10/13/2006 10:23

Image# 26940409737

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines UnitedHealth Group Incorporated PAC (United for Health) 9900 Bren Road East ADDRESS (number and street) Check if different than previously Minnetonka MN 55343 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. ZIPCODE 🛋 CITY A IS THIS **AMENDED** NEW C00274431 Х REPORT OR (N) (A) TYPE OF REPORT (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Χ Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 07 0 1 2006 09 30 2006 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Patrick J. Erlandson Type or Print Name of Treasurer Electronically Filed by Patrick J. Erlandson 10 13 2006 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003) Only

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) OF RECEIPTS AND DISBURSEMENTS
Page 2

t Covering the Period:	From:	07 01	2006	To:	09 30 2006
		_	COLUMN A This Period		COLUMN B Calendar Year-to-Date
Cash on Hand January 1	^Y 2006 ^Y Y]			100128.32
Cash on Hand at Begining of Reporting I	Period		165021.04		
Total Receipts (from Li	ne 19)		113573.69		393466.41
6(c) for Column A and	Lines		278594.73		493594.73
al Disbursements (from l	Line 31)		117500.00		332500.00
sh on Hand at Close of porting Period otract Line 7 from Line 6	(d))		161094.73		161094.73
committee (Itemize all or	า		0.00		
committee (Itemize all or	า		0.00		
This Committee has qu	alified as a mult	icandidate committee.	(see FEC FORM 1M)		
5 0	January 1 Cash on Hand at Begining of Reporting I Total Receipts (from Li Subtotal (add lines 6(b) 6(c) for Column A and 6(a) and 6(c) for Colum al Disbursements (from I) th on Hand at Close of orting Period btract Line 7 from Line 6 ts and Obligations owed committee (Itemize all or edule C and/or Schedule ts and Obligations owed committee (Itemize all or edule C and/or Schedule	Cash on Hand at Begining of Reporting Period	Cash on Hand at Begining of Reporting Period	Cash on Hand January 1 Cash on Hand at Begining of Reporting Period	Cash on Hand January 1 Cash on Hand at Begining of Reporting Period

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. 02/2003) Page 3

Write or Type Committee Name

UnitedHealth Group Incorporated PAC (United for Health)

Report Covering the Period:

From: 0.7^{M}

01

2006

To: 0 9 9

^D 3 0

2006

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	89936.63	194434.56
	(ii) Unitemized	23637.06	54979.63
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	113573.69	249414.19
	(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)	113573.69	249414.19
2.	Transfers From Affiliated/Other Party Committees	0.00	142052.22
3.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
6	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
Ο.	to Federal candidates and Other Political Committees	0.00	2000.00
7.	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
8.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
9.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	113573.69	393466.41
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	113573.69	393466.41

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4

	URSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Operating Ex	penditures: —— Federal/Non-Federal ————————————————————————————————————		
	from Schedule H4)	0.00	0.00
(i) Fed	leral Share	0.00	0.00
(ii) Noi	n-Federal Share	0.00	0.00
` '	ederal Operating	0.00	0.00
•	tures perating Expenditures	0.00	0.00
(add 21)	a)(i), (a)(ii) and (b))	0.00	0.00
	Affiliated/Other Party	0.00	0.00
Contributions	to		
and Other Po	idates/Committeeslitical Committees	107000.00	305000.00
. Independent	Expenditure e E)	0.00	0.00
 Coordinated I 	Expenditures Made by Party		
(use Schedul	2 U.S.C. 441a(d)) e F)	0.00	0.00
. Loan Repaym	nents Made	0.00	0.00
		0.00	0.00
Refunds of C	ontributions To:	0.00	0.00
	als/Persons Other litical Committees	0.00	0.00
(b) Political	Party Committees	0.00	0.00
` '	plitical Committees		
•	PACs)	0.00	0.00
. ,	ntribution Refunds es 28(a), (b), and (c))	0.00	0.00
`		10500.00	07500.00
Other Disbur	sements	10500.00	27500.00
	ion Activity (2 U.S.C 431(20))		
` '	Federal Election Activity nedule H6)		
•	al Share	0.00	0.00
/ii\ "I o ii	n" Shara	0.00	0.00
	n" Share Election Activity Paid Entirely		
` '	leral Funds	0.00	0.00
` '	deral Election Activity (add 0(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total Disburs	sements (add Lines 21(c), 22,	447500.00	22252222
23, 24, 25, 2	6, 27, 28(d), 29 and 30(c))	117500.00	332500.00
Total Federa	l Disbursements		
(subtract Lin	e 21(a)(ii) from Line 30(a)(ii)		
)	117500.00	332500.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Total Contributions (other than loans) from Line 11(d), page 3)	113573.69	249414.19
 Total Contribution Refunds (from Line 28(d))	0.00	0.00
Net Contributions (other than loans) (subtract Line 34 from Line 33)	113573.69	249414.19
Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

0		[FOR LINE NUMBER: PAGE 6 / 105
5	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
IT	EMIZED RECEIPTS		or each category of the	
•			Detailed Summary Page	
				13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	itements may ame and add	not be sold or used by any perso ress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
\rangle	UnitedHealth Group Incorporated PAC ((United for	Health)	
Α.	Full Name (Last, First, Middle Initial) William W. McGuire			Date of Receipt
	Mailing Address 9900 Bren Road East MN008-8092			09 25 7 2006
	City	State	Zip Code	Transaction ID: 24796895
	Minnetonka	MN	55343	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		5000.00
	Name of Employer UnitedHealth Group, Inc.		, CEO & Chairman	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00	
_		0 0	0 0 0 0 0 0 0	
В.	Full Name (Last, First, Middle Initial) Nadine M. McGuire			Date of Receipt
	Mailing Address 9900 Bren Road East			09 25 7 2006
	City	State	Zip Code	Transaction ID: 24796898
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		5000.00
	Name of Employer	Occupation Spouse	1	
	Receipt For:	<u> </u>	Year-to-Date ▼	
	Primary General	1.33.13		
	Other (specify) ▼	0 0	5000.00	
<u> </u>	Full Name (Last, First, Middle Initial) KEN L HOVERMAN			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1159790915207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		210.00
	Name of Employer UnitedHealth Group, Inc.	Occupation COO UH		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	P/R Deduction (\$30.00 Bi- Weekly)
	UDTOTAL ACRAMINATION DO ACTION			10210.00
L	UBTOTAL of Receipts This Page (optional)		······	

TOTAL This Period (last page this line number only)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 105 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC (I	Jnited for	Health)	
۹.	Full Name (Last, First, Middle Initial) ROBERT J SHEEHY Mailing Address 9900 Bren Road East			Date of Receipt
	MN008-W301	0	7: 0 !	
	City Minnetonka	State MN	Zip Code 55343	Transaction ID: PR1159794015207 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1330.00
	Name of Employer UnitedHealth Group, Inc. Receipt For: Primary General Other (specify) ▼		e Management e Year-to-Date ▼	P/R Deduction (\$190.00 Bi-Weekly)
3.	Full Name (Last, First, Middle Initial) ANTHONY J KAZLAUSKAS Mailing Address 9900 Bren Road East			Date of Receipt
	City	State	Zip Code	Transaction ID: PR1159794615207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		140.00
	Name of Employer UnitedHealth Group, Inc.	Occupation Medical [Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 400.00	P/R Deduction (\$20.00 Bi- Weekly)
- C.	Full Name (Last, First, Middle Initial) MICHAEL J KOEHLER			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1159795315207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		280.00
	Name of Employer UnitedHealth Group, Inc.		P Southwest Michigan	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 800.00	P/R Deduction (\$40.00 Bi- Weekly)
S	UBTOTAL of Receipts This Page (optional)			1750.00
т	OTAL This Period (last page this line number on	lv)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 / 105
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a
Ar	ny information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	not be sold or used by any person dress of any political committee to s	for the purpose of soliciting contributions
<u></u>	NAME OF COMMITTEE (In Full)	14.1.0 4.14 44.	areas or any pointed committee to a	0.000 000 000 000 000 000 000 000 000 0
\rangle	UnitedHealth Group Incorporated PAC	(United for	Health)	
Α.	Full Name (Last, First, Middle Initial) CARLA M MUGGIO			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1159798215207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		134.61
	Name of Employer UnitedHealth Group, Inc.	Occupation VP Opera		
	Receipt For:	<u> </u>	e Year-to-Date ▼	1
	Primary General Other (specify) ▼	0 0	384.60	P/R Deduction (\$19.23 Bi- Weekly)
В.	Full Name (Last, First, Middle Initial) BRIAN R BELLOWS			Date of Receipt
	Mailing Address 9900 Bren Road East			M M M / D D / Y W Y W Y
	City	State	Zip Code	Transaction ID: PR1159803815207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		105.00
	Name of Employer UnitedHealth Group, Inc.	Occupation Vice Pres	n sident Sales Strategic Service	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	P/R Deduction (\$15.00 Bi- Weekly)
<u> </u>	Full Name (Last, First, Middle Initial) KEITH W NOBLITT			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1159805515207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		140.00
	Name of Employer UnitedHealth Group, Inc.	Occupation Strategic	n Account Executive	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		400.00	P/R Deduction (\$20.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			379.61
	OTAL This Period (last page this line number o	ınlv)		

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 9 / 105
	-		Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			, ,	13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	UnitedHealth Group Incorporated PAC (United for	Health)	
۹.	Full Name (Last, First, Middle Initial) JAMES S WATSON			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1159806015207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		134.61
	Name of Employer UnitedHealth Group, Inc.	Occupation V.P. Gov	n t Relations, UHC Midlands	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		384.60	P/R Deduction (\$19.23 Bi- Weekly)
3.	Full Name (Last, First, Middle Initial) TRACY L BAHL			Date of Receipt
	Mailing Address 9900 Bren Road East	M M / D D / Y Y Y Y		
	City	Zip Code	Transaction ID: PR1159808415207	
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1346.10
	Name of Employer UnitedHealth Group, Inc.	Occupation President	n t, Strategic Services Group	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	3846.00	P/R Deduction (\$192.30 Bi- Weekly)
).	Full Name (Last, First, Middle Initial) KENNETH A BURDICK			Date of Receipt
	Mailing Address 9900 Bren Road East MN008-W318			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1159808915207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		140.00
	Name of Employer UnitedHealth Group, Inc.	!	derwriting	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 400.00	P/R Deduction (\$20.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			1620.71
_			_	
T	OTAL This Period (last page this line number or	າເy)	.	

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 10 / 105
			Use separate schedule(s) or each category of the	(check only one)
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			2 stanea Sammary r ago	13 14 15 16 17
An	y information copied from such Reports and Sta for commercial purposes, other than using the na	tements may	y not be sold or used by any perso	n for the purpose of soliciting contributions
<u>.</u>	NAME OF COMMITTEE (In Full)	arrio ario ade	areas or arry pointed committee to	Solicit Contributions from Scott Committee.
\rangle	UnitedHealth Group Incorporated PAC (United for	Health)	
۹.	Full Name (Last, First, Middle Initial) NANCY C ABELMANN			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1159809115207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		80.78
	Name of Employer United HealthCare Corpora- tion	Occupation Tax Direct		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	1 1	230.80	P/R Deduction (\$11.54 Bi- Weekly)
3.	Full Name (Last, First, Middle Initial) WILLIAM P WHITELY			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1159812615207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1346.10
	Name of Employer UnitedHealth Group, Inc.		ited HealthCare of Illinois	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	3846.00	P/R Deduction (\$192.30 Bi- Weekly)
- C.	Full Name (Last, First, Middle Initial) RICHARD J RASKIN, MD			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1159813515207
	Minnetonka	MN	44114	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		134.61
	Name of Employer UnitedHealth Group, Inc.	Occupation Medical [Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 384.60	P/R Deduction (\$19.23 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			1561.49
_			_	
T	OTAL This Period (last page this line number or	1ly)		

S	CHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 11 / 105
	EMIZED RECEIPTS	or each category of the	(check only one)
"	LIVIIZED RECEIP 13	Detailed Summary Page	X 11a 11b 11c 12
Δ.,	by information copied from such Reports and Statements	movement be cold or used by only person	13 14 15 16 17
or	for commercial purposes, other than using the name an	d address of any political committee to s	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		
$ \rangle$	UnitedHealth Group Incorporated PAC (United	for Health)	
\angle	, ,	•	
	Full Name (Last, First, Middle Initial)		D . (D .)
Α.	LOIS E QUAM Mailing Address 9900 Bren Boad Fast		Date of Receipt
	Mailing Address 9900 Bren Road East MN008-T300		M M / D D / Y Y Y Y
	City Stat	e Zip Code	Transaction ID: PR1159813715207
	Minnetonka MN	55 <u>3</u> 43	Amount of Each Receipt this Period
	FEC ID number of contributing		1246 10
	federal political committee.		1346.10
	Name of Employer UnitedHealth Group, Inc.	oation	7
	UnitedHealth Group, Inc. CEO	, Ovations	
		egate Year-to-Date ▼	
	Primary General	3846.00	P/R Deduction (\$192.30 Bi- Weekly)
	Other (specify) ▼		Weekly)
_	Full Name (Last, First, Middle Initial)		
В.			Date of Receipt
	Mailing Address 9900 Bren Road East		M M / D D / Y Y Y Y
	City Stat	e Zip Code	Transaction ID: PR1159814015207
	Minnetonka MN	•	Amount of Each Receipt this Period
	FEO ID work as a first of the first		
	federal political committee.		350.00
	Name of Employer Occu	action	4
	United Health Croup Inc	stor, Underwriting	
	·	egate Year-to-Date ▼	1
	Primary General		P/R Deduction (\$50.00 Bi-
	Other (specify) ▼	1000.00	Weekly)
_			
C	Full Name (Last, First, Middle Initial) THOMAS H LINDQUIST		Date of Receipt
J.	Mailing Address 9900 Bren Road East		M M / D D / Y Y Y Y
	MN008-T300		
	City Stat	e Zip Code	Transaction ID: PR1159814115207
	<u>Minnetonka</u> MN	55343	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee		1076.88
	federal political committee.		
	Name of Employer UnitedHealth Group, Inc.	oation	1
	Pres	dent, AARP Division, Ovations	_
		egate Year-to-Date ▼	
	Primary General	3076.80	P/R Deduction (\$153.84 Bi-
	Other (specify) ▼		Weekly)
Г	I		
s	UBTOTAL of Receipts This Page (optional)		2772.98
1			
		<u>·</u>	

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 12 / 105
			Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	UnitedHealth Group Incorporated PAC (United for	Health)	
۹.	Full Name (Last, First, Middle Initial) DAVID S WICHMANN			Date of Receipt
	Mailing Address 9900 Bren Road East MN008-W304			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1159814715207
	Minnetonka	MN	55343	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1346.10
	Name of Employer UnitedHealth Group, Inc.	Occupation SVP - Co	n prporate Development	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	3846.00	P/R Deduction (\$192.30 Bi- Weekly)
3.	Full Name (Last, First, Middle Initial) SAUL FELDMAN			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1159815215207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		538.44
	Name of Employer UnitedHealth Group, Inc.	Occupation CEO Uni	n ted Behavioral Health	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	1538.40	P/R Deduction (\$76.92 Bi- Weekly)
).	Full Name (Last, First, Middle Initial) PATRICK J ERLANDSON			Date of Receipt
	Mailing Address 9900 Bren Road E MN008-8315			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1159815915207
	Minnetonka	MN	55343	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1346.10
	Name of Employer UnitedHealth Group, Inc.	Occupation VP Corpo	n orate Controller	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	3846.00	P/R Deduction (\$192.30 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			3230.64
	OTAL This Period (last page this line number or	alv)		
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 13 / 105
IT	EMIZED RECEIPTS		or each category of the	(check only one)
•			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Δn	y information copied from such Reports and Sta	tomente may	unot be sold or used by any perso	
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	UnitedHealth Group Incorporated PAC (United for	Health)	
	Full Name (Last, First, Middle Initial)			
۹.	PATRICIA R SAURO			Date of Receipt
	Mailing Address 9900 Bren Road East MN008-T500			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1159816415207
	Minnetonka	MN	55343	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		134.61
	Name of Employer United HealthGroup, Inc.	Occupation		
	Receipt For:		uct Development AARP e Year-to-Date ▼	_
	Primary General	Aggregate	real-10-Date V	P/P Doduction (\$10.22 Pi
	Other (specify) ▼	0 0	384.60	P/R Deduction (\$19.23 Bi- Weekly)
3.	Full Name (Last, First, Middle Initial) WILLIAM A MUNSELL			Date of Receipt
	Mailing Address 9900 Bren Road E MN008-W301			M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	Transaction ID: PR1159816615207
	Minnetonka	MN	55343	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		700.00
	Name of Employer UnitedHealth Group, Inc.	Occupation	n erating Officer	
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼		2000.00	P/R Deduction (\$100.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) JOHN S PENSHORN			Date of Receipt
٠.	Mailing Address 9900 Bren Road East MN008-8092			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1159816915207
	Minnetonka	MN	55343	Amount of Each Receipt this Period
	FEC ID number of contributing		1 1 1 1 1	700.00
	federal political committee.	C		700.00
	Name of Employer UnitedHealth Group, Inc.	Occupation		
	Receipt For:		tor Relations e Year-to-Date ▼	-
	Primary General	riggrogate		P/R Deduction (\$100.00 Bi-
	Other (specify) ▼		2000.00	Weekly)
s	UBTOTAL of Receipts This Page (optional)			1534.61
			•	
T	OTAL This Period (last page this line number or	nly)	>	

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 14 / 105			
ITEMIZED RECEIPTS		or each category of the		(check only one)			
••	LIMIZED HEOLII 13		Detailed Summary Page	X 11a 11b 11c 12 12 17 17 17 17 17 17			
۸۰	y information copied from such Reports and St	otomonto mov	, not be cold or used by any para-	13 14 15 16 17			
or	for commercial purposes, other than using the	solicit contributions from such committee.					
\setminus	NAME OF COMMITTEE (In Full)						
UnitedHealth Group Incorporated PAC (United			Health)				
A.				Date of Receipt			
	Mailing Address 9900 Bren Road East MN008-T300			M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR1159817515207			
	Minnetonka	MN	55343	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.			538.44			
	Name of Employer UnitedHealth Group, Inc.	Occupation VP - Fina	n unce AARP Division				
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼	0 0	1538.40	P/R Deduction (\$76.92 Bi- Weekly)			
— В.	Full Name (Last, First, Middle Initial) JOHN R MACH JR			Date of Receipt			
	Mailing Address 9900 Bren Road East MN008-W130			M ' M / D ' D / Y ' Y ' Y ' Y			
	City	State	Zip Code	Transaction ID: PR1159817615207			
	Minnetonka	MN	55343	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		560.00			
	Name of Employer UnitedHealth Group, Inc.		dical Officer, Evercare				
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼		1600.00	P/R Deduction (\$80.00 Bi- Weekly)			
<u> </u>	Full Name (Last, First, Middle Initial) TIMOTHY F RYAN			Date of Receipt			
	Mailing Address 9900 Bren Rd East MN008-T400			M ' M / D ' D / Y ' Y ' Y ' Y			
	City		Zip Code	Transaction ID: PR1159817915207			
	Minnetonka	MN	55343	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		133.00			
	Receipt For: Ag		General Counsel				
			Year-to-Date ▼				
	Primary General Other (specify) ▼		380.00	P/R Deduction (\$19.00 Bi- Weekly)			
s	UBTOTAL of Receipts This Page (optional)			1231.44			
 T	TOTAL This Period (last page this line number only)						

