т	уре					
	Senate	Primary	General			Contribution				
	State: CO District: 07	Other (spec	cify)			Memo Item				
C.	Full Name (Last, First, Middle Initial) Sean Patrick Maloney For Congres	SS				Date of Disbursement				
	Mailing Address PO Box 270					03 / D D / Y Y Y Y 03 17 2017				
	City Newburgh	State NY	Zip Code 12550			FEC Identification Number				
	Purpose of Disbursement Contribution			C)11	C C00512426 Transaction ID : 40669966				
	Candidate Name Maloney, Sean, , Rep.,	egory/ ype	Amount of Each Disbursement this Period							
		ment For: 2 Primary	2018 General			2500.00				
	State: NY District: 18	Other (spe				Contribution Memo Item				
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S	CHEDULE B (FEC Form 3X)			F	OR I		NUMBER: PAGE 130 OF 134					
IT	EMIZED DISBURSEMENTS	Use sepa for each		heck		y one)						
			Summary Page			21b 28a	22 X 23 26 27 28b 28c 29 30b					
	y information copied from such Reports and State for commercial purposes, other than using the na											
$\left \right\rangle$	NAME OF COMMITTEE (In Full)			-								
	UnitedHealth Group Incorporated	PAC (Ur	nitedHealth (rouء	рΡ	AC,)					
Α.	Full Name (Last, First, Middle Initial) People For Derek Kilmer						Date of Disbursement					
	Mailing Address PO Box 1381						03 / D D / Y Y Y Y 17 2017					
	City Tacoma	State WA	Zip Code 98402				FEC Identification Number					
	Purpose of Disbursement	•••	30402	_	_		C C00514893					
	Contribution			0	011		Transaction ID : 40669970					
	Candidate Name					/	Amount of Each Disbursement this Period					
	Kilmer, Derek, , Rep.,				ype		2500.00					
		ement For:	2018 General				2500.00					
	President	Primary Other (spe					Contribution					
	State: WA District: 06		oliy) v				Memo Item					
в.	Full Name (Last, First, Middle Initial) Synergy PAC		Date of Disbursement									
	Mailing Address 6849 Old Dominion Dr Suite 222		03 17 2017									
	City McLean		FEC Identification Number									
	Purpose of Disbursement Contribution		С С00409623									
	Candidate Name			011 Category/			Transaction ID: 40669971 Amount of Each Disbursement this Period					
	Synergy PAC			Туре								
		ement For:	· · ·				5000.00					
	Senate President	Primary	General				Contribution					
	State: District:	Other (spe	CITY)				Memo Item					
~	Full Name (Last, First, Middle Initial)						Date of Diskurgement					
С.	Ami Bera for Congress						Date of Disbursement					
	Mailing Address PO Box 582496						03 / D D / Y Y Y Y 20 2017					
	City Elk Grove	State CA	Zip Code 95758				FEC Identification Number					
	Purpose of Disbursement Contribution	_		0)11		C C00461061					
	Candidate Name				egory		Transaction ID : 40672097 Amount of Each Disbursement this Period					
	Bera, Amerish, , Rep.,	"	Amount of Each Disbursement this Pendu									
		ement For:	2018		ype		1000.00					
	Senate 🗶	-	General				Contribution					
	State: CA District: 07	Other (spe	cify) 🔻				Memo Item					
	State: CA District: 07											
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SCHEDULE B (FEC Form 3X)			FOR II	NE NUMBER: PAGE 131 OF 134
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check	$\begin{array}{c c} 1 \\ 1 \\ 1 \\ 2 \\ 2 \\ 8 \\ 2 \\ 2 \\ 8 \\ 2 \\ 2 \\ 2 \\ 2$
Any information copied from such Reports and State or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated	PAC (Un	itedHealth (Group P	AC)
Full Name (Last, First, Middle Initial) A. Susan Davis for Congress				Date of Disbursement
Mailing Address PO Box 84049				03 20 2017
City San Diego	State CA	Zip Code 92138-4049		FEC Identification Number
Purpose of Disbursement Contribution			011	C C00344671 Transaction ID : 40672099
Candidate Name Davis, Susan, A., Rep.,			Category/ Type	Amount of Each Disbursement this Period
Office Sought: X House Disburse Senate President X State: CA District: 53	ment For: 2 Primary Other (spec	General		Contribution Memo Item