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 15 / 105
			Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
An or	y information copied from such Reports and Stator for commercial purposes, other than using the national states.	tements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	UnitedHealth Group Incorporated PAC (United for	Health)	
۹.	Full Name (Last, First, Middle Initial) L ROBERT DAPPER			Date of Receipt
	Mailing Address 9900 Bren Road East MN008-T902			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1159818015207
	Minnetonka	MN	55343	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1076.95
	Name of Employer UnitedHealth Group	Occupation Senior Vi	n ce President Human Capital	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		3077.00	P/R Deduction (\$153.85 Bi- Weekly)
3.	Full Name (Last, First, Middle Initial) KELLY J DEKEYSER			Date of Receipt
	Mailing Address 9900 Bren Road East	M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR1159818415207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		134.61
	Name of Employer UnitedHealth Group	Occupation Senior VI	n P, Business Process Outsou	rcin
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		384.60	P/R Deduction (\$19.23 Bi- Weekly)
 C.	Full Name (Last, First, Middle Initial) MARK F LINDSAY			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1159818615207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1346.10
	Name of Employer UnitedHealth Group, Inc.	Occupation Public Re		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3846.00	P/R Deduction (\$192.30 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			2557.66
	·		·	
T	OTAL This Period (last page this line number or	nly)	>	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 16 / 105
ITEMIZED RECEIPTS		or each category of the		(check only one)
••	EMIZED REGEN 10		Detailed Summary Page	X 11a 11b 11c 12
Δ,	by information copied from such Reports and Sta	ntomonto mo	, not be cold or used by any person	13 14 15 16 17
or	for commercial purposes, other than using the r	name and add	dress of any political committee to s	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	UnitedHealth Group Incorporated PAC	(United for	Health)	
Α.				Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1159819115207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		269.22
	Name of Employer UnitedHealth Group	Occupation CEO Dall	n las/Austin Health Plan]
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		769.20	P/R Deduction (\$38.46 Bi-
	Other (specify)	0 0	703.20	Weekly)
В.	Full Name (Last, First, Middle Initial) AMY K KNAPP			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1159819315207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		807.66
	Name of Employer UnitedHealth Group	Occupation Regional	n President, Eastern Region, L	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		2307.60	P/R Deduction (\$115.38 Bi-
	Other (specify)	0 0		Weekly)
<u> </u>	Full Name (Last, First, Middle Initial) WILLIAM E MOELLER			Date of Receipt
٥.	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1159819515207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		461.52
	Name of Employer UnitedHealth Group	Occupation CEO Unit	n tedHealthcare Illinois]
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	, ,	1461.48	P/R Deduction (\$76.92 Bi- Weekly)
_	Cure (specify)			
s	UBTOTAL of Receipts This Page (optional)			1538.40
	OTAL This Period (last page this line number o	nlv)	•	

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 17 / 105				
ITEMIZED RECEIPTS	or each category of the	(check only one)				
TI LIMIZED RECEIF 13	Detailed Summary Page	X 11a 11b 11c 12				
A		13 14 15 16 17				
Any information copied from such Reports and Statemer or for commercial purposes, other than using the name	nts may not be sold or used by any persor and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
UnitedHealth Group Incorporated PAC (Uni	ed for Health)					
/ Simour sauth enoup modiporated i vie (Sim	50 TO TIOGHT)					
Full Name (Last, First, Middle Initial)						
A. REED V TUCKSON, M.D.		Date of Receipt				
Mailing Address 9900 Bren Road East		M M / D D / Y Y Y Y				
MN008-T902 City S	tate Zip Code	Transaction ID: PR1159819815207				
-	IN 55343	Amount of Each Receipt this Period				
EEO ID worth on a Constitution		Amount of Lacif Receipt this Period				
FEC ID number of contributing federal political committee.		807.66				
UnitedHealth Group	cupation					
	V.P. Consumer Health & Medical C	Car ⊣				
Receipt For: A Primary General	gregate Year-to-Date ▼					
Other (specify)	2307.60	P/R Deduction (\$115.38 Bi- Weekly)				
Cities (Speedily)		1100.119)				
Full Name (Last, First, Middle Initial)						
B. DAVID J FALK		Date of Receipt				
Mailing Address 9900 Bren Road East		M M / D D / Y Y Y Y				
•	tate Zip Code	Transaction ID: PR1159820215207				
Minnetonka I	IN 55343-9664	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.		87.50				
rederal political committee.						
Name of Employer UnitedHealth Group, Inc.	cupation					
M	dical Director					
	gregate Year-to-Date ▼					
Primary General	250.00	P/R Deduction (\$12.50 Bi-				
Other (specify)		Weekly)				
Full Name (Last, First, Middle Initial)						
C. WILLIAM D YOUNG		Date of Receipt				
Mailing Address 9900 Bren Road East		M M / D D / Y Y Y Y				
•	tate Zip Code	Transaction ID: PR1159821315207				
Minnetonka I	IN 55343-9664	Amount of Each Receipt this Period				
FEC ID number of contributing		269.15				
federal political committee.						
Name of Employer Oc	cupation	7				
UnitedHealth Group, Inc. Sr	Medical Director					
	gregate Year-to-Date ▼					
Primary General	769.00	P/R Deduction (\$38.45 Bi-				
Other (specify) ▼	700.00	Weekly)				
AUDTOTAL (D TIL D (.: . N						
SUBTOTAL of Receipts This Page (optional)						
SUBTOTAL of Receipts This Page (optional)	>	1164.31				

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 18 / 105
	EMIZED RECEIPTS		or each category of the	(check only one)
••			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Ar	y information copied from such Reports and Sta	atements may	not be sold or used by any person	
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	UnitedHealth Group Incorporated PAC	(United for	Health)	
Α.	Full Name (Last, First, Middle Initial) WILLIAM C TRACY			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1159821515207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			175.00
	Name of Employer Occupation UnitedHealth Group, Inc. VP Sales			
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		500.00	P/R Deduction (\$25.00 Bi-
	Other (specify)	0 0	0 0 0 0 0 0	Weekly)
В.	Full Name (Last, First, Middle Initial) MICHAEL M HAWKINS			Date of Receipt
υ.	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1159822015207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		80.78
	Name of Employer UnitedHealth Group, Inc.	Occupation Medical D		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify)	' '	230.80	P/R Deduction (\$11.54 Bi- Weekly)
	Cities (Specify)			, vectory)
_	Full Name (Last, First, Middle Initial)			2
C.	CAROL M SCHNEEWEIS Mailing Address 9900 Bren Road Fast			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1159823515207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		350.00
	Name of Employer UnitedHealth Group, Inc.	Occupation HealthCa	ire	
Receipt For: Primary General Other (specify) ▼		Aggregate	e Year-to-Date ▼	
		' '	1000.00	P/R Deduction (\$50.00 Bi- Weekly)
	Outer (specify) \		0 0 0 0 0 0 0	1 1 3 5 KJ)
	LIDTOTAL of December This Days (1989)			605.78
	UBTOTAL of Receipts This Page (optional)			
+	OTAL This Period (last nage this line number o	inly)		

21	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 19 / 105
			Use separate schedule(s) or each category of the	(check only one)
H	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			, 0	13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	y not be sold or used by any perso	on for the purpose of soliciting contributions solicit contributions from such committee.
<u> </u>	NAME OF COMMITTEE (In Full)			
\rangle	UnitedHealth Group Incorporated PAC (United for	Health)	
۹.	Full Name (Last, First, Middle Initial) DAVID J LUBBEN			Date of Receipt
	Mailing Address 9900 Bren Rd East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1159823815207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1346.17
	Name of Employer UnitedHealth Group, Inc.	Occupation General		
	Receipt For:	Aggregate	e Year-to-Date ▼	7
	Primary General Other (specify) ▼		3846.04	P/R Deduction (\$192.31 Bi- Weekly)
3.	Full Name (Last, First, Middle Initial) ELISE A GEMEINHARDT			Date of Receipt
	Mailing Address 9900 Bren Road East	M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR1159824915207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		538.44
	Name of Employer UnitedHealth Group, Inc.	Occupation VP Feder	n ral Affairs	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	1538.40	P/R Deduction (\$76.92 Bi- Weekly)
- C.	Full Name (Last, First, Middle Initial) BEVERLY H NYCE			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1159826015207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		807.66
	Name of Employer UnitedHealth Group, Inc.		P Uniprise	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2307.60	P/R Deduction (\$115.38 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			2692.27
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T	OTAL This Period (last page this line number or	าเy)	.	

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 20 / 105
TEMIZED RECEIPTS		or each category of the	(check only one)
TEMPLE RECEIL 10		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Sta	atements may	v not be sold or used by any person	
or for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
UnitedHealth Group Incorporated PAC	(United for	Health)	
Full Name (Last, First, Middle Initial)			
A. RICHARD J MIGLIORI			Date of Receipt
Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
City	State	Zip Code	Transaction ID: PR1159827415207
<u>Minnetonka</u>	MN	<u>55343-9664</u>	Amount of Each Receipt this Period
FEC ID number of contributing	С		538.44
federal political committee.			300.44
Name of Employer UnitedHealth Group, Inc.	Occupation	n	
· · · · · · · · · · · · · · · · · · ·	-	P Ingenix Employer Group	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	' '	1538.40	P/R Deduction (\$76.92 Bi- Weekly)
cases (epocally) •			,
Full Name (Last, First, Middle Initial)			5. (5.1)
BARBARA C BUENEMANN Mailing Address 9900 Bren Road East			Date of Receipt
Walling Address 9900 Breff Road East			M M / D D / Y Y Y Y
City	State	Zip Code	Transaction ID: PR1159828715207
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		80.78
rederal political committee.			
Name of Employer UnitedHealth Group, Inc.	Occupation		
Receipt For:		IC of the Midwest, Inc. e Year-to-Date ▼	
Primary General	7 iggi ogaic		P/R Deduction (\$11.54 Bi-
Other (specify)		230.80	Weekly)
Full Name (Leaf First No. 1)			
Full Name (Last, First, Middle Initial) 2. JEANNINE M RIVET			Date of Receipt
Mailing Address 9900 Bren Road E.			M M / D D / Y Y Y Y
MN008-W315 City	State	Zip Code	Transaction ID: PR1159830015207
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
FEC ID number of contributing			
federal political committee.	C		1346.10
Name of Employer UnitedHealth Group, Inc.	Occupation	n	†
· · · · · · · · · · · · · · · · · · ·		e VP/Operations	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify)		3846.00	P/R Deduction (\$192.30 Bi- Weekly)
Cutor (opeon), •	0 0		,
			1065 20
SUBTOTAL of Receipts This Page (optional)		······	1965.32
TOTAL This Period (last page this line number or	nly)	>	

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 21 / 105
			Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	UnitedHealth Group Incorporated PAC (United for	Health)	
۹.	Full Name (Last, First, Middle Initial) WILLIAM J ANTHONY			Date of Receipt
	Mailing Address 9900 Bren Road East MN008-W130			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1159830215207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		269.22
	Name of Employer UnitedHealth Group, Inc.	Occupation V.P. Call	n Center Operations - Ovatior	ns
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	769.20	P/R Deduction (\$38.46 Bi- Weekly)
 3.	Full Name (Last, First, Middle Initial) JACK E SHUFF			Date of Receipt
	Mailing Address 9900 Bren Road East	M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR1159830515207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		134.61
	Name of Employer UnitedHealth Group, Inc.	Occupation Director,	n Sales and Service	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		384.60	P/R Deduction (\$19.23 Bi- Weekly)
 C.	Full Name (Last, First, Middle Initial) DONNA L . HOFFMEIER			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1162354515207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		-70.00
	Name of Employer UnitedHealth Group, Inc.	Occupation Public Af		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 840.00	P/R Deduction (\$-210.00 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)			333.83
_	OTAL THE Description of the Control	.1.)		
\mathbf{I}	OTAL This Period (last page this line number or	11 y)		

21	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 22 / 105
	-		Use separate schedule(s) or each category of the	(check only one)
IT	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	not be sold or used by any perso	n for the purpose of soliciting contributions solicit contributions from such committee.
_	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , ,	
\rangle	UnitedHealth Group Incorporated PAC (United for	Health)	
۹.	Full Name (Last, First, Middle Initial) Mr. ANTHONY WELTERS			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1332013215207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1346.10
	Name of Employer UnitedHealth Group, Inc.	Occupation		
	Receipt For:		e Year-to-Date ▼	_
	Primary General		0040.00	P/R Deduction (\$192.30 Bi-
	Other (specify)	0 0	3846.00	Weekly)
3.	Full Name (Last, First, Middle Initial) JOHN KIRCHNER			Date of Receipt
	Mailing Address 9900 Bren Road East	M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR1530190515207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		269.22
	Name of Employer UnitedHealth Group, Inc.	Occupation Vice Pres		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		769.20	P/R Deduction (\$38.46 Bi- Weekly)
<u> </u>	Full Name (Last, First, Middle Initial) LESLIE GIDDENS ROBINSON			Date of Receipt
	Mailing Address 9900 Bren Road East			M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	Transaction ID: PR1530798315207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		807.66
	Name of Employer UnitedHealth Group, Inc.	Occupation SVP Med	n lical Management	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		2307.60	P/R Deduction (\$115.38 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			2422.98
	<u> </u>		•	
T	OTAL This Period (last page this line number or	າly)	>	

_				FOR LINE NUMBER. DACE on 1405
S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 23 / 105 (check only one)
IT	EMIZED RECEIPTS		or each category of the	
•			Detailed Summary Page	X 11a 11b 11c 12
_				13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	/ not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee
.	NAME OF COMMITTEE (In Full)	arro arro aac	areas or any pontion committee to	CONTRACTOR TO THE CONTRACTOR CONTRACTOR
/	` '	Inited for	Lloalth)	
/	UnitedHealth Group Incorporated PAC (I	Jillea loi	neaitii)	
	Full Name (Last, First, Middle Initial)			
٩.	DEBORAH MATES CHASKES			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1530798515207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing	С		700.00
	federal political committee.			700.00
	Name of Employer	Occupation	n	-
	Name of Employer UnitedHealth Group, Inc.	Attorney		
	Receipt For:		e Year-to-Date ▼	-
	Primary General	7.99.094.0		P/R Deduction (\$100.00 Bi-
	Other (specify) ▼	l	2000.00	Weekly)
	Full Name (Last, First, Middle Initial)			
3.	THELMA DUGGIN			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	0"			
	City	State	Zip Code	Transaction ID: PR1530799215207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing	С		1346.17
	federal political committee.			
	Name of Employer	Occupation	n	7
	UnitedHealth Group, Inc.	Executive	Э	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		2010.01	P/R Deduction (\$192.31 Bi-
	Other (specify)		3846.04	Weekly)
_	Full Name (Last, First, Middle Initial)			Data of Descript
٥.	Mr EDGAR G RIOS Mailing Address 9900 Bren Road East			Date of Receipt
	Walling Address 9900 Breft Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1550188315207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.			1346.10
	Name of Employer	Occupation	•	4
	UnitedHealth Group, Inc.	Lawver	II	
	Receipt For:	,	e Year-to-Date ▼	-
	Primary General	33 -3		P/R Deduction (\$192.30 Bi-
	Other (specify) ▼	l	3846.00	Weekly)
				'
				2000 05
SI	UBTOTAL of Receipts This Page (optional))	3392.27
			<u> </u>	
T	OTAL This Period (last page this line number on	ly)	>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 105 (check only one) X 11a 11b 11c 12
An	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\frac{1}{2}$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC (
۸.	Full Name (Last, First, Middle Initial) MARY G SHINHAM Mailing Address 9900 Bren Road East			Date of Receipt
	City Minnetonka	State MN	Zip Code	Transaction ID: PR1550190915207
	FEC ID number of contributing federal political committee.	C	55343-9664	Amount of Each Receipt this Period 140.00
	Name of Employer UnitedHealth Group, Inc. Receipt For: Primary General Other (specify) ▼	Occupation Executive Aggregate		P/R Deduction (\$20.00 Bi-Weekly)
3.	Full Name (Last, First, Middle Initial) JAQUELYN E ALBRIGHT Mailing Address 9900 Bren Road East MN008-T202			Date of Receipt
	City Minnetonka	State MN	Zip Code 55343	Transaction ID: PR1550191015207
	FEC ID number of contributing federal political committee.	C	33343	Amount of Each Receipt this Period 201.95
	Name of Employer UnitedHealth Group, Inc.	Occupation Attorney		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 577.00	P/R Deduction (\$28.85 Bi- Weekly)
) .	Full Name (Last, First, Middle Initial) DAVID P INGRAHAM Mailing Address 9900 Bren Road Fast			Date of Receipt
	Mailing Address 9900 Bren Road East MN008-T500 City	State	Zip Code	Transaction ID: PR1550191115207
	Minnetonka	MN	55343	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		471.17
	Name of Employer UnitedHealth Group, Inc.	Occupation Executive	9	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1346.20	P/R Deduction (\$67.31 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			813.12
т.	OTAL This Period (last page this line number o	nlv)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 25 / 105
TEMIZED RECEIPTS			or each category of the	(check only one)
• •			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	UnitedHealth Group Incorporated PAC (United for	Health)	
_	Full Name (Last, First, Middle Initial)			
٩.	DAVID R ASTAR Mailing Address 9900 Bren Road East			Date of Receipt
	City	State	Zip Code	Transaction ID: PR1551005115207
	Minnetonka FEC ID number of contributing	MN	55343-9664	Amount of Each Receipt this Period
	federal political committee.	C		1346.10
	Name of Employer UnitedHealth Group, Inc.	Occupation COO Ing		
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼		3846.00	P/R Deduction (\$192.30 Bi- Weekly)
	Guier (speerly)	0 0		v coay)
3.	Full Name (Last, First, Middle Initial) ROBERT J BOHNENKAMP			Date of Receipt
	Mailing Address 9900 Bren Road East MN008-W300			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1551005615207
	Minnetonka	MN	55343	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		406.00
	Name of Employer UnitedHealth Group, Inc.	Occupation Systems	1	
	Receipt For:	•	e Year-to-Date ▼	
	Primary General		1160.00	P/R Deduction (\$58.00 Bi-
	Other (specify) ▼	1 1		Weekly)
 Э.	Full Name (Last, First, Middle Initial) MICHAEL J BRESOLIN	_		Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y V V V
	City	State	Zip Code	Transaction ID: PR1551005715207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		140.00
	Name of Employer UnitedHealth Group, Inc.	Occupation		-
nealth t		Health Ca	are • Year-to-Date ▼	
	Receipt For: Primary General	Aggregate		P/R Deduction (\$20.00 Bi-
	Other (specify) ▼		400.00	Weekly)
s	UBTOTAL of Receipts This Page (optional)			1892.10
			_	
T	OTAL This Period (last page this line number on	lv)	>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 105 (check only one)
Ar	ny information copied from such Reports and St for commercial purposes, other than using the	atements may	not be sold or used by any person	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC			Solicit Contributions from Such Confinitee.
Α.	Mailing Address 9900 Bren Road East City Minnetonka FEC ID number of contributing federal political committee. Name of Employer UnitedHealth Group, Inc.	State MN C Occupation Managen	nent	Date of Receipt Transaction ID: PR1551122515207 Amount of Each Receipt this Period 280.00
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 800.00	P/R Deduction (\$40.00 Bi- Weekly)
В.	Full Name (Last, First, Middle Initial) CHRISTOPHER R HOCK Mailing Address 9900 Bren Road East City Minnetonka FEC ID number of contributing federal political committee. Name of Employer UnitedHealth Group, Inc. Receipt For: Primary General Other (specify)	State MN C Occupation Managen Aggregate		Date of Receipt Transaction ID: PR1551128915207 Amount of Each Receipt this Period 80.78 P/R Deduction (\$11.54 Bi-Weekly)
C .	Full Name (Last, First, Middle Initial) JAMES THOMAS JARRATT Mailing Address 9900 Bren Road East MN008-E115 City Minnetonka FEC ID number of contributing federal political committee. Name of Employer UnitedHealth Group, Inc. Receipt For: Primary General Other (specify)		Zip Code 55343-9664 n or Relations e Year-to-Date ▼ 769.20	Date of Receipt M M / D D / Y Y Y Y Transaction ID: PR1551132115207 Amount of Each Receipt this Period 269.22 P/R Deduction (\$38.46 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)			630.00
Т	OTAL This Period (last page this line number of	only)		