Full Name (Last, First, Middle Initial) B. Friends Of Erik Paulsen Mailing Address P.O. Box 44369				Date of Disbursement
250 Prairie Center Drive City Eden Prairie Purpose of Disbursement		FEC Identification Number		
Senate x President	ment For: 2 Primary Other (spec	General	011 Category/ Type	Transaction ID : 40672100
State: MN District: 03 Full Name (Last, First, Middle Initial) C. Kurt Schrader for Congress				Date of Disbursement
Mailing Address PO Box 3314				03 / D D / Y Y Y Y 20 2017
City Oregon City Purpose of Disbursement Contribution	State OR	Zip Code 97045	011	FEC Identification Number C C00446906 Transaction ID : 40672116
Candidate Name Schrader, Kurt, , Rep., Office Sought: Senate President	ment For: 2 Primary Other (spec	General	Category, Type	Amount of Each Disbursement this Period 2500.00 Contribution Memo Item
State: OR District: 05 SUBTOTAL of Disbursements This Page (optional). TOTAL This Period (last page this line number only)				6000.00

S	CHEDULE B (FEC Form 3X)			F		E NUMBER: PAGE 132 OF 134				
ITEMIZED DISBURSEMENTS		Use sepa for each		heck or	/ one)					
			Summary Page		21					
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ments may me and add	not be sold or us ress of any politic	ed by al con	any pe nmittee	rson for the purpose of soliciting contributions to solicit contributions from such committee.				
\backslash	NAME OF COMMITTEE (In Full)			`						
	UnitedHealth Group Incorporated	PAC (Ur	litedHealth C	Fou	рРА	.C)				
Α.	Full Name (Last, First, Middle Initial) Schneider For Congress	Date of Disbursement								
	Mailing Address PO Box 1318	03 23 2017								
	City Deerfield	State IL	Zip Code 60015			FEC Identification Number				
	Purpose of Disbursement Contribution	1	00015	_		C C00495952				
	Candidate Name			less.)11	Transaction ID : 40674942				
	Schneider, Brad, , Rep.,				egory/ ype	Amount of Each Disbursement this Period				
	Office Sought: 🗶 House Disburse	ment For:	2018		760	2500.00				
	Senate x President	Primary Other (spe	General cifv) ▼			Contribution				
	State: IL District: 10					Memo Item				
_	Full Name (Last, First, Middle Initial)									
в.	Tiberi for Congress	Date of Disbursement								
	Mailing Address 2931 E Dublin Granville Road, Su	03 / 28 / Y Y Y Y 2017								
	City	FEC Identification Number								
	Columbus Purpose of Disbursement	C C00347492								
		Transaction ID : 40702884								
	Candidate Name				egory/	Amount of Each Disbursement this Period				
	Tiberi, Patrick, J., Rep., Office Sought: Y House Disburse	ment For: 2018				4000.00				
	Senate X		General			Contribution				
	State: OH District: 12	Other (spe	cify)			Memo Item				
_	Full Name (Last, First, Middle Initial)									
C.	Ryan For Congress Inc					Date of Disbursement				
	Mailing Address PO Box 1488					03 / D D / Y Y Y Y 2017				
	City	State	Zip Code			FEC Identification Number				
	Janesville Purpose of Disbursement	WI	53547-1488	_		С сооззов94				
	Contribution			0)11	Transaction ID : 40715670				
	Candidate Name Ryan, Paul, D., Rep.,	Amount of Each Disbursement this Period								
	Office Sought: X House Disburse	5000.00								
	Senate x	Contribution								
	President	Other (spe	cify) 🔻			Memo Item				
	State: WI District: 01									
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т	OTAL This Period (last page this line number only	′)			►					

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 133 OF 134							
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only	y one)							
		Summary Page	21b 28a	22 X 23 26 27 28b 28c 29 30b							
Any information copied from such Reports and State or for commercial purposes, other than using the na			d by any perso	on for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)	// .										