SCHEDULE A (FEC Form 3X)

SCHEDIII	E A (FEC Form 3X)			FOR LINE NUMBI	ER: PAGE 27/105		
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)			
II EMIZED	RECEIPTS		Detailed Summary Page	X 11a 11k	11c 12		
			, 0	13 14	15 16 17		
Any information or for commercia	copied from such Reports and Si al purposes, other than using the	tatements may name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of s solicit contributions f	soliciting contributions rom such committee.		
NAME OF C	OMMITTEE (In Full)						
\	Ith Group Incorporated PAC	(United for	Health)				
Full Name (L JEFFREY W	ast, First, Middle Initial) KAGAN			Date of Receipt	t		
Mailing Addr	ess 9900 Bren Road East			M M / D	D / Y Y Y Y		
City		State	Zip Code	Transaction ID	: PR1551132315207		
<u>Minnetonk</u>	a	MN	55343-9664	Amount of Eacl	h Receipt this Period		
	ber of contributing cal committee.	C			140.00		
Name of Em UnitedHealth	ployer i Group, Inc.	Occupatio Financia					
Receipt For:			e Year-to-Date ▼				
Primar	y General (specify) ▼		400.00	P/R Deduction Weekly)	(\$20.00 Bi-		
Full Name (L 3. MICHAEL C N	ast, First, Middle Initial) MATTEO			Date of Receipt	t		
Mailing Addr	ess 9900 Bren Road East		M M / D	D / Y Y Y Y			
City		State	Zip Code	Transaction ID	: PR1551133415207		
<u>Minnetonk</u>	a	MN	55343-9664	Amount of Eacl	h Receipt this Period		
	ber of contributing cal committee.	C			134.61		
Name of Em	ployer	Occupatio	n	7			
UnitedHealth	т Стоир, т.с.	Manager					
Receipt For:	Domestel	Aggregate	e Year-to-Date ▼				
Other (y		384.60	P/R Deduction Weekly)	ı (\$19.23 Bi-		
Full Name (L	ast, First, Middle Initial) /ENS			Date of Receipt	t		
Mailing Addr	ess 9900 Bren Road East			M M / D	D / Y Y Y Y		
City		State	Zip Code	Transaction ID: PR15511603152			
<u>Minnetonk</u>	a	MN	55343-9664	Amount of Eacl	h Receipt this Period		
	ber of contributing cal committee.	C			1344.00		
Name of Em UnitedHealth	ame of Employer InitedHealth Group, Inc. Management						
Receipt For:	y General	Aggregate	e Year-to-Date ▼	P/P Doduction	. (\$102.00 Bi		
	(specify) ▼	0 0	3840.00	P/R Deduction Weekly)	ι (ψ ι 3 2.00 DI ⁻		
SUBTOTAL of	Receipts This Page (optional)				1618.61		
TOTAL T:: 5	Control (Acres on the Prince)	t- \	_				
IUIAL INIS P	eriod (last page this line number	oniy)					

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 28 / 105
ITEMIZED RECEIPTS			or each category of the	(check only one) X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
Ar	y information copied from such Reports and State for commercial purposes, other than using the na	ements may	not be sold or used by any perso	n for the purpose of soliciting contributions
<u>.</u>	NAME OF COMMITTEE (In Full)	ine and add	read of any political committee to	Solicit Goritisations from Sacri Committee.
\rangle	UnitedHealth Group Incorporated PAC (U	Jnited for I	Health)	
۸.	Full Name (Last, First, Middle Initial) CATHERINE M PERRY			Date of Receipt
	Mailing Address 9900 Bren Road East			M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	Transaction ID: PR1551160415207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		140.00
	Name of Employer UnitedHealth Group, Inc.	Occupation Nurse	l	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		400.00	P/R Deduction (\$20.00 Bi- Weekly)
3.	Full Name (Last, First, Middle Initial) THOMAS J VALERIUS			Date of Receipt
	Mailing Address 9900 Bren Road East MN008-T850			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1551161315207
	Minnetonka	MN	55343	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		538.44
	Name of Employer UnitedHealth Group, Inc.	Occupation Executive		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	1538.40	P/R Deduction (\$76.92 Bi- Weekly)
- C.	Full Name (Last, First, Middle Initial) LOIS T WEIHRAUCH			Date of Receipt
Mailing Address 9900 Bren Road East MN008-W130				M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1551161415207
	Minnetonka	MN	55343	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		105.00
Name of Employer UnitedHealth Group, Inc. Occupation Compute		Systems		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	P/R Deduction (\$15.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			783.44
	. 5 (17			

TOTAL This Period (last page this line number only)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 105 (check only one) X 11a 11b 11c 12
An	y information copied from such Reports and Stat	tements may	, J	n for the purpose of soliciting contributions
or	for commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC (United for	Health)	
۹.	Full Name (Last, First, Middle Initial) ANTHONY R CARR			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1554323415207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		105.00
	Name of Employer UnitedHealth Group, Inc.	Occupation Sales	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	300.00	P/R Deduction (\$15.00 Bi- Weekly)
3.	Full Name (Last, First, Middle Initial) JOHN O ENDERLE			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1554323515207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		77.00
	Name of Employer UnitedHealth Group, Inc.	Occupation Finance	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	220.00	P/R Deduction (\$11.00 Bi- Weekly)
D.	Full Name (Last, First, Middle Initial) RICK M JELINEK			Date of Receipt
	Mailing Address 9900 Bren Road East MN008-T500			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1554323915207
	Minnetonka	MN	55343	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		336.00
	Name of Employer UnitedHealth Group, Inc.		lanagement	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 960.00	P/R Deduction (\$48.00 Bi- Weekly)
S	UBTOTAL of Receipts This Page (optional)			518.00
т	OTAL This Period (last page this line number on	ılv)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 30 / 105		
ITEMIZED RECEIPTS		or each category of the	(check only one)		
TI LIMIZED RECEIL 13		Detailed Summary Page	X 11a 11b 11c 12		
A information conied from such Departs and Ch		and he had a let an an and had a new and a	13 14 15 16 17		
Any information copied from such Reports and St or for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)					
UnitedHealth Group Incorporated PAC	(United for	Health)			
	`	,			
Full Name (Last, First, Middle Initial)			1 5. 75		
A. JOSEPH J MCERLANE			Date of Receipt		
Mailing Address 9900 Bren Road East			M M / D D / Y Y Y		
City	State	Zip Code	Transaction ID: PR1554324115207		
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period		
FEC ID number of contributing			124.61		
federal political committee.	C		134.61		
Name of Employer UnitedHealth Group, Inc.	Occupation		7		
·	Manager		4		
Receipt For: Primary General	Aggregate	e Year-to-Date ▼			
Other (specify)		384.60	P/R Deduction (\$19.23 Bi- Weekly)		
	0 0	0 0 0 0 0 0 0			
Full Name (Last, First, Middle Initial) B. MICHAEL RADU			Date of Receipt		
Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y		
City	State	Zip Code	Transaction ID: PR1554324515207		
<u>Minnetonka</u>	MN	55343-9664	Amount of Each Receipt this Period		
FEC ID number of contributing	С		134.61		
federal political committee.					
Name of Employer UnitedHealth Group, Inc.	Occupation	n	7		
·	Marketin	U			
Receipt For:	Aggregate	e Year-to-Date ▼			
Primary General Other (specify) ▼	' '	384.60	P/R Deduction (\$19.23 Bi- Weekly)		
Cities (speedily)			Troomy)		
Full Name (Last, First, Middle Initial)	1				
C. CATHERINE E SPILLANE			Date of Receipt		
Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y		
City	State	Zip Code	Transaction ID: PR1554324615207		
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period		
FEC ID number of contributing			134.61		
federal political committee.	C		134.01		
Name of Employer	Occupation	n	┪		
UnitedHealth Group, Inc. Adminis					
		e Year-to-Date ▼			
Primary General		204 60	P/R Deduction (\$19.23 Bi-		
Other (specify)		384.60	Weekly)		
SUBTOTAL of Receipts This Page (optional)					
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TOTAL This Period (last page this line number of	only))			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 31 / 105 (check only one) X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC (
_	Full Name (Last, First, Middle Initial)			
۹.	KIRK E STAPLETON			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1554324715207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		350.00
	Name of Employer UnitedHealth Group, Inc.	Occupation Network	n Development	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1000.00	P/R Deduction (\$50.00 Bi- Weekly)
3.	Full Name (Last, First, Middle Initial) CRAIG C ANDERSON			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1575957315207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		134.61
	Name of Employer UnitedHealth Group, Inc.	Occupation Finance	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		384.60	P/R Deduction (\$19.23 Bi- Weekly)
<u> </u>	Full Name (Last, First, Middle Initial) KAREN L ERICKSON			Date of Receipt
	Mailing Address 9900 Bren Road East			M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	Transaction ID: PR1575957615207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		280.00
	Name of Employer UnitedHealth Group, Inc.	Occupation Finance	n	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 800.00	P/R Deduction (\$40.00 Bi- Weekly)
SI	JBTOTAL of Receipts This Page (optional)			764.61
т	OTAL This Period (last page this line number or	nlv)		

2	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 32 / 105
			Use separate schedule(s) or each category of the	(check only one)
IT	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	y not be sold or used by any perso	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)	arrie ariu auc	diess of any political committee to	Solicit Contributions from Such Committee.
\rangle	UnitedHealth Group Incorporated PAC (United for	Health)	
۹.	Full Name (Last, First, Middle Initial) ERNEST MONFILETTO			Date of Receipt
	Mailing Address 9900 Bren Road East			M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	Transaction ID: PR1575958115207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		538.44
	Name of Employer UnitedHealth Group, Inc.	Occupation	n er Operations	
	Receipt For:	Aggregate	· e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	1538.40	P/R Deduction (\$76.92 Bi- Weekly)
3.	Full Name (Last, First, Middle Initial) LEE D VALENTA			Date of Receipt
	Mailing Address 9900 Bren Road East	M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR1575958515207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1346.10
	Name of Employer UnitedHealth Group, Inc.	Occupation Finance	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		3846.00	P/R Deduction (\$192.30 Bi- Weekly)
- C.	Full Name (Last, First, Middle Initial) TOM M DAVIS			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1580863515207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		280.00
Name of Employer UnitedHealth Group, Inc.		Occupation Director	Sales	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 800.00	P/R Deduction (\$40.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			2164.54
_	OTAL This Period (last page this line number or	alv)		
	CIAL THIS I CHOO (last page this line humber of	··· y / · · · · · · · · · · · · · · · ·	······································	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 33 / 105 (check only one)
			Detailed Summary Page	13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC (U	Jnited for	Health)	
<u>΄</u> Δ.	Full Name (Last, First, Middle Initial) THOMAS S PAUL			Date of Receipt
•	Mailing Address 9900 Bren Road East MN008-T500			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1580864715207
	Minnetonka	MN	55343	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		269.22
	Name of Employer UnitedHealth Group, Inc.	Occupation Pharmac		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		769.20	P/R Deduction (\$38.46 Bi- Weekly)
Full Name (Last, First, Middle Initial) 3. JIMMIE L POGUE				Date of Receipt
	Mailing Address 9900 Bren Road East			M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	Transaction ID: PR1580864815207
	Minnetonka	MN	55343-9664V	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		134.61
	Name of Employer UnitedHealth Group, Inc.	Occupation Health Ca		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		384.60	P/R Deduction (\$19.23 Bi- Weekly)
—).	Full Name (Last, First, Middle Initial) KAREN R SCHIEVELBEIN			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1580865115207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		538.44
UnitedHealth Group Inc		Occupation Finance	1	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1538.40	P/R Deduction (\$76.92 Bi- Weekly)
S	UBTOTAL of Receipts This Page (optional)			942.27
т	OTAL This Period (last page this line number on	lv)	•	

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 34 / 105
ITEMIZED RECEIPTS		or each category of the	(check only one)
II LIMIZED NECEIF 13		Detailed Summary Page	X 11a 11b 11c 12
Any information copied from such Reports and Sta	stomente mes	, not be cold or used by any norce	13 14 15 16 17
or for commercial purposes, other than using the n	iame and add	dress of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
UnitedHealth Group Incorporated PAC (United for	Health)	
		,	
Full Name (Last, First, Middle Initial)			
A. JOSEPH O WEISSENBORN			Date of Receipt
Mailing Address 9900 Bren Road East MN008-T850			M M / D D / Y Y Y Y
City	State	Zip Code	Transaction ID: PR1580865415207
Minnetonka	MN	55343	Amount of Each Receipt this Period
FEC ID number of contributing			
federal political committee.	C		595.00
Name of Employer UnitedHealth Group, Inc.	Occupation		
	HR Bene		
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General		1700.00	P/R Deduction (\$85.00 Bi- Weekly)
Other (specify)	0 0	1 1 1 1 1 1 1	Weekly)
Full Name (Last, First, Middle Initial)			
B. WILLIAM S BOJAN			Date of Receipt
Mailing Address 9900 Bren Road East MN008-T205			M M / D D / Y Y Y Y
City	State	Zip Code	Transaction ID: PR1596303715207
Minnetonka	MN	55343	Amount of Each Receipt this Period
FEC ID number of contributing		000.0	
federal political committee.	C		280.00
Name of Espelance	10		
Name of Employer UnitedHealth Group, Inc.	Occupation Risk Man		
Receipt For:	1	Year-to-Date ▼	_
Primary General	7.99.094.0		P/R Deduction (\$40.00 Bi-
Other (specify) ▼	1	800.00	Weekly)
Full Name (Last, First, Middle Initial)			Data of Descript
C. BRIGID A BONNER Mailing Address 9900 Bren Road East			Date of Receipt
Mailing Address 9900 Bren Road East MN008-W212			M M , D D , Y Y Y Y
City	State	Zip Code	Transaction ID: PR1596303815207
Minnetonka	MN	55343	Amount of Each Receipt this Period
FEC ID number of contributing	<u></u>		140.00
federal political committee.	C		140.00
		1	\dashv
		on Technology	
		Year-to-Date ▼	
Primary General		400.00	P/R Deduction (\$20.00 Bi-
Other (specify)		400.00	Weekly)
SUPTOTAL of Receipts This Dags (anticare)		_	1015.00
SUBTOTAL of Receipts This Page (optional)		·······	
TOTAL This Period (last page this line number or	nly))	

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 35 / 105
ITEMIZED RECEIPTS			or each category of the	(check only one)
•	LIMIZED REGEN 13		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
An	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any perso	n for the purpose of soliciting contributions
<u> </u>		and add	dress of any political committee to	Solicit Contributions from Such Committee.
/	NAME OF COMMITTEE (In Full)	1.20.016.0	11 101.	
/	UnitedHealth Group Incorporated PAC (I	Jnited for	Health)	
	Full Name (Last, First, Middle Initial)			
۹.	CHARLES A BOWLES			Date of Receipt
	Mailing Address 9900 Bren			M M / D D / Y Y Y Y
	Road East			
	City	State	Zip Code	Transaction ID: PR1596303915207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing			134.61
	federal political committee.	C		134.01
	Name of Employer	0	_	_
	Name of Employer UnitedHealth Group, Inc.	Occupation		
	Receipt For:		Marketing e Year-to-Date ▼	_
	Primary General	Aggregate	r rear-to-bate V	
	Other (specify)		384.60	P/R Deduction (\$19.23 Bi- Weekly)
	care (eposity) 🔻		0 0 0 0 0 0 0	77
	Full Name (Last, First, Middle Initial)			
3.	PAUL H GULSTRAND			Date of Receipt
	Mailing Address 9900 Bren Road East	M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR1596304015207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing	С		269.22
	federal political committee.			200.22
	Name of Employer	Occupation	n	┪
	UnitedHealth Group, Inc.	Executive		
	Receipt For:		e Year-to-Date ▼	
	Primary General	199.19		P/R Deduction (\$38.46 Bi-
	Other (specify) ▼	l	769.20	Weekly)
				'
	Full Name (Last, First, Middle Initial)			
Э.	PAMELA N HURSH			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1596304215207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing	17111	300-10 300-1	
	federal political committee.	C		175.00
	·			
	Name of Employer UnitedHealth Group, Inc.	Occupation		
	·	Accounta		_
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		500.00	P/R Deduction (\$25.00 Bi- Weekly)
	Other (specify) ▼			VVEERIY)
SI	JBTOTAL of Receipts This Page (optional)			578.83
_				
т	OTAL This Period (last page this line number on	ly)	>	

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER:	PAGE 36 / 105	
ITEMIZED RECEIPTS			or each category of the	(check only one)		
•••	LIMIZED RECEIF 13		Detailed Summary Page	X 11a 11b	11c 12	
_				13 14	15 16 17	
Ar or	ny information copied from such Reports and St for commercial purposes, other than using the	atements may name and add	/ not be sold or used by any person dress of any political committee to	n for the purpose of solici solicit contributions from	ting contributions such committee.	
<u></u>	NAME OF COMMITTEE (In Full)	14.110 4110 441	areas et any pontion committee to			
$ \rangle$	UnitedHealth Group Incorporated PAC	(United for	Health)			
	officed feath Group incorporated i Ao	(Officed for	rieami)			
	Full Name (Last, First, Middle Initial)					
A.	GAYE ADAMS MASSEY			Date of Receipt		
	Mailing Address 9900 Bren Road East			M M / D D	/ Y Y Y Y	
	MN008-T500	Ctoto	7in Codo		04500004545007	
	City Minnetonka	State MN	Zip Code	Transaction ID: Pl		
	•	IVIIN	55343	Amount of Each Re	ceipt this Period	
	FEC ID number of contributing federal political committee.	C			134.61	
	rederal political committee.					
	Name of Employer UnitedHealth Group, Inc.	Occupation	n			
		Attorney				
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General		384.60	P/R Deduction (\$1	9.23 Bi-	
	Other (specify)	0 0		Weekly)		
	Full Name (Last, First, Middle Initial)					
В.				Date of Receipt		
	Mailing Address 9900 Bren Road East			-	/ Y Y Y Y	
	MN008-T700					
	City	State	Zip Code	Transaction ID: PF	31596304615207	
	Minnetonka	MN	55343	Amount of Each Re	ceipt this Period	
	FEC ID number of contributing	C			80.78	
	federal political committee.				00.70	
	Name of Employer UnitedHealth Group, Inc.	Occupation	n			
	UnitedHealth Group, Inc.	Finance				
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General		000.00	P/R Deduction (\$1	1.54 Bi-	
	Other (specify)		230.80	Weekly)		
C.	Full Name (Last, First, Middle Initial) MICHAEL JOHN MCDONNELL			Date of Receipt		
C.	Mailing Address 9900 Bren Road			−	/ Y Y Y Y	
	East					
	City	State	Zip Code	Transaction ID: PF	R1596304715207	
	Minnetonka	MN	55343-9664	Amount of Each Re	ceipt this Period	
	FEC ID number of contributing				539.00	
federal political committee. Name of Employer UnitedHealth Group, Inc. At		C			559.00	
		Occupation	n			
		Attorney	•			
			e Year-to-Date ▼			
Primary General				P/R Deduction (\$7	77.00 Bi-	
Other (specify) ▼			1540.00	Weekly)		
					754.00	
S	UBTOTAL of Receipts This Page (optional)		·····		754.39	
T	OTAL This Period (last page this line number of	only)	>			

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 37/105			
ITEMIZED RECEIPTS			or each category of the	(check only one)			
	LIVIIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12			
۸۰	y information copied from such Reports and Stateme	onto mov	not be cold or used by any person	13 14 15 16 17			
or	for commercial purposes, other than using the name	and addr	ress of any political committee to s	solicit contributions from such committee.			
$\overline{\ \ }$	NAME OF COMMITTEE (In Full)						
\rangle	UnitedHealth Group Incorporated PAC (Unit	ted for H	lealth)				
_							
Δ	Full Name (Last, First, Middle Initial) GEORGE L MIKAN III			Date of Receipt			
Mailing Address 9900 Bren Road East				M M / D D / Y Y Y Y			
	MN008-T700						
	City	State	Zip Code	Transaction ID: PR1596304815207			
	<u>Minnetonka</u>	ΜN	55343	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee	· '		538.44			
	federal political committee.	-		335.11			
	Name of Employer UnitedHealth Group, Inc.	cupation					
	UnitedHealth Group, Inc.	nance					
		ggregate `	Year-to-Date ▼				
	Primary General		1538.40	P/R Deduction (\$76.92 Bi-			
	Other (specify) ▼	1 1		Weekly)			
	Full Name (Last, First, Middle Initial)						
3.	CAROL B MORNESS			Date of Receipt			
Mailing Address 9900 Bren Road East				M M / D D / Y Y Y Y			
	City.		Zip Code				
City State Minnetonka MN			55343-9664	Transaction ID: PR1596304915207 Amount of Each Receipt this Period			
	FEC ID assessment of a satisfaction		33343-9004	Amount of Each Recept this Period			
	FEC ID number of contributing federal political committee.			269.22			
	UnitedHealth Group Inc	cupation nderwriti	na				
			Year-to-Date ▼	_			
	Primary General	33 - 3		P/R Deduction (\$38.46 Bi-			
	Other (specify) ▼	0 0	769.20	Weekly)			
3 .	Full Name (Last, First, Middle Initial) PAMELA J RUSSO			Date of Receipt			
-•	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y			
	•	State	Zip Code	Transaction ID: PR1596305015207			
	Minnetonka M	ИN	55343-9664	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.			80.78			
	rederal political committee.						
Name of Employer UnitedHealth Group, Inc. Occupati Personi		•					
				_			
	Receipt For: Ag Primary General	ggregate	Year-to-Date ▼	D/D D - 1 - 1' (644 54 B)			
	Other (specify)		230.80	P/R Deduction (\$11.54 Bi- Weekly)			
		0 0					
s	UBTOTAL of Receipts This Page (optional)		>	888.44			
T	OTAL This Period (last page this line number only)		•				

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 105 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC (United for	Health)	
۹.	Full Name (Last, First, Middle Initial) SCOTT E THEISEN Mailing Address 9900 Bren Road East			Date of Receipt
	MN008-W395			
	City Minnetonka	State MN	Zip Code 55343	Transaction ID: PR1596305615207 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33343	134.61
	Name of Employer UnitedHealth Group, Inc.	Occupation Finance	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 384.60	P/R Deduction (\$19.23 Bi- Weekly)
3.	Full Name (Last, First, Middle Initial) ROGER A WEBER Mailing Address 9900 Bren Road East			Date of Receipt
	Mailing Address 9900 Bren Road East			
	City	State	Zip Code	Transaction ID: PR1596305715207
	Minnetonka FEC ID number of contributing federal political committee.	C	55343-9664	Amount of Each Receipt this Period 80.78
	Name of Employer UnitedHealth Group, Inc.	Occupation Administ		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 230.80	P/R Deduction (\$11.54 Bi- Weekly)
— Э.	Full Name (Last, First, Middle Initial) GEOFFREY ALAN GOTHRO			Date of Receipt
	Mailing Address 9900 Bren Road East MN008-T700			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1596306815207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		269.22
	Name of Employer UnitedHealth Group, Inc.	Occupation Marketing		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 769.20	P/R Deduction (\$38.46 Bi- Weekly)
S	UBTOTAL of Receipts This Page (optional)			484.61
т	OTAL This Period (last page this line number on	ılv)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 105 (check only one) X 11a 11b 11c 12
An	y information copied from such Reports and Sta for commercial purposes, other than using the n	atements may	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC ((United for	Health)	
A .	Full Name (Last, First, Middle Initial) THOMAS D LEWIS Mailing Address 9900 Bren Road East			Date of Receipt
	City	State	Zip Code	Transaction ID: PR1596306915207
	Minnetonka FEC ID number of contributing federal political committee.	C	55343-9664	Amount of Each Receipt this Period 269.22
	Name of Employer UnitedHealth Group, Inc. Receipt For: Primary General Other (specify) ▼	Occupation Executive Aggregate		P/R Deduction (\$38.46 Bi-Weekly)
3.	Full Name (Last, First, Middle Initial) ROBERT W OBERRENDER Mailing Address 9900 Bren Road East MN008-T380			Date of Receipt
	City Minnetonka	State MN	Zip Code 55343	Transaction ID: PR1596307015207 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00010	203.00
	Name of Employer UnitedHealth Group, Inc.		nagement	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 580.00	P/R Deduction (\$29.00 Bi- Weekly)
- C.	Full Name (Last, First, Middle Initial) ROBERT REBITZER			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1596307115207
	Minnetonka FEC ID number of contributing federal political committee.	C	55343-9664	Amount of Each Receipt this Period 134.61
	Name of Employer UnitedHealth Group, Inc.	Occupation Executive		
	Receipt For: ☐ Primary ☐ General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 384.60	P/R Deduction (\$19.23 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			606.83
T	OTAL This Period (last page this line number o	nlv)		

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 40 / 105		
	· ·		Use separate schedule(s) or each category of the	(check only one)		
ITEMIZED RECEIPTS		Detailed Summary Page		X 11a 11b 11c 12		
				13 14 15 16 17		
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the r	tements may	not be sold or used by any perso	n for the purpose of soliciting contributions		
01	NAME OF COMMITTEE (In Full)	and auc	iless of any political committee to	Solicit Contributions from Such Committee.		
	UnitedHealth Group Incorporated PAC	United for	Hoolth)			
	Officedhealth Group incorporated FAC	United for	neailii)			
_	Full Name (Last, First, Middle Initial)			2. (2.1)		
A.	DIANE L BEDNAR-FLYNN			Date of Receipt		
	Mailing Address 9900 Bren Road East MN008-W130			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR1596309715207		
	Minnetonka	MN	55343	Amount of Each Receipt this Period		
	FEC ID number of contributing					
	federal political committee.	C		140.00		
	Name of Employer UnitedHealth Group, Inc.	Occupation	1	\dashv		
	UnitedHealth Group, Inc.	Health Ca	are Services			
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General	' '	400.00	P/R Deduction (\$20.00 Bi-		
	Other (specify) ▼		400.00	Weekly)		
_	Full Name (Last, First, Middle Initial)					
В.	LISA M BEHNKE			Date of Receipt		
	Mailing Address 9900 Bren Road East			M " M / D " D / Y " Y " Y " Y		
	City	State	Zip Code	Transaction ID: PR1596309815207		
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period		
	FEC ID number of contributing					
	federal political committee.	C		700.00		
	Name of Employer	Occupation	 1	\dashv		
	UnitedHealth Group, Inc.	Medicine				
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General		2000.00	P/R Deduction (\$100.00 Bi-		
	Other (specify) ▼		2000.00	Weekly)		
_	Full Name (Last, First, Middle Initial)					
C.	JAMES M BOGDAN			Date of Receipt		
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR1596310315207		
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period		
	FEC ID number of contributing	С		133.00		
	federal political committee.	C		133.00		
	Name of Employer UnitedHealth Group, Inc.	Occupation		7		
Managen						
	Receipt For:	Aggregate	Year-to-Date ▼	. [
	Primary General Other (specify)		380.00	P/R Deduction (\$19.00 Bi- Weekly)		
	Other (Specify) \		1 1 1 1 1 1 1	I I Solidy)		
Г	L					
s	UBTOTAL of Receipts This Page (optional)			973.00		
\vdash						

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)	()	Use separate schedule(s)	FOR LINE NUMBER: PAGE 41 / 105
ITEMIZED RECEIPTS	•	or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12
		, ,	13 14 15 16 17
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any persor dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated F	PAC (United for	Health)	
Full Name (Last, First, Middle Initial) 1. JEFFREYS COOK			Date of Receipt
Mailing Address 9900 Bren Road Ea	ast		M M / D D / Y Y Y Y
City	State	Zip Code	Transaction ID: PR1596311315207
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		80.78
Name of Employer UnitedHealth Group, Inc.	Occupation Network	n Management	
Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	230.80	P/R Deduction (\$11.54 Bi- Weekly)
Full Name (Last, First, Middle Initial) 3. RAMON E COTO			Date of Receipt
Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
City	State	Zip Code	Transaction ID: PR1596311515207
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		134.61
Name of Employer UnitedHealth Group, Inc.	Occupation	n	
Receipt For:	Finance Aggregate	e Year-to-Date ▼	
Primary General	33 13		P/R Deduction (\$19.23 Bi-
Other (specify)	0 0	384.60	Weekly)
Full Name (Last, First, Middle Initial) ANNE D DEFUSCO			Date of Receipt
Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
City	State	Zip Code	Transaction ID: PR1596311715207
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		80.78
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	n	
Receipt For:	Aggregate	e Year-to-Date ▼	1
Primary General Other (specify) ▼	0 0	230.80	P/R Deduction (\$11.54 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional	al))	296.17
TOTAL This Period (last page this line num	her only)		
IVIAL THIS I CHOO (last page this lifte hull	юст отпу <i>)</i>	······	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 105 (check only one)
_				13 14 15 16 17
Ar or	ny information copied from such Reports and State for commercial purposes, other than using the research	atements may name and add	not be sold or used by any personal dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC	(United for	Health)	
Α.	Full Name (Last, First, Middle Initial) JEFFREY P DOOLEY			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1596312115207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		80.78
	Name of Employer UnitedHealth Group, Inc. Sales		n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		230.80	P/R Deduction (\$11.54 Bi- Weekly)
В.	Full Name (Last, First, Middle Initial) RICHARD G DUNLOP			Date of Receipt
	Mailing Address 9900 Bren Road East City Sta			M M / D D / Y Y Y Y
			Zip Code	Transaction ID: PR1596312315207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		175.00
	Name of Employer UnitedHealth Group, Inc.	Occupation Finance	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	P/R Deduction (\$25.00 Bi- Weekly)
<u> </u>	Full Name (Last, First, Middle Initial) KEITH A EPPERSON			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1596312415207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		105.00
	Name of Employer UnitedHealth Group, Inc.	Occupation Actuary	n	
		Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	P/R Deduction (\$15.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			360.78
 	OTAL This Period (last page this line number of	nlv)	·	

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 43 / 105
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar or	ly information copied from such Reports and Sta for commercial purposes, other than using the n	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	UnitedHealth Group Incorporated PAC ((United for	Health)	
۹.	Full Name (Last, First, Middle Initial) JILLIAN R FOUCRE			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1596312715207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		140.00
	Name of Employer UnitedHealth Group, Inc.	Occupation Senior M	n anagement	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	1 1	400.00	P/R Deduction (\$20.00 Bi- Weekly)
3.	Full Name (Last, First, Middle Initial) STEVAN D GARCIA			Date of Receipt
	Mailing Address 9900 Bren Road East		M M / D D / Y Y Y Y	
	City	State	Zip Code	Transaction ID: PR1596312915207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		134.61
	Name of Employer UnitedHealth Group, Inc.	Occupation Data Sys		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		384.60	P/R Deduction (\$19.23 Bi- Weekly)
 C.	Full Name (Last, First, Middle Initial) RANDY P GILES			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1596313215207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		269.22
	Name of Employer UnitedHealth Group, Inc.	Occupation Health C		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 769.20	P/R Deduction (\$38.46 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			543.83
			<u> </u>	
T	OTAL This Period (last page this line number or	nlv)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 44 / 105
	EMIZED RECEIPTS		or each category of the	(check only one)
•			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar	y information copied from such Reports and Stater	ments may	not be sold or used by any person	n for the purpose of soliciting contributions
or	for commercial purposes, other than using the name	lress of any political committee to	solicit contributions from such committee.	
\setminus	NAME OF COMMITTEE (In Full)		I I I4I-)	
/	UnitedHealth Group Incorporated PAC (UnitedHealth Group Incorporated PAC (UnitedHealt	nited for	Healtn)	
Δ	Full Name (Last, First, Middle Initial) EDWARD J HAWLEY			Date of Receipt
٦.	Mailing Address 9900 Bren Road			M M / D D / Y Y Y Y
	East			
	City	State	Zip Code	Transaction ID: PR1596313615207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		269.22
	UnitedHealth Group Inc	Occupation]
			Year-to-Date ▼	
	Primary General		769.20	P/R Deduction (\$38.46 Bi-
	Other (specify)	0 0	703.20	Weekly)
3.	Full Name (Last, First, Middle Initial) KURT A HEUMANN			Date of Receipt
Mailing Address 9900 Bren Road East				M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1596313715207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	UnitedHealth Group Inc	Occupation		
			on Networking Year-to-Date ▼	
	Primary General	riggregate		P/R Deduction (\$12.00 Bi-
	Other (specify) ▼	0 0	240.00	Weekly)
).	Full Name (Last, First, Middle Initial) NANETTE R KARTSONIS			Date of Receipt
	Mailing Address 9900 Bren Road East MN008-W130			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1596314615207
	Minnetonka	MN	55343	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		140.00
	UnitedHealth Group, Inc.	Occupation Sales	1	1
		Aggregate	Year-to-Date ▼	
	Primary General Other (specify)		400.00	P/R Deduction (\$20.00 Bi- Weekly)
	Curior (opeouty) 🔻	0 0	0 0 0 0 0 0 0	
s	UBTOTAL of Receipts This Page (optional)		·····	493.22
_	OTAL This Period (last page this line number only	n		
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 45 / 105
ITEMIZED RECEIPTS		or each category of the	(check only one)
		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Any information copied from such Reports and	Statements ma	y not be sold or used by any perso	on for the purpose of soliciting contributions
or for commercial purposes, other than using the	solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)			
UnitedHealth Group Incorporated PA	C (United for	Health)	
Full Name (Last, First, Middle Initial) A. EDWARD LAGERSTROM			Date of Receipt
Mailing Address 9900 Bren Road Eas MN008-T430	t		M " M / D " D / Y " Y " Y
City	State	Zip Code	Transaction ID: PR1596315015207
Minnetonka	MN	55343	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		269.22
Name of Employer UnitedHealth Group, Inc.	Occupatio	n ion Systems	
Receipt For:	Aggregate	e Year-to-Date ▼	7
Primary General Other (specify) ▼		769.20	P/R Deduction (\$38.46 Bi- Weekly)
Full Name (Last, First, Middle Initial) THOMAS CHARLES REKART	•		Date of Receipt
Mailing Address 9900 Bren Road East City State			M M / D D / Y Y Y Y
		Zip Code	Transaction ID: PR1596316715207
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		134.61
Name of Employer UnitedHealth Group, Inc.	Occupation		
Receipt For:		ion Systems e Year-to-Date ▼	_
Primary General	riggregati		P/R Deduction (\$19.23 Bi-
Other (specify) ▼	0 0	384.60	Weekly)
Full Name (Last, First, Middle Initial) C. JOHN H RENNICK JR	_		Date of Receipt
Mailing Address 9900 Bren Road Eas	t		M " M / D " D / Y " Y " Y " Y
City	State	Zip Code	Transaction ID: PR1596316815207
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		134.61
Name of Employer UnitedHealth Group, Inc.	Occupation Doctor	n	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	384.60	P/R Deduction (\$19.23 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)			538.44
TOTAL This Period (last page this line number	or only)		
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SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 46 / 105
ITEMIZED RECEIPTS		or each category of the	(check only one)	
•			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar	ny information copied from such Reports and S	tatements may	y not be sold or used by any perso	n for the purpose of soliciting contributions
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	UnitedHealth Group Incorporated PAC	(United for	Health)	
^	Full Name (Last, First, Middle Initial) JAMISON RICE			Date of Receipt
Α.	Mailing Address 9900 Bren Road			M M / D D / Y Y Y Y
	East			
	City	State	Zip Code	Transaction ID: PR1596316915207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		80.78
	Name of Employer UnitedHealth Group, Inc.	Occupation Finance	n	
	Receipt For:		e Year-to-Date ▼	7
	Primary General		000.00	P/R Deduction (\$11.54 Bi-
	Other (specify) ▼	0 0	230.80	Weekly)
— В.	Full Name (Last, First, Middle Initial) STEPHAN S RODGERS			Date of Receipt
	Mailing Address 9900 Bren Road			M " M / D " D / Y " Y " Y " Y
	East City	State	Zip Code	Transaction ID: PR1596317115207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		807.66
	Name of Employer UnitedHealth Group, Inc.	Occupation	n	7
	UnitedHealth Group, Inc.	Executive	Э	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		2307.60	P/R Deduction (\$115.38 Bi- Weekly)
		0 0	0 0 0 0 0 0 0	,
C.	Full Name (Last, First, Middle Initial) DANIEL I ROSENTHAL			Date of Receipt
•	Mailing Address 9900 Bren Road			M M / D D / Y Y Y Y
	East			
	City	State	Zip Code	Transaction ID: PR1596317315207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		134.61
	Name of Employer UnitedHealth Group, Inc.	Occupation		1
	·	Executive	-	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		384.60	P/R Deduction (\$19.23 Bi- Weekly)
	case (eposity) \	0 0	0 0 0 0 0 0 0	1.33,
s	SUBTOTAL of Receipts This Page (optional)			1023.05
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SCHEDULE A (FEC Form 3X)