UnitedHealth Group Incorporated	PAC (Ur	nitedHealth G	Froup PAC)							
Full Name (Last, First, Middle Initial) A. AMERIPAC: The Fund for a Grea	Date of Disbursement										
Mailing Address 700 13th Street NW, Suite 600											
City Washington	State DC	Zip Code 20005		FEC Identification Number							
Purpose of Disbursement Contribution	1		011	C C00271338 Transaction ID : 40715676							
Candidate Name	Candidate Name AMERIPAC: The Fund for a Greater America										
	ement For: Primary Other (spe	General	1990	5000.00 Contribution							
State: District:		-) , (Memo Item							
Full Name (Last, First, Middle Initial) B.				Date of Disbursement							
Mailing Address	1										
City	State	Zip Code		FEC Identification Number							
Purpose of Disbursement		C									
Candidate Name		Category/ Type	Amount of Each Disbursement this Period								
Office Sought: House Disburs Senate	ement For: Primary	General									
State: District:	Other (spe	cify)		Memo Item							
Full Name (Last, First, Middle Initial)				Date of Disbursement							
Mailing Address				M M / D D / Y Y Y Y							
City	State	Zip Code		FEC Identification Number							
Purpose of Disbursement	С										
Candidate Name	Amount of Each Disbursement this Period										
Office Sought: House Disburs Senate	ement For: Primary	General	Туре								
State: District:	Other (spe	cify) ▼		Memo Item							
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SCHEDULE B (FEC Form 3X)			FC	DR LI	NE I	NUMBEF	ł:			PAGE	E 134	+ OF 134			
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NAME OF COMMITTEE (In Full)	/ .		_	_											
UnitedHealth Group Incorporated	PAC (Ur	nitedHealth (Grou	р Р.)									
Full Name (Last, First, Middle Initial) A. Mike Causey Campaign							Date of Disbursement								
Mailing Address PO Box 97696						03 / D D / Y Y Y Y 02 2017									
City	State	Zip Code			FEC Identification Number										
Raleigh Purpose of Disbursement	NC	27624				0									
Void - Mike Causey Campaign; check dated 12/1	3/16		0	11	Ш	C									
Candidate Name	Candidate Name Category/						Transaction ID : 40618064 Amount of Each Disbursement this Period								
Causey, Mike, , ,				/pe											
Senate	Senate Primary General						-2000.00 Void - Mike Causey Campaign;								
State: District:	Other (spe	ecity) 🔻				М	emo	Item	check	dated	12/13	3/16			
Full Name (Last, First, Middle Initial) B.						Date		burse	mont						
5.						M		D		Y	Y Y	Y			
Mailing Address										Ľ					
City	State	Zip Code				FEC I	dentif	icatio	n Num	ıber		-			
Purpose of Disbursement					1	С									
Candidate Name				egory/ /pe		Amount of Each Disbursement this Period									
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Senate President	Primary	General													
State: District:	Other (spe	Other (specify)						Memo Item							
Full Name (Last, First, Middle Initial)						Date	of Dis	burse	ement						
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Mailing Address						_									
City	State	Zip Code				FEC I	dentif	icatio	n Num	ber					
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Candidate Name				egory/ /pe	1	Amou	nt of	Each	Disbu	rseme	ent thi	s Period			
	ement For:			-	\neg						_	-			
Senate Primary General															
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