SCHE	EDULE A (FEC Form 3X)			FOR LINE NUMBER:	PAGE 47 / 105
			Use separate schedule(s) or each category of the	(check only one)	
I I EMI	IZED RECEIPTS		Detailed Summary Page	X 11a 11b	11c 12
			., .,	13 14	15 16 17
Any info	rmation copied from such Reports and Sta mmercial purposes, other than using the n	tements may ame and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of solicit solicit contributions from s	ing contributions such committee.
	E OF COMMITTEE (In Full)		71		
\	edHealth Group Incorporated PAC (United for	Health)		
	Name (Last, First, Middle Initial) N J RUTH			Date of Receipt	
Maili	ng Address 9900 Bren Road East			M M / D D	/ Y Y Y Y Y
City		State	Zip Code	Transaction ID: PF	11596317415207
<u>Minı</u>	netonka	MN	55343-9664	Amount of Each Red	ceipt this Period
	ID number of contributing ral political committee.	C			525.00
Nam Unite	e of Employer edHealth Group, Inc.	Occupation			
Rece	eipt For:		e Year-to-Date ▼		
	Primary General Other (specify) ▼		1500.00	P/R Deduction (\$7 Weekly)	5.00 Bi-
	Name (Last, First, Middle Initial) UEL A SELVA			Date of Receipt	
Maili	ng Address 9900 Bren Road East		M M / D D	/ Y Y Y Y	
City		Transaction ID: PF	11596317715207		
<u>Min</u> ı	netonka	MN	55343-9664	Amount of Each Red	ceipt this Period
	ID number of contributing al political committee.	C			134.61
Nam Unite	e of Employer edHealth Group, Inc.	Occupation Doctor	n	7	
Rece	eipt For:		e Year-to-Date ▼		
	Primary General Other (specify) ▼		384.60	P/R Deduction (\$1 Weekly)	9.23 Bi-
_	Name (Last, First, Middle Initial) NR SERRANO			Date of Receipt	
-	ng Address 9900 Bren Road East			M M / D D	/ Y Y Y Y
City		State	Zip Code	Transaction ID: PF	1596317815207
<u>Min</u>	netonka	MN	55343-9664	Amount of Each Red	ceipt this Period
	ID number of contributing ral political committee.	C			134.61
Nam Unite	e of Employer edHealth Group, Inc.	Occupation Executive			
Rece	eipt For: Primary General	Aggregate	e Year-to-Date ▼	D/D Doduction (¢1	0.02 Di
	Other (specify) ▼		384.60	P/R Deduction (\$1 Weekly)	9.23 DI-
SUBTO	DTAL of Receipts This Page (optional)				794.22
TOTAL	. This Period (last page this line number or	nly)	>		

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5(CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
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An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	itements may ame and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
<u>. </u>	NAME OF COMMITTEE (In Full)		areas ar arry permanent committee to	
/	` ,	المثلمة الما	I I a a likb	
/	UnitedHealth Group Incorporated PAC	United for	Health)	
_	Full Name (Last, First, Middle Initial)			
۹.	DAVID C STURKEY			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1596318415207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing			000.00
	federal political committee.	C		269.22
		10		_
	Name of Employer UnitedHealth Group, Inc.	Occupation		
	· · · · · · · · · · · · · · · · · · ·	Health C	•••	4
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify)		769.20	P/R Deduction (\$38.46 Bi- Weekly)
	☐ Other (specify) ▼			VV EERIY)
	Full Name (Look First Middle Initial)			
3.	Full Name (Last, First, Middle Initial) ROXANNE THOMAS			Date of Receipt
•	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	MN008-T615			W W / B B / T T T T
	City	State	Zip Code	Transaction ID: PR1596318915207
	Minnetoka	MN	55343	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		80.78
	Name of Employer UnitedHealth Group, Inc.	Occupation		
		Administ		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		230.80	P/R Deduction (\$11.54 Bi-
	Other (specify) ▼		200.00	Weekly)
	E-IIN (Local Et al NEL III al III a			
•	Full Name (Last, First, Middle Initial) ROSEMARY VENUTO			Date of Receipt
٠.	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	mamig / tourcoo 9900 DIEH Roau East			
	City	State	Zip Code	Transaction ID: PR1596319315207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		134.61
	Name of Employer UnitedHealth Group, Inc.	Occupation		
		Medicine		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		384.60	P/R Deduction (\$19.23 Bi-
	Other (specify)		33.1.30	Weekly)
0	UBTOTAL of Receipts This Page (optional)			484.61
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S	CHEDULE A (FEC Form 3X)		Harana and a salarah da (a)	FOR LINE NUMBER: PAGE 49 / 105
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
11	EIVIIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the i	atements may name and add	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	UnitedHealth Group Incorporated PAC	(United for	Health)	
A.	Full Name (Last, First, Middle Initial) M LAURIE WASSERSTEIN			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1596319515207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		134.61
	Name of Employer UnitedHealth Group, Inc.	Occupation Informati	n on Systems	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		384.60	P/R Deduction (\$19.23 Bi- Weekly)
	Full Name (Last, First, Middle Initial)			_
В.	MYRON R WERLEY			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1596319615207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		87.50
	Name of Employer UnitedHealth Group, Inc.	Occupation	n	
		Insurance		
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼		250.00	P/R Deduction (\$12.50 Bi- Weekly)
<u> </u>	Full Name (Last, First, Middle Initial) EDWARD J WHEELER			Date of Receipt
	Mailing Address 9900 Bren Road East			M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	Transaction ID: PR1600594415207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		280.00
	Name of Employer UnitedHealth Group, Inc.	Occupation Mktg & S	n trategic Performance	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	800.00	P/R Deduction (\$40.00 Bi- Weekly)
[e	UBTOTAL of Receipts This Page (optional)			502.11
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Use separate schedule(s) or each category of the Detailed Summary Page X 11a	7
Detailed Summary Page A]
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC (United for Health) Full Name (Last, First, Middle Initial) STEVE L BROECKERT Mailing Address 9900 Bren Road East City State Zip Code Minnetonka MN 55343-9664 FEC ID number of contributing federal political committee. Name of Employer UnitedHealth Group, Inc. Receipt For: Primary General Other (specify) Any information to seld by any person for the purpose of soliciting contributions or should be any political committee to solicit contributions from such contributions from such contributions from such contributions of any political committee. Date of Receipt Transaction ID: PR1600597215207 Amount of Each Receipt this Period 80.78]
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC (United for Health) Full Name (Last, First, Middle Initial) STEVE L BROECKERT Mailing Address 9900 Bren Road East City State Zip Code Minnetonka MN 55343-9664 FEC ID number of contributing federal political committee. Name of Employer UnitedHealth Group, Inc. Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ P/R Deduction (\$11.54 Bi-Weekly)	7
UnitedHealth Group Incorporated PAC (United for Health) Full Name (Last, First, Middle Initial) STEVE L BROECKERT Mailing Address 9900 Bren Road East City State Zip Code Minnetonka MN 55343-9664 FEC ID number of contributing federal political committee. Name of Employer UnitedHealth Group, Inc. Receipt For: Primary General Other (specify) Anount of Each Receipt this Period P/R Deduction (\$11.54 Bi-Weekly)	7
Full Name (Last, First, Middle Initial) STEVE L BROECKERT Mailing Address 9900 Bren Road East City State Zip Code Minnetonka MN 55343-9664 FEC ID number of contributing federal political committee. Name of Employer UnitedHealth Group, Inc. Receipt For: Primary General Other (specify) Capaciton Securities Aggregate Year-to-Date 230.80 Date of Receipt Transaction ID: PR1600597215207 Amount of Each Receipt this Period 80.78	7
A. STEVE L BROECKERT Mailing Address 9900 Bren Road East City State Zip Code Minnetonka MN 55343-9664 FEC ID number of contributing federal political committee. Name of Employer UnitedHealth Group, Inc. Receipt For: Primary General Other (specify) And PR Deduction (\$11.54 Bi-Weekly)	7
City Minnetonka FEC ID number of contributing federal political committee. Name of Employer UnitedHealth Group, Inc. Receipt For: Primary Other (specify) ▼ State Zip Code MN 55343-9664 C C Amount of Each Receipt this Period 80.78 C Primary Aggregate Year-to-Date ▼ P/R Deduction (\$11.54 Bi-Weekly)	7
Minnetonka FEC ID number of contributing federal political committee. Name of Employer UnitedHealth Group, Inc. Receipt For: Primary General Other (specify) ▼ Amount of Each Receipt this Period 80.78 Amount of Each Receipt this Period 80.78 Primary Deduction (\$11.54 Bi-Weekly)	7
FEC ID number of contributing federal political committee. Name of Employer UnitedHealth Group, Inc. Receipt For: Primary General Other (specify) 230.80 Aggregate Year-to-Date P/R Deduction (\$11.54 Bi-Weekly)	
Name of Employer UnitedHealth Group, Inc. Receipt For: Primary Other (specify) ▼ Occupation Securities Aggregate Year-to-Date ▼ P/R Deduction (\$11.54 Bi-Weekly)	
Receipt For: Primary Other (specify) Aggregate Year-to-Date 230.80 P/R Deduction (\$11.54 Bi-Weekly)	
Receipt For: Primary Other (specify) Aggregate Year-to-Date ▼ P/R Deduction (\$11.54 Bi-Weekly)	
Other (specify)	
Office (Specify) •	
Full Name (Last, First, Middle Initial) B. JOHN P DODDY Date of Receipt	
Mailing Address 9900 Bren Road East]
City State Zip Code Transaction ID: PR1600597315207	7
Minnetonka MN 55343-9664 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	
Name of Employer UnitedHealth Group, Inc. UnitedHealth Group, Inc. UnitedHealth Group, Inc. UnitedHealth Group, Inc.	
Receipt For: Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼ 400.00 P/R Deduction (\$20.00 Bi-Weekly)	
Full Name (Last First Middle Initial)	
Full Name (Last, First, Middle Initial) C. MARGUERITE EDWARDS Date of Receipt	
Mailing Address 9900 Bren Road East	
City State Zip Code Transaction ID: PR1600597415207	7
Minnetonka MN 55343-9664 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	
Name of Employer UnitedHealth Group, Inc. Management	
Receipt For: Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼ General 769.20 P/R Deduction (\$38.46 Bi-Weekly)	
SUBTOTAL of Receipts This Page (optional)	
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 51 / 105				
ITEMIZED RECEIPTS		or each category of the	(check only one)				
		Detailed Summary Page	X 11a 11b 11c 12 15 16 17				
Any information copied from such Reports and	Statements may	not be sold or used by any perso	on for the purpose of soliciting contributions				
or for commercial purposes, other than using th	e name and add	dress of any political committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)							
UnitedHealth Group Incorporated PA	C (United for	Health)					
Full Name (Last, First, Middle Initial) A. MICHAEL ILE			Date of Receipt				
Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y				
City	State	Zip Code	Transaction ID: PR1600597615207				
<u>Minnetonka</u>	MN	55343-9664	Amount of Each Receipt this Period				
FEC ID number of contributing	С		134.61				
federal political committee.							
Name of Employer UnitedHealth Group, Inc.	Occupatio	n					
UnitedHealth Group, Inc.	Manager						
Receipt For:	Aggregate	e Year-to-Date ▼					
Primary General Other (specify) ▼		384.60	P/R Deduction (\$19.23 Bi- Weekly)				
Other (specify)	0 0	0 0 0 0 0 0 0	Weekly)				
Full Name (Last, First, Middle Initial)							
B. THOMAS J O'BRIEN			Date of Receipt				
Mailing Address 9900 Bren Road East			M " M / D " D / Y " Y " Y " Y				
City	Ctoto	Zip Code					
Minnetonka	State MN	55343-9664	Transaction ID: PR1600597815207				
	IVIIN	33343-9004	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		269.22				
Name of Employer UnitedHealth Group, Inc.	Occupatio						
Receipt For:	Manager	nent e Year-to-Date 🔻	_				
Primary General	Aggregate	real-10-Date V	D/D Doduction (\$29.46 Di				
Other (specify) ▼		769.20	P/R Deduction (\$38.46 Bi- Weekly)				
Full Name (Last, First, Middle Initial)							
C. LISA VANDERHEYDEN			Date of Receipt				
Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y				
City	State	Zip Code	Transaction ID: PR1600598015207				
<u>Minnetonka</u>	MN	55343-9664	Amount of Each Receipt this Period				
FEC ID number of contributing			20.00				
federal political committee.	C		20.00				
Name of Employer	Occupatio	n	+				
Name of Employer UnitedHealth Group, Inc.		on Systems					
Receipt For:		e Year-to-Date ▼					
Primary General		280.00	P/R Deduction (\$20.00 Bi-				
Other (specify) ▼	0 0	200.00	Weekly)				
SUPTOTAL of Possints This Poss (anti	SUBTOTAL of Receipts This Page (optional)						
SOBTOTAL OF Receipts This Page (optional) .							
TOTAL This Period (last page this line numbe	r only)						

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 52 / 105
	EMIZED RECEIPTS		or each category of the	(check only one)
•			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	UnitedHealth Group Incorporated PAC (I	United for	Health)	
۹.	Full Name (Last, First, Middle Initial) STEPHEN B GREENBERG			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1600598415207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		134.61
	Name of Employer UnitedHealth Group, Inc.	Occupation Operation		
	Receipt For:	•	Year-to-Date ▼	
	Primary General Other (specify) ▼		384.60	P/R Deduction (\$19.23 Bi- Weekly)
	Full Name (Last, First, Middle Initial)			
3.	MICHAEL D MICHAUX			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1600598515207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		80.78
	Name of Employer UnitedHealth Group, Inc.	Occupation Attorney	1	
	Receipt For:		Year-to-Date ▼	
	Primary General		230.80	P/R Deduction (\$11.54 Bi-
	Other (specify) ▼	0 0	200.00	Weekly)
 Э.	Full Name (Last, First, Middle Initial) LEWIS G SANDY			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1600598715207
	<u>Minnetonka</u>	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		455.00
	Name of Employer UnitedHealth Group, Inc.	Occupation Doctor	١	
	Receipt For:	Aggregate	Year-to-Date ▼]
	Primary General Other (specify) ▼		1300.00	P/R Deduction (\$65.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			670.39
_	OTAL THE DESCRIPTION OF THE PROPERTY OF THE PR	LA		
	OTAL This Period (last page this line number on	IV)	•	

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 53 / 105
	•		Use separate schedule(s) or each category of the	(check only one)
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			Dotailed Carrinally Lage	13 14 15 16 17
Ar	y information copied from such Reports and St	atements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	UnitedHealth Group Incorporated PAC	(United for	Health)	
Α.	Full Name (Last, First, Middle Initial) MICHAEL P CAUTIN			Date of Receipt
	Mailing Address 9900 Bren Road East MN008-T500			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1602667515207
	Minnetonka	MN	55343	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		134.61
	Name of Employer UnitedHealth Group, Inc.	Occupation	n on Systems	7
	Receipt For:		e Year-to-Date ▼	
	Primary General	39 -3		P/R Deduction (\$19.23 Bi-
	Other (specify) ▼		384.60	Weekly)
В.	Full Name (Last, First, Middle Initial) MATTHEW W PETERSON			Date of Receipt
	Mailing Address 9900 Bren Road			M M / D D / Y Y Y Y
	East			
	City	State	Zip Code	Transaction ID: PR1602669915207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing	С		280.00
	federal political committee.			200.00
	Name of Employer	Occupation	n	7
	UnitedHealth Group, Inc.	Human F	Resources	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		000.00	P/R Deduction (\$40.00 Bi-
	Other (specify) ▼		800.00	Weekly)
	Full Name (Last, First, Middle Initial)			
C.	JEFF W MALONEY			Date of Receipt
	Mailing Address 9900 Bren Road East MN008-W130			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1613243515207
	Minnetonka	MN	55343	Amount of Each Receipt this Period
	FEC ID number of contributing	С		538.44
	federal political committee.			300.44
	Name of Employer UnitedHealth Group, Inc.	Occupation Finance	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		1500 10	P/R Deduction (\$76.92 Bi-
	Other (specify)		1538.40	Weekly)
				050.05
s	UBTOTAL of Receipts This Page (optional)			953.05
				-

TOTAL This Period (last page this line number only)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 54 / 105 (check only one)
•			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the na	tements may ame and add	y not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC (United for	Health)	
۸.	Full Name (Last, First, Middle Initial) LAURA M BRANKER			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1613243615207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		201.95
	Name of Employer UnitedHealth Group, Inc.	Occupation Public Re		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		577.00	P/R Deduction (\$28.85 Bi- Weekly)
3.	Full Name (Last, First, Middle Initial) ALLEN LAWRENCE FINKELSTEIN			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1620989015207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		269.22
	Name of Employer UnitedHealth Group, Inc.	Occupation Administ	ration	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		769.20	P/R Deduction (\$38.46 Bi- Weekly)
	Full Name (Last, First, Middle Initial) VALERIE GREY			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1620989215207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		76.92
	Name of Employer UnitedHealth Group, Inc.		on Systems	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 326.91	P/R Deduction (\$19.23 Bi- Weekly)
S	UBTOTAL of Receipts This Page (optional)			548.09
т	OTAL This Period (last page this line number or	ılv)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 55 / 105
TEMIZED RECEIPTS		or each category of the	(check only one)
		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Any information copied from such Reports and	Statements ma	v not be sold or used by any perso	
or for commercial purposes, other than using th	e name and ad	dress of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
UnitedHealth Group Incorporated PA	C (United for	Health)	
Full Name (Last, First, Middle Initial) A. DANIEL S WALLER			Date of Receipt
Mailing Address 9900 Bren Road East MN008-W385			M " M / D " D / Y " Y " Y
City	State	Zip Code	Transaction ID: PR1632360015207
Minnetonka	MN	55343	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		201.95
Name of Employer UnitedHealth Group, Inc.	Occupatio Manager		
Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	577.00	P/R Deduction (\$28.85 Bi- Weekly)
Full Name (Last, First, Middle Initial) 3. WILLIAM F KENNEDY			Date of Receipt
Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
City	State	Zip Code	Transaction ID: PR1653443115207
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		107.73
Name of Employer UnitedHealth Group, Inc.	Occupatio	n ion Systems	
Receipt For:	_, -	e Year-to-Date ▼	
Primary General		307.80	P/R Deduction (\$15.39 Bi-
Other (specify)	0 0	307.80	Weekly)
Full Name (Last, First, Middle Initial) STEVE R KOOREN			Date of Receipt
Mailing Address 9900 Bren Road East	t		M M / D D / Y Y Y Y
City	State	Zip Code	Transaction ID: PR1653443215207
<u>Minnetonka</u>	MN	55343-9664	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		403.83
Name of Employer UnitedHealth Group, Inc.	Occupatio Finance	n	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	1153.80	P/R Deduction (\$57.69 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional) .			713.51
TOTAL This Period (last page this line numbe	r only)		
IVIAL THIS FEHOU (IAST PAGE THIS HITE NUMBE	ı UIIIY)		

SCHEDULE A (FEC Form 3X))	Use separate schedule(s)	FOR LINE NUMBER: PAGE 56 / 105
TEMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
		Detailed Summary Page	13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
UnitedHealth Group Incorporated PA	C (United for	Health)	
Full Name (Last, First, Middle Initial) A. SUE E BRAY			Date of Receipt
Mailing Address 9900 Bren Road East	t		M " M / D " D / Y " Y " Y " Y
City	State	Zip Code	Transaction ID: PR1653444415207
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		80.78
Name of Employer UnitedHealth Group, Inc.	Occupation Accounti		
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		230.80	P/R Deduction (\$11.54 Bi- Weekly)
Full Name (Last, First, Middle Initial) 3. ANTHONY D OLSON	!		Date of Receipt
Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
City	State	Zip Code	Transaction ID: PR1653445315207
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		84.00
Name of Employer UnitedHealth Group, Inc.	Occupatio	n ion Technology	
Receipt For:		e Year-to-Date ▼	_
Primary General	1 1	240.00	P/R Deduction (\$12.00 Bi-
Other (specify)	0 0	2-70.00	Weekly)
Full Name (Last, First, Middle Initial) C. DANIEL T SULLIVAN			Date of Receipt
Mailing Address 9900 Bren Road East			M " M / D " D / Y " Y " Y " Y
City	State	Zip Code	Transaction ID: PR1653445815207
<u>Minnetonka</u>	MN	55343-9664	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		80.78
Name of Employer UnitedHealth Group, Inc.	Occupation Informat	ⁿ ion Systems	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		230.80	P/R Deduction (\$11.54 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)			245.56
TOTAL This Period (last page this line number	er only)		
ino i chou (last page this line hullibe	,, Oilly /	······································	

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 57 / 105
			Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			, ,	13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	itements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	UnitedHealth Group Incorporated PAC (United for	Health)	
۹.	Full Name (Last, First, Middle Initial) FEATHER O HOUSTOUN			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1653446115207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		350.00
	Name of Employer UnitedHealth Group, Inc.	Occupation		
	Receipt For:		Year-to-Date ▼	7
	Primary General		4000.00	P/R Deduction (\$50.00 Bi-
	Other (specify) ▼	0 0	1000.00	Weekly)
3.	Full Name (Last, First, Middle Initial) JOYCE A LARKIN			Date of Receipt
	Mailing Address 9900 Bren Road East MN008-T500			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1677771615207
	Minnetonka	MN	55343	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		538.44
	Name of Employer UnitedHealth Group, Inc.	Occupation Public Re		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1538.40	P/R Deduction (\$76.92 Bi- Weekly)
 C.	Full Name (Last, First, Middle Initial) JOHN T KOUTSOUMPAS JR			Date of Receipt
	Mailing Address 9900 Bren Road East			M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	Transaction ID: PR1748514515207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		269.22
	Name of Employer UnitedHealth Group, Inc.	Occupation Public Af		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		769.20	P/R Deduction (\$38.46 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			1157.66
			-	
T	OTAL This Period (last page this line number or	nly)	>	

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 58 / 105
			Use separate schedule(s) or each category of the	(check only one)
H	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	itements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
_	NAME OF COMMITTEE (In Full)		7,7	
\rangle	UnitedHealth Group Incorporated PAC (United for	Health)	
۸.	Full Name (Last, First, Middle Initial) LEE R SHAPIRO			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1775550915207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		201.95
	Name of Employer UnitedHealth Group, Inc.	Occupation HealthCa	n ure Provider	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	577.00	P/R Deduction (\$28.85 Bi- Weekly)
3.	Full Name (Last, First, Middle Initial) ANN DESTWOLINSKI			Date of Receipt
	Mailing Address 9900 Bren Road East	M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR1806441615207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		77.00
	Name of Employer UnitedHealth Group, Inc.	Occupation Medical	1	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		220.00	P/R Deduction (\$11.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) DEBORAH A GOUGH			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1806442115207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		132.30
	Name of Employer UnitedHealth Group, Inc.		Marketing	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 378.00	P/R Deduction (\$18.90 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)		_	411.25
	,		<u> </u>	
T	OTAL This Period (last page this line number or	nly)	>	

	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar or	ny information copied from such Reports and St for commercial purposes, other than using the	atements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC	(United for	Health)	
Α.	Full Name (Last, First, Middle Initial) JEFF L LEVINE			Date of Receipt
	Mailing Address 9900 Bren Road East			M ' M / D ' D / Y ' Y ' Y ' Y
	City	State	Zip Code	Transaction ID: PR1806443215207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		140.00
	Name of Employer UnitedHealth Group, Inc.	Occupation	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 400.00	P/R Deduction (\$20.00 Bi- Weekly)
<u> </u>	Full Name (Last, First, Middle Initial) WILLIAM TALAMANTES			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1806444715207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		123.20
	Name of Employer UnitedHealth Group, Inc.	Occupation Managen		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		352.00	P/R Deduction (\$17.60 Bi- Weekly)
<u>С</u> .	Full Name (Last, First, Middle Initial) LORI A ARCHER			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1806750115207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		80.78
	Name of Employer UnitedHealth Group, Inc.	Occupation Sales	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		230.80	P/R Deduction (\$11.54 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			343.98
 	OTAL This Period (last nage this line number of	nnly)		

SCHEDULE A (FEC Form 3X)

SC	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 60 / 105
			Use separate schedule(s) or each category of the	(check only one)
111	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			,	13 14 15 16 17
Any or f	y information copied from such Reports and Staror commercial purposes, other than using the name	tements may ame and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
١.	UnitedHealth Group Incorporated PAC (United for	Health)	
_	Full Name (Last, First, Middle Initial) GREGORY A BAYER			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1806750215207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		420.00
•	Name of Employer UnitedHealth Group, Inc.			
	Receipt For:	Managen Aggregate	e Year-to-Date ▼	
	Primary General			P/R Deduction (\$60.00 Bi-
	Other (specify) ▼		1200.00	Weekly)
	Full Name (Last, First, Middle Initial) PAUL M EMERSON			Date of Receipt
	Mailing Address 9900 Bren Road East	M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR1806750315207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		134.61
•	Name of Employer UnitedHealth Group, Inc.	Occupation	n	7
		Finance		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	384.60	P/R Deduction (\$19.23 Bi- Weekly)
	Full Name (Last, First, Middle Initial) HOLLY A BODE			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1817581115207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		269.22
•	Name of Employer UnitedHealth Group, Inc.			
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		769.20	P/R Deduction (\$38.46 Bi- Weekly)
sı	JBTOTAL of Receipts This Page (optional)			823.83
	, , , , , , , , , , , , , , , ,			
TC	OTAL This Period (last page this line number or	nly)	>	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 61 / 105
	EMIZED RECEIPTS		or each category of the	(check only one)
•••			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Ar	y information copied from such Reports and St	atements may	not be sold or used by any perso	
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	UnitedHealth Group Incorporated PAC	(United for	Health)	
A.				Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1832039815207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		201.95
	Name of Employer UnitedHealth Group, Inc.	Occupation Information	n on Systems	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		577.00	P/R Deduction (\$28.85 Bi- Weekly)
— В.	Full Name (Last, First, Middle Initial) CHRISTIAN S BERGERON			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1832301915207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		201.95
	Name of Employer UnitedHealth Group, Inc.	Occupation Finance	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	577.00	P/R Deduction (\$28.85 Bi- Weekly)
<u> </u>	Full Name (Last, First, Middle Initial) SHAUNA D ULLOA			Date of Receipt
	Mailing Address 9900 Bren Road East			M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	Transaction ID: PR1832379115207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		69.24
	Name of Employer UnitedHealth Group, Inc.	Occupation Sales		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	219.26	P/R Deduction (\$0.00 Bi-W-eekly)
s	UBTOTAL of Receipts This Page (optional)			473.14
T	OTAL This Period (last page this line number of	only)		

SCHEDULE A (FEC Form 3X)

SCHEDIII	E A (FEC Form 3X)			FOR LINE NUMBER	R: PAGE 62/105
			Use separate schedule(s) or each category of the	(check only one)	
II EMIZED	RECEIPTS		Detailed Summary Page	X 11a 11b	11c 12
			,	13 14	15 16 17
Any information or for commercia	copied from such Reports and St I purposes, other than using the	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of so solicit contributions fro	liciting contributions m such committee.
NAME OF CO	DMMITTEE (In Full)				
\	th Group Incorporated PAC	(United for	Health)		
Full Name (La MICHELLE D	ast, First, Middle Initial) LEDELL			Date of Receipt	
Mailing Addre	ss 9900 Bren Road East MN008-T615				D / Y Y Y Y
City		State	Zip Code	Transaction ID:	PR1882850615207
<u>Minnetonka</u>		MN	55343	Amount of Each	Receipt this Period
FEC ID numb federal politica	er of contributing al committee.	C			280.00
Name of Emp UnitedHealth	loyer Group, Inc.	Occupation Human F	n Resources		
Receipt For:			e Year-to-Date ▼		
Primary Other (s	General specify) ▼		800.00	P/R Deduction (Weekly)	(\$40.00 Bi-
Full Name (La 3. CATHERINE F	ast, First, Middle Initial)			Date of Receipt	
	ss 9900 Bren Road East	-	D / Y Y Y Y		
City		Zip Code	Transaction ID:	PR1903550715207	
<u>Minnetonka</u>	1	MN	55343-9664		Receipt this Period
FEC ID numb federal politica	er of contributing al committee.	C			175.00
Name of Emp UnitedHealth	loyer Group, Inc.	Occupation Administ			
Receipt For:	_	Aggregate	e Year-to-Date ▼		
Primary Other (s	General Specify) ▼	0 0	425.00	P/R Deduction (Weekly)	\$25.00 Bi-
Full Name (La	ast, First, Middle Initial) BISHOP			Date of Receipt	
Mailing Addre				M M / D	D / Y Y Y Y
City		State	Zip Code	Transaction ID:	PR1903560815207
<u>Minnetonka</u>	<u> </u>	MN	55343-9664	Amount of Each	Receipt this Period
FEC ID numb federal politica	er of contributing al committee.	C			140.00
Name of Emp UnitedHealth	loyer Group, Inc.	Occupation Finance	n		
Receipt For:		Aggregate	e Year-to-Date ▼		
Primary Other (s	General specify) ▼		340.00	P/R Deduction (Weekly)	\$20.00 Bi-
SUBTOTAL of	Receipts This Page (optional)				595.00
			•	-	
TOTAL This Pe	eriod (last page this line number o	only))		

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 63 / 105
	· · · · · · · · · · · · · · · · · · ·		Use separate schedule(s) or each category of the	(check only one)
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar	y information copied from such Reports and Sta	atements may	not be sold or used by any perso	n for the purpose of soliciting contributions
or	for commercial purposes, other than using the r	name and add	aress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	UnitedHealth Group Incorporated PAC	(United for	Health)	
Α.	Full Name (Last, First, Middle Initial) ROBERT J DUFEK			Date of Receipt
	Mailing Address 9900 Bren Road East			M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	Transaction ID: PR1903577115207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		175.00
	Name of Employer UnitedHealth Group, Inc.	Occupation		7
			on Systems Management	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		425.00	P/R Deduction (\$25.00 Bi- Weekly)
	Other (specify) 🔻	0 0		(Weekly)
В.	Full Name (Last, First, Middle Initial) SUSAN B EDBERG			Date of Receipt
	Mailing Address 9900 Bren Raod East			M M / D D / Y Y Y Y
	MN008-T615			
	City	State	Zip Code	Transaction ID: PR1903578115207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing	С		700.00
	federal political committee.			
	Name of Employer UnitedHealth Group, Inc.	Occupation		
		Custome		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		1700.00	P/R Deduction (\$100.00 Bi- Weekly)
	Other (specify) ▼	0 0		Weekly)
<u> </u>	Full Name (Last, First, Middle Initial) HYONG JIN PARK			Date of Receipt
	Mailing Address 9900 Bren Road			M M / D D / Y Y Y Y
	East		7. 0	
	City	State	Zip Code	Transaction ID: PR1903611415207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		140.00
	Name of Employer UnitedHealth Group, Inc.	Occupation		7
			on Systems	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	-	340.00	P/R Deduction (\$20.00 Bi-
	Other (specify)		340.00	Weekly)
Г				
s	UBTOTAL of Receipts This Page (optional)			1015.00
\vdash	,			

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 64 / 105
TEMIZED RECEIPTS		or each category of the	(check only one)
		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Stat	tements may r	not be sold or used by any persor	for the purpose of soliciting contributions
or for commercial purposes, other than using the na	ame and addre	ess of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	I loited for U	loolth)	
UnitedHealth Group Incorporated PAC (United for H	ueaiin)	
Full Name (Last, First, Middle Initial) 4. STEVEN F PENN			Date of Receipt
Mailing Address 9900 Bren Road East			M " M / D " D / Y " Y " Y " Y
City	State	Zip Code	Transaction ID: PR1903612915207
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
FEC ID number of contributing			115.38
federal political committee.	C		113.36
Name of Employer UnitedHealth Group, Inc.	Occupation Finance		1
Receipt For:	1	Year-to-Date ▼	1
Primary General		307.68	P/R Deduction (\$19.23 Bi-
Other (specify) ▼		307.00	Weekly)
Full Name (Last, First, Middle Initial) 3. THOMAS L TRAN			Date of Receipt
Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
City	State	Zip Code	Transaction ID: PR1903633215207
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		280.00
Name of Employer UnitedHealth Group, Inc.	Occupation		1
Receipt For:	Finance Aggregate	Year-to-Date ▼	-
Primary General	, iggi ogale i		P/R Deduction (\$40.00 Bi-
Other (specify) ▼		680.00	Weekly)
Full Name (Last, First, Middle Initial) 2. PAUL D WEYMOUTH			Date of Receipt
Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
City	State	Zip Code	Transaction ID: PR1903636915207
<u>Minnetonka</u>	MN	55343-9664	Amount of Each Receipt this Period
FEC ID number of contributing	С		134.61
federal political committee.			
Name of Employer UnitedHealth Group, Inc.	Occupation Finance		
Receipt For:		Year-to-Date ▼	1
Primary General			P/R Deduction (\$19.23 Bi-
Other (specify)		326.91	Weekly)
SUBTOTAL of Receipts This Page (optional)		_	529.99
a			
TOTAL This Period (last page this line number or	nly)	>	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 65 / 105
	EMIZED RECEIPTS		or each category of the	(check only one)
••	LIMIZED REGEN 13		Detailed Summary Page	X 11a 11b 11c 12
Δ.				13 14 15 16 17
or	ny information copied from such Reports and Sta for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	UnitedHealth Group Incorporated PAC (United for	Health)	
\angle			,	
	Full Name (Last, First, Middle Initial)			1 5. 75
Α.	DELBERT D MASON			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y
	City	State	Zip Code	Transaction ID: PR1907906415207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing			140.00
	federal political committee.	C		140.00
	Name of Employer UnitedHealth Group, Inc.	Occupation	n	7
	Receipt For:	Finance	e Year-to-Date ▼	_
	Primary General	Aggregate	e real-lo-Dale V	D/D Dadwatian (\$00.00 Di
	Other (specify)		320.00	P/R Deduction (\$20.00 Bi- Weekly)
				'
В.	Full Name (Last, First, Middle Initial) JOSEPH E ADDIEGO			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2119466615207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing	С		576.00
	federal political committee.			
	Name of Employer UnitedHealth Group, Inc.	Occupation	n	7
	UnitedHealth Group, Inc.	Doctor		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify)		576.00	P/R Deduction (\$96.00 Bi- Weekly)
	Other (specify)		0 0 0 0 0 0 0	Treckly)
_	Full Name (Last, First, Middle Initial)			
Ċ.	GARY J AHWAH			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2119466715207
	<u>Minnetonka</u>	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing		1 1 1 1 1	300.00
	federal political committee.	C		300.00
	Name of Employer	Occupation	n	\dashv
	Name of Employer UnitedHealth Group, Inc.	Executive		
	Receipt For:	1	e Year-to-Date ▼	7
	Primary General		200.00	P/R Deduction (\$50.00 Bi-
	Other (specify) ▼		300.00	Weekly)
s	UBTOTAL of Receipts This Page (optional)			1016.00
\vdash				
т	OTAL This Period (last page this line number or	nly)	>	

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 66 / 105
	-		Use separate schedule(s) or each category of the	(check only one)
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	UnitedHealth Group Incorporated PAC (United for	Health)	
۸.	Full Name (Last, First, Middle Initial) BRENDAN BAKER			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2119467415207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		240.00
	Name of Employer UnitedHealth Group, Inc.	Occupation		
	Receipt For:		e Year-to-Date ▼	
	Primary General			P/R Deduction (\$40.00 Bi-
	Other (specify) ▼		240.00	Weekly)
3.	Full Name (Last, First, Middle Initial) SUSAN LYNN BERKEL			Date of Receipt
	Mailing Address 9900 Bren Road East	M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR2119468115207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1152.00
	Name of Employer UnitedHealth Group, Inc.	Occupation Finance	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1152.00	P/R Deduction (\$192.00 Bi- Weekly)
).	Full Name (Last, First, Middle Initial) DAVID J BOHMFALK			Date of Receipt
	Mailing Address 9900 Bren Road East			M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	Transaction ID: PR2119468415207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer UnitedHealth Group, Inc.	Occupation Executive		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	300.00	P/R Deduction (\$50.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			1692.00
T	OTAL This Period (last page this line number or	nly)		

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 67 / 105
			Use separate schedule(s) or each category of the	(check only one)
H	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	UnitedHealth Group Incorporated PAC (United for	Health)	
۹.	Full Name (Last, First, Middle Initial) BRADFORD A BOWLUS			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2119468815207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1140.00
	Name of Employer UnitedHealth Group, Inc.	Occupation		
	Receipt For:	Aggregate	e Year-to-Date ▼	7
	Primary General		1140.00	P/R Deduction (\$190.00 Bi-
	Other (specify)	0 0	1140.00	Weekly)
3.	Full Name (Last, First, Middle Initial) LESLIE J CARTER			Date of Receipt
	Mailing Address 9900 Bren Road East	M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR2119470315207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		576.00
	Name of Employer UnitedHealth Group, Inc.	Occupation Informati	n on Systems	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		576.00	P/R Deduction (\$96.00 Bi- Weekly)
 C.	Full Name (Last, First, Middle Initial) HAROLD COATS			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2119471015207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer UnitedHealth Group, Inc.	Occupation Director	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	1 1	300.00	P/R Deduction (\$50.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			2016.00
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T	OTAL This Period (last page this line number or	nly)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 105 (check only one) X 11a 11b 11c 12
An	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any person	n for the purpose of soliciting contributions
$\frac{0}{}$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC (I			Solicit contributions from such committee.
4 .	Full Name (Last, First, Middle Initial) ANDREA E DILWEG Mailing Address 9900 Bren Road East			Date of Receipt
	City Minnetonka	State MN	Zip Code 55343-9664	Transaction ID: PR2119472915207 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33343-3004	222.00
	Name of Employer UnitedHealth Group, Inc. Receipt For: Primary General Other (specify) ▼	Occupation Public Af Aggregate		P/R Deduction (\$37.00 Bi-Weekly)
3.	Full Name (Last, First, Middle Initial) KATHERINE F FEENY Mailing Address 9900 Bren Road East			Date of Receipt
	City	State	Zip Code	Transaction ID: PR2119473815207
	Minnetonka FEC ID number of contributing federal political committee.	C	55343-9664	Amount of Each Receipt this Period 1152.00
	Name of Employer UnitedHealth Group, Inc.	Occupation Marketing		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1152.00	P/R Deduction (\$192.00 Bi- Weekly)
 C.	Full Name (Last, First, Middle Initial) James Frey			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2119474415207
	Minnetonka FEC ID number of contributing federal political committee.	C	55343-9664	Amount of Each Receipt this Period 960.00
	Name of Employer UnitedHealth Group, Inc.	Occupation Executive		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 960.00	P/R Deduction (\$192.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			2334.00
т.	OTAL This Period (last page this line number on	lv)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 69 / 105
	EMIZED RECEIPTS		or each category of the	(check only one)
••	LIVIIZED NEOLII 13		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar	ny information copied from such Reports and Staten	nents mav	not be sold or used by any person	
or	for commercial purposes, other than using the name	ne and add	lress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
$ \rangle$	UnitedHealth Group Incorporated PAC (Ur	nited for I	Health)	
\angle	E HALL OF A SECULAR LOSS IN			1
Α.	Full Name (Last, First, Middle Initial) JOHN F FRITZ			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2119474615207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing	С		360.00
	federal political committee.	•		
	Name of Employer UnitedHealth Group, Inc.	Occupation	1	7
		Actuary		
		Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	1	360.00	P/R Deduction (\$60.00 Bi- Weekly)
	Other (specify)	0 0		weekly)
_	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	Ctoto	Zip Code	PD0110470015007
	Minnetonka	State MN	55343-9664	Transaction ID: PR2119476215207
		IVIIN	55545-9004	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		360.00
	UnitedHealth Group Inc	Occupation Public Aff		
	· · · · · · · · · · · · · · · · · · ·		Year-to-Date ▼	-
	Primary General	riggiogalo		P/R Deduction (\$60.00 Bi-
	Other (specify) ▼		360.00	Weekly)
_	Full Name (Last, First, Middle Initial)			Data of Bassist
C.	DAVID M HANSEN Mailing Address			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2119476715207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing	<u></u>		810.00
	federal political committee.	C		010.00
	Name of Employer CunitedHealth Group, Inc.	Occupation	1	†
	UnitedHealth Group, Inc.	Executive		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	1	810.00	P/R Deduction (\$135.00 Bi-
	Other (specify)	0 0	010.00	Weekly)
٩	UBTOTAL of Receipts This Page (optional)			1530.00
\vdash	ODITAL OF HOOOIPES THIS Fage (Optional)			
т	OTAL This Period (last page this line number only)		>	

2	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 70 / 105
			Use separate schedule(s) or each category of the	(check only one)
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	UnitedHealth Group Incorporated PAC (United for	Health)	
۹.	Full Name (Last, First, Middle Initial) BRIDGET C HARPER			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2119477015207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		576.00
	Name of Employer UnitedHealth Group, Inc.	Occupation Marketing		
	Receipt For:	·	e Year-to-Date ▼	_
	Primary General			P/R Deduction (\$96.00 Bi-
	Other (specify) ▼		576.00	Weekly)
3.	Full Name (Last, First, Middle Initial) SAMUEL W HO			Date of Receipt
	Mailing Address 9900 Bren Road East	M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR2119477915207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		600.00
	Name of Employer	Occupation Doctor	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	7
	Primary General Other (specify) ▼		600.00	P/R Deduction (\$100.00 Bi- Weekly)
 C.	Full Name (Last, First, Middle Initial) JOHN D JONES			Date of Receipt
	Mailing Address 9900 Bren Road East			M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	Transaction ID: PR2119479215207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		576.00
	Name of Employer UnitedHealth Group, Inc.	Occupation Public Af		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	DID D. L. V. (then so D.
	Other (specify) ▼	0 0	576.00	P/R Deduction (\$96.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			1752.00
			<u> </u>	
Т	OTAL This Period (last page this line number or	nly)	>	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 71 / 105			
ıт	EMIZED RECEIPTS		or each category of the	(check only one)			
••	LIMIZED NEOEM 13		Detailed Summary Page	X 11a 11b 11c 12 15 16 17			
Δr	ny information copied from such Reports and Sta	tomente may	unot he sold or used by any nerso				
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.			
\setminus	NAME OF COMMITTEE (In Full)						
$ \rangle$	UnitedHealth Group Incorporated PAC	(United for	Health)				
\angle							
Α.	Full Name (Last, First, Middle Initial) SCOTT KEIM			Date of Receipt			
۸.	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y			
	3000 Bieli Rodd Eddi						
	City	State	Zip Code	Transaction ID: PR2119479815207			
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period			
	FEC ID number of contributing	С		234.00			
	federal political committee.						
	Name of Employer UnitedHealth Group, Inc.	Occupation	n	7			
	UnitedHealth Group, Inc.	Informati	on Systems				
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Primary General	' '	234.00	P/R Deduction (\$39.00 Bi- Weekly)			
	Other (specify)		1 1 1 1 1 1 1	Weekly)			
	Full Name (Last, First, Middle Initial)			+			
В.	HEATHER M MACE-MEADOR			Date of Receipt			
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y			
	Cit.	01-1-	7in Ondo	PROMOTOR STATE			
	City	State	Zip Code	Transaction ID: PR2119482515207			
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		240.00			
	Name of Employer UnitedHealth Group, Inc.	Occupation	n				
	Receipt For:	Legal	e Year-to-Date ▼	_			
	Primary General	Ayyreyale	r rear-to-date V	B/B Doduction (\$40.00 Bi			
	Other (specify) ▼		240.00	P/R Deduction (\$40.00 Bi- Weekly)			
_	<u> </u>			<u> </u>			
_	Full Name (Last, First, Middle Initial)						
Ċ.	MICHAEL S MALLORY			Date of Receipt			
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR2119482615207			
	<u>Minnetonka</u>	MN	55343-9664	Amount of Each Receipt this Period			
	FEC ID number of contributing			576.00			
	federal political committee.	C		376.00			
	Name of Employer	Occupation	 n	\dashv			
	Name of Employer UnitedHealth Group, Inc.	Sales					
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Primary General		576.00	P/R Deduction (\$96.00 Bi-			
	Other (specify)		370.00	Weekly)			
6	UBTOTAL of Receipts This Page (optional)			1050.00			
\vdash	ODITION OF THEORIPES THIS Page (optional)						
Т	TOTAL This Period (last page this line number only)						

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 72 / 105
			Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	UnitedHealth Group Incorporated PAC (United for	Health)	
۹.	Full Name (Last, First, Middle Initial) PETER W MCKINLEY			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2119483715207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		450.00
	Name of Employer UnitedHealth Group, Inc.	Occupation Informati	n on Systems	
	Receipt For:		Year-to-Date ▼	7
	Primary General Other (specify) ▼		450.00	P/R Deduction (\$75.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) CHARLEEN M MILBURN			Date of Receipt
٥.	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2119483915207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		390.00
	Name of Employer UnitedHealth Group, Inc.	Occupation Public Af		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		390.00	P/R Deduction (\$65.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) GILBERT J MILLER			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2119484015207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		576.00
	Name of Employer UnitedHealth Group, Inc.	Occupation Sales	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 576.00	P/R Deduction (\$96.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			1416.00
			·	
T	OTAL This Period (last page this line number or	nly)	>	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 73 / 105								
	EMIZED RECEIPTS		or each category of the	(check only one)								
••			Detailed Summary Page	X 11a 11b 11c 12 15 16 17								
Δr	y information copied from such Reports and St	atements may	not he sold or used by any nerso									
or	for commercial purposes, other than using the	name and add	lress of any political committee to	solicit contributions from such committee.								
\setminus	NAME OF COMMITTEE (In Full)											
	UnitedHealth Group Incorporated PAC	(United for	Health)	_								
A.	Full Name (Last, First, Middle Initial) NANCY J MONK			Date of Receipt								
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y								
	City	State	Zip Code	Transaction ID: PR2119484315207								
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		300.00								
	Name of Employer UnitedHealth Group, Inc.	Occupation Public Aff										
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General	' '	300.00	P/R Deduction (\$50.00 Bi-								
	Other (specify)	0 0		Weekly)								
В.	Full Name (Last, First, Middle Initial) BRET A MORRIS			Date of Receipt								
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y								
	City	State	Zip Code	Transaction ID: PR2119484615207								
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		600.00								
	Name of Employer UnitedHealth Group, Inc.	Occupation Web Des										
	Receipt For:	Aggregate	Year-to-Date ▼]								
	Primary General Other (specify) ▼		600.00	P/R Deduction (\$100.00 Bi- Weekly)								
<u> </u>	Full Name (Last, First, Middle Initial) SCOTT A NEURURER			Date of Receipt								
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y								
	City	State	Zip Code	Transaction ID: PR2119484915207								
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		288.00								
	Name of Employer UnitedHealth Group, Inc.	Occupation Information	on systems									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼	0 0	288.00	P/R Deduction (\$48.00 Bi- Weekly)								
s	UBTOTAL of Receipts This Page (optional)			1188.00								
H	OTAL This Period (last page this line number of		·									

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 74 / 105
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports and Sta or for commercial purposes, other than using the r	atements may	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC			
Full Name (Last, First, Middle Initial) A. AUSTIN T PITTMAN			Date of Receipt
Mailing Address 9900 Bren Road East			M " M / D " D / Y " Y " Y " Y
City	State	Zip Code	Transaction ID: PR2119486715207
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		810.00
Name of Employer Executive	Occupation	n	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	810.00	P/R Deduction (\$135.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) 3. CYNTHIA L POLICH			Date of Receipt
Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
City	State	Zip Code	Transaction ID: PR2119486815207
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		288.00
Name of Employer UnitedHealth Group, Inc.	Occupation Marketing		
Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼		288.00	P/R Deduction (\$48.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) GREGG R RATKOVIC			Date of Receipt
Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
City	State	Zip Code	Transaction ID: PR2119487515207
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer UnitedHealth Group, Inc.	Occupation Marketing		
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 300.00	P/R Deduction (\$50.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)			1398.00
TOTAL This Period (last page this line number o	nly)	>	

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 75/105
TEMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
		Detailed Summary Page	13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma le name and ad	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
UnitedHealth Group Incorporated PA	C (United for	Health)	_
Full Name (Last, First, Middle Initial) A. CHRISTINA M SUMPTER			Date of Receipt
Mailing Address 9900 Bren Road East	t		M M / D D / Y Y Y Y
City	State	Zip Code	Transaction ID: PR2119490915207
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		576.00
Name of Employer UnitedHealth Group, Inc.	Occupation Information	n ton Systems	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		576.00	P/R Deduction (\$96.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) 3. CHERYL TANIGAWA, MD			Date of Receipt
Mailing Address 9900 Bren Road East	t		M M / D D / Y Y Y Y
City	State	Zip Code	Transaction ID: PR2119491115207
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer UnitedHealth Group, Inc.	Occupation Doctor	n	
Receipt For:		e Year-to-Date ▼	-
Primary General	35 5	300.00	P/R Deduction (\$50.00 Bi-
Other (specify)	0 0	300.00	Weekly)
Full Name (Last, First, Middle Initial) C. GLENN TERWILLIGER			Date of Receipt
Mailing Address 9900 Bren Road East	t		M " M / D " D / Y " Y " Y " Y
City	State	Zip Code	Transaction ID: PR2119491315207
Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		810.00
Name of Employer UnitedHealth Group, Inc.	Occupation Insurance		
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	810.00	P/R Deduction (\$135.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)		·····	1686.00
TOTAL This Period (last page this line number	ur only)		
IVIAL THIS FEHOU (IdSt page this line humbe	ı ∪ı ııy <i>)</i>		

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 76 / 105
			Use separate schedule(s) or each category of the	(check only one)
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)		71	
\rangle	UnitedHealth Group Incorporated PAC (United for	Health)	
۹.	Full Name (Last, First, Middle Initial) PATTITUCKER			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2119491915207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		576.00
	Name of Employer UnitedHealth Group, Inc.	Occupation Marketing		
	Receipt For:	·	e Year-to-Date ▼	_
	Primary General			P/R Deduction (\$96.00 Bi-
	Other (specify) ▼		576.00	Weekly)
3.	Full Name (Last, First, Middle Initial) STEVEN M TUCKER			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2119492015207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		576.00
	Name of Employer UnitedHealth Group, Inc.	Occupation Public Re		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		576.00	P/R Deduction (\$96.00 Bi- Weekly)
).	Full Name (Last, First, Middle Initial) SUSAN VANASTEN			Date of Receipt
	Mailing Address 9900 Bren Road East			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2119492615207
	Minnetonka	MN	55343-9664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		210.00
	Name of Employer UnitedHealth Group, Inc.	Occupation Medical	n	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		210.00	P/R Deduction (\$35.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			1362.00
			•	
T	OTAL This Period (last page this line number or	າly)	>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 77 / 105 Use separate schedule(s) (check only one) or each category of the 11a 11b 11c Detailed Summary Page 13 14 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC (United for Health) Full Name (Last, First, Middle Initial) THOMAS G ZIELINSKI Date of Receipt Mailing Address 9900 Bren Road East City State Zip Code Transaction ID: PR2119494615207 Minnetonka MN 55343-9664 Amount of Each Receipt this Period FEC ID number of contributing C 270.00 federal political committee. Name of Employer UnitedHealth Group, Inc. Occupation Executive Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$45.00 Bi-Weekly) 270.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	270.00
TOTAL This Period (last page this line number only)	•	89936.63

SCHEDOLL B (I LOT OHII 3A)	Use seperate schedule(s)	(check onli	NUMBER:	PAGE 78	105				
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 28a 28b	24 25 28c 29					
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name									
NAME OF COMMITTEE (In Full)	e and address of any political co	illillittee to so	iicit continbutions	TOTT SUCT COMMITTEE					
UnitedHealth Group Incorporated PAC (U	nited for Health)								
Full Name (Last, First, Middle Initial)			Transaction II	D: 24240378					
Friends Of Mark Foley			Date of Disbur						
Mailing Address 3507 Village Blvd #5-30	4		07	05 200	66				
City	State Zip Code		Amount of Eac	h Disbursement thi	s Period				
West Palm Beach Purpose of Disbursement	FL 33409			100	0.00				
Re-election to US House of Reps		011			0.00				
Candidate Name Mark Foley		Category/ Type							
X	ement For: 2006 Primary General Other (specify)		Re-election to of Reps	o US House					
Full Name (Last, First, Middle Initial)			Transaction II	3. 24202770					
3. Friends Of John Boehner			Date of Disbur	sement	Y				
Mailing Address 7908-I Cincinnati Daytor	n Road		0 7	12 / Y 200	6				
City West Chester	State Zip Code OH 45069		Amount of Eac	h Disbursement thi	• •				
Purpose of Disbursement Re-election to US House of Reps		011		200	0.00				
Candidate Name John A. Boehner		Category/ Type							
Office Sought: X House Senate President State: OH District: 8	ement For: 2006 Primary X General Other (specify)		Re-election to US House of Reps						
Full Name (Last, First, Middle Initial)			Transaction II	n. 04200262					
People with Hart			Date of Disbur						
Mailing Address P.O. Box 435			07	12 / 200	ó 6 °				
City Wexford	State Zip Code PA 15090		Amount of Eac	h Disbursement thi	s Period				
Purpose of Disbursement Re-election to US House of Reps		011		100	0.00				
Candidate Name Melissa Hart		Category/ Type							
Senate President X	ement For: 2005 Primary General Other (specify)		Re-election to of Reps	o US House					
SUBTOTAL of Disbursements This Page (optional)				4000	0.00				
TOTAL This Period (last page this line number only	١								

SCHEDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)	NE NUMBER: Inly one)		PAGE	79 / 10	J5		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b	<u> </u>	23 28b	24 28c	25 29	26 30b	
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam								
NAME OF COMMITTEE (In Full)	and address of any political co	Jillinuee 10	SOHOR COHRID	uu0118 110(11	SUCIT CUIT	HILLEE		
UnitedHealth Group Incorporated PAC (Ur	ited for Health)							
Full Name (Last, First, Middle Initial)			Transac	tion ID: 24	1302862			
Jon Kyl For U S Senate				Disbursem		, ° V	V	
Mailing Address Post Office Box 10246			0 7 M	12		0 0 6		
City	State Zip Code		Amount	of Each Di	sbursemer	nt this Po	eriod	
Phoenix	AZ 85064			• • •		1000.0	0	
Purpose of Disbursement Re-election to US Senate		011	-			1000.0		
Candidate Name Sen. Jon Kyl		Category/ Type						
Office Sought: House X Senate President	ement For: 2006 Primary X General Other (specify)		Re-elec	tion to US	Senate			
State: AZ District: 2								
Full Name (Last, First, Middle Initial)				tion ID: 24				
Friends Of Roy Blunt				Disbursem		, , , , ,		
Mailing Address Po Box 278			07	17	7 2	0 0 6	Y	
City Strafford	State Zip Code MO 65757		Amount	of Each Di			-	
Purpose of Disbursement	Г					1000.0	0	
Re-election to US House of Reps Candidate Name Roy Blunt	L	011 Category/ Type						
Office Sought: X House Disburse	ement For: 2006 Primary General Other (specify)	Re-election to US House of Reps						
Full Name (Last, First, Middle Initial)			-	ID. 0	1000110			
Dave Wu For Congress			Date of	ction ID: 24 Disburseme	ent			
Mailing Address 818 Sw 3rd St #1182			0 7 M	17	7 2	0 0 6	Y	
City Portland	State Zip Code OR 97205		Amount	of Each Di	sbursemer	nt this Po	eriod	
Purpose of Disbursement Re-election to US House of Reps	I	011	T L.			2000.0	0	
Candidate Name Rep. David Wu		Category/ Type						
Office Sought: X House Senate President State: OR Disburse	ement For: 2006 Primary X General Other (specify)	•	Re-election of Reps	tion to US	S House			
SUBTOTAL of Disbursements This Page (optional)					4	0.00	0	
TOTAL This Period (last page this line number only)								

SCHEDULE B (FEC Form 3X)								E NUME	BER:	PA	PAGE 80 / 105			
		BURSEMEN		for each of Detailed S	category of the Summary Page		(check on 21b 27	22 288		23 28b	24 28c		25 29	26 30b
		d from such Reports boses, other than usi												S
\ \	IAME OF COMM													
	full Name (Last, F Searchlight Lea	irst, Middle Initial) dership Fund								ion ID:	: 243230 ement	58		
N	Mailing Address	422 C St. NE Lower Level						0	7 ^M	/ D 1	7 /	Ž	οŏε	S Y
	City Vashington			tate C	Zip Code 20002			Am	ount o	of Each	Disburse	emen	t this F	Period
P	Purpose of Disbur	sement or Sen Harry Reid				Г	011					2	500.0	00
_	Candidate Name	· · · · · · · · · · · · · · · · · · ·					ategory/ Type							
	Office Sought:	House Senate President District:		nent For: Primary Other (spe	General cify) ▼		- 7,6-2	Lea rry I	dersl Reid	nip PA	C for Se	en H	a-	
F	ull Name (Last, F	First, Middle Initial) th Insurance Plan	s PAC (AHI	IP PAC)						Disburs				Y
N	Mailing Address	601 Penn. Aver #500 Soulth Blo						$\begin{array}{c ccccccccccccccccccccccccccccccccccc$						
	City Vashington			tate C	Zip Code 20004			Am	ount o	of Each	Disburse			
A	Purpose of Disbur MIP Trade Assoc Candidate Name					C	011 ategory/ Type		•	•		. 2	.000	00
	Office Sought:	House Senate President District:		nent For: Primary Other (spe	General cify) ▼			AHI	P Tra	ade As	ssociatio	n P	AC	
_	•	irst, Middle Initial) a Democratic Maj	ority							ion ID:	: 243231 ement	13		
N	Nailing Address	301 4th St. NE Suite 202						O	7 ^M	/ D 1	7 /	ž	οŏε	S Y
	City Vashington			tate IC	Zip Code 20002			Am	ount o	of Each	Disburse	emen	t this F	Period
	Purpose of Disbur Committee Contrib	sement oution - Leadership P	'AC			Г	011		-			1	000.0	00
C	Candidate Name						ategory/ Type							
	Office Sought:	House Senate President District:		nent For: Primary Other (spe	General cify) ▼			Lea	nmitt dersl enne	A9 gir	ntributio .C - Sen	n - Edv	va-	
SUE	BTOTAL of Disbu	ursements This Page	e (optional)				▶					5	500.0	00
TO	TAL This Period	(last page this line n	ımber only)						•		•			

		Use seperate schedule(s)			-OR LI check			H:			PAG	E 81/	105
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	•	È	21b	Ĺ	22 28a	X	23 28b	$\mathbf{\square}$	24 28c	25 29	26 30b
	y Information copied from such Reports and State												
Or	for commercial purposes, other than using the nan NAME OF COMMITTEE (In Full)	le and address of any pointe	ai com	1111	iillee lo	SOIIC	it Contr	ibut	IONS II	OIII S	uch co	mmuee	
$ \rangle$	UnitedHealth Group Incorporated PAC (U	nited for Health)											
\bigvee	officed realth Group morporated 1 AO (O	Tilled for Fleatin)											
	Full Name (Last, First, Middle Initial)						Trans	acti	on ID	: 243	323122	2	
Α.	Battle Born Political Action Committee							_	isburs		nt		
	Mailing Address PO Box 40366 Suite 300						0 [™] 7	М	/ D 1	7	/ L	200	6 [*]
	City	State Zip Code					Amou	int o	f Each	Disk	oursem	ent this	Period
	Washington Purpose of Disbursement	DC 20016	1_									1500	.00
	Leadership PAC - Sen John Ensign			011						-	_		
	Candidate Name				egory/ ype	1							
	Office Sought: Senate President State: Disburs Senate	sement For: Primary Genera Other (specify) ▼	I				Leade Ensig		ip PA	AC -	Sen J	ohn	
	Full Name (Last, First, Middle Initial)						Trans	acti	on ID	. 243	3964	1	
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Solis For Congress			Date of Disburs		V		
Mailing Address 6380 Wilshire Blvd. #16	12		0 8 M	03 7 2006			
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Full Name (Last, First, Middle Initial) Nelson For U S Senate			Transaction II Date of Disburs				
Mailing Address PO Box 540154			0 8 M	10 Y 2006	Y		
City Omaha	State Zip Code NE 68154		Amount of Eac	h Disbursement this P	eriod		
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	Office Sought: House X Senate President State: AR District: 1	sbursement For: X Primary Other (spe	2010 General		Re-election	to US Sena	ate		
). D.	Full Name (Last, First, Middle Initial) Sue Myrick For Congress				Transaction Date of Disbu		93		
	Mailing Address 1850 E. Third Stree	t,			0 9 M		žoŏ	6 ^Y	
	Suite 350 City Charlotte	State NC	Zip Code 28204		Amount of Ea	ach Disburse	ment this	Period	
	Purpose of Disbursement Re-election to US House of Reps	NO .	20204	011			1000	00	
	Candidate Name Sue Myrick			Category/ Type					
	Office Sought: X House Senate President State: NC District: 9	sbursement For: Primary Other (spe	2006 X General ccify) ▼		Re-election of Reps	se			
•	SUBTOTAL of Disbursements This Page (opti	ional)					3000.	00	
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	SHEDOLL B (I LCI OIIII 3X)	Use seperate schedule				LINE N k only (NUMBE	:H:			PAG	E 8//	105
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	y Information copied from such Reports and Statem												
or	for commercial purposes, other than using the name	e and address of any politic	cai con	nn	iittee	to solic	cit conti	ributi	ons ire	om s	ucn con	nmittee	
$ \rangle$	UnitedHealth Group Incorporated PAC (Ur	nited for Health)											
L	omical leadin Greap meer perated 1710 (er	med for Floating											
Α.	Full Name (Last, First, Middle Initial)									_	96196	6	
Α.	Ramstad Volunteer Committee							of Di	isburse	emen	-	V V	V
	Mailing Address 8100 Penn Avenue South Suite #104	h					0 9	IVI	1	1	´ L.	ž 0 ŏ	6
		State Zip Code MN 55431					Amou	int o	f Each	Disb	ourseme	ent this	Period
	Bloomington Purpose of Disbursement	IVIN 3343 I										1000	.00
	Re-election to US House of Reps			C	11			-					
	Candidate Name Jim Ramstad		C		egory ype	7							
	Senate President X	ement For: 2005 Primary General Other (specify)	al				Re-el of Re		on to	US	House		
		ieneral Electio											
В.	Full Name (Last, First, Middle Initial) Brown-Waite For Congress						Date	of D	isburs	emen	597687 nt	,	
	Mailing Address 704 Ponce De Leon Blvd	I					0 9	М	[/] 1	1 1	/ Y	ž 0 ŏ	6 ^Y
	City Brooksville	State Zip Code FL 34601					Amou	int o	f Each	Disb	ourseme		
	Purpose of Disbursement Re-election to US House of Reps			_)11							1000	.00
	Candidate Name Rep. Virginia Brown-Waite		C	at	egory ype	/							
	Office Sought: X House Senate President State: FL District: 5	ement For: 2006 Primary X General Other (specify)	al				Re-el of Re	ections	on to	US	House		
	Full Name (Last, First, Middle Initial)						Trans	anti	on ID:	215	597686		
C.	Hoyer For Congress								isburs			,	
	Mailing Address 7905 Malcolm Road Suit	e 102					0 ^M 9	М	[/] 1	1 1	/ Y	ž 0 ŏ	6 ^Y
	City Clinton	State Zip Code MD 20735					Amou	int o	f Each	Dist	ourseme		
	Purpose of Disbursement Re-election to US House of Reps			C)11		L.					2000	.00
	Candidate Name Rep. Steny Hoyer				egory. ype	7							
		ement For: 2006 Primary X Genera Other (specify)	-!	_	урс		Re-el of Re		on to	US	House		
	State: MD District: 5	- ·											
s	UBTOTAL of Disbursements This Page (optional)					<u> </u>						4000.	00
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SCHEDULE B (FEC Form 3X)	Use seperate schedule(NUMBER:	PAGE 88 / 105					
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(Clieck of it	y one) 22 X 23 28a 28b	24 25 26 28c 29 30b					
Any Information copied from such Reports and Stat or for commercial purposes, other than using the na									
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC (United for Health)								
Full Name (Last, First, Middle Initial) A. Andrews For Congress Committee			Transaction ID: 2 Date of Disburser	nent					
Mailing Address 215 Fourth Avenue Suite 200			09 1	1 Y 2006					
City Haddon Heights	State Zip Code NJ 08035		Amount of Each [Disbursement this Period					
Purpose of Disbursement Re-election to US House of Reps		011		1000.00					
Candidate Name Rep. Robert Andrews		Category/ Type							
Office Sought: X House Senate President State: NJ District: 1	sement For: 2006 Primary X Genera Other (specify)	l	Re-election to U of Reps	JS House					
Full Name (Last, First, Middle Initial) Talent For Senate Committee		Transaction ID: 24595382 Date of Disbursement 0 9 1 1 1 2 0 0 6							
Mailing Address 147 N Meramec Suite	iling Address 147 N Meramec Suite 100								
City St Louis	State Zip Code MO 63105		Amount of Each [Disbursement this Period					
Purpose of Disbursement Re-election to US Senate		011		2000.00					
Candidate Name Sen. James Talent		Category/ Type							
Office Sought: House Disbu	sement For: 2006 Primary X Genera Other (specify)	***	Re-election to U	JS Senate					
Full Name (Last, First, Middle Initial) Committee To Re-Elect Bobby Jindal Inc	:		Transaction ID: 2 Date of Disburser						
Mailing Address PO Box 8628			0 9 M / D 1	2006					
City Metairie	State Zip Code LA 70011		Amount of Each D	Disbursement this Period					
Purpose of Disbursement Re-election to US House of Reps		011		1000.00					
Candidate Name Rep. Bobby Jindal		Category/ Type							
Office Sought: X House Senate President State: LA District: 1	sement For: 2006 X Primary Genera Other (specify) ▼	I	Re-election to U of Reps	IS House					
SUBTOTAL of Disbursements This Page (optional	I)	>		4000.00					
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IT	EMIZED DISBURSEMENTS	for each o	category of the Summary Page		(check on 21b 27	22 28a	X 23 28b	24 28c		25 29	26 30b
	y Information copied from such Reports and Statem for commercial purposes, other than using the name										3
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC (Un				THREE TO ST	SHOIL COILL	ibations in	om odom			
۹.	Full Name (Last, First, Middle Initial) Prosperity PAC					Date	of Disburs		_	· · · · · ·	V
	Mailing Address 429 North Saint Asaph					0 9	M / D	11	Ž	0 ŏ 6	
	City Alexandria	State VA	Zip Code 22314			Amou	int of Each	Disburse			-
	Purpose of Disbursement Leadership PAC for Rep. Paul Ryan Candidate Name				011 ategory/		•		. 1	0.00.0	00
	Office Sought: Senate President State: Disburse	General cify) ▼		Гуре	Leade Paul I	ership P <i>F</i> Ryan	AC for Re	ep.			
3.	Full Name (Last, First, Middle Initial) Wally Herger For Congress Committee					Date of	saction ID of Disburs	: 245952 ement		V	V
	Mailing Address P.O. Box 1500					0,8		ווֹ וֹ וֹ	2	0 ŏ 6	
	City Chico	State CA	Zip Code 95927			Amou	int of Each	n Disburse	ment	this P	eriod
	Purpose of Disbursement Re-election to US House of Reps Candidate Name Rep. Wally Herger			Ca	011 ategory/				. 1	0.00.0	00
		ement For: Primary Other (spe	2006 X General		Гуре	Re-elo of Re		US Hou	se		
Э.	Full Name (Last, First, Middle Initial) Hawkeye PAC, The					Date of	of Disburs				v
	Mailing Address PO Box 7255					0,8	M / D	11	ž	0 ŏ 6	Y
	City Des Moines	State IA	Zip Code 50309			Amou	int of Each	Disburse	ment	this P	eriod
	Purpose of Disbursement Leadership PAC Sen Chuck Grassley				011	<u> </u>			1	0.00	00
	Candidate Name				tegory/ Γype						
	Office Sought: Senate President State: Disburse	ement For: Primary Other (spe	General cify) ▼			Leade Grass	ership P <i>A</i> sley	AC Sen C	Chuc	k	
s	UBTOTAL of Disbursements This Page (optional)				▶				30	0.00	0
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SCHEDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)	(check onli	NUMBER:	[P/	AGE 90/	105
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 28a	23 24 28b 28c	25 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name						S
 NAME OF COMMITTEE (In Full) 	and address of any political co	minitee to Sc	mon continuu	uona mom auch	COMMINICEE	
UnitedHealth Group Incorporated PAC (Un	ited for Health)					
Full Name (Last, First, Middle Initial)			Transact	ion ID: 246139	938	
Pryce for Congress				Disbursement		V
Mailing Address 340 East Gay Street			0 9	12	žoóe	5
	State Zip Code		Amount o	of Each Disburse	ement this F	Period
Columbus Purpose of Disbursement	OH 43215				1000.0	00
Re-election to US House of Reps		011				
Candidate Name Deborah Pryce		Category/ Type				
Office Sought: X House Senate President State: OH District: 15	ment For: 2006 Primary X General Other (specify) ▼		Re-elect of Reps	ion to US Hou	ise	
Full Name (Last, First, Middle Initial)						
3. Citizens For Rush			Date of D	ion ID: 246138 Disbursement		V
Mailing Address 3 First Natl. Plaza, 70 W.	Madison		09	12	žoóe	S [*]
,	State Zip Code IL 60616		Amount o	of Each Disburse		
Purpose of Disbursement		044			2000.0	00
US House of Reps Candidate Name Bobby L. Rush		011 Category/ Type				
Office Sought: X House Senate President State: IL District: 1	ment For: 2006 Primary X General Other (specify)	.,	US Hous	se of Reps		
Full Name (Last, First, Middle Initial) Heather Wilson for Congress				ion ID: 246139	943	
			ММ	/ D D / 12	Y Y Y	Υ
Mailing Address P.O. Box 14070			0 9		ŽOĎE	
,	State Zip Code NM 87102		Amount o	of Each Disburse	ement this F	Period
Purpose of Disbursement Candidate contribution - US House of Rep		011	L		1000.0	00
Candidate Name Heather A. Wilson		Category/ Type				
Office Sought: X House Senate President State: NM District: 1	ment For: 2006 Primary X General Other (specify)		Candida US Hous	te contributior se of Reps	1 -	
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01 1	or commercial purposes, other than using the nam	e and address of any politica	ii COIIII	millee lo	SOIICIL	COHIHO	ulions m	on such	COITII	muee		
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC (Ur	nited for Health)										
	Full Name (Last, First, Middle Initial)				1	ransa	ction ID:	246139	928			
١.	Snowe For Senate				I		Disburse				14	
	Mailing Address PO Box 2006					0 9	/ D1	^D 2	Ž	0 Ď 6	; [*]	
	City Doubland	State Zip Code			,	Amount	of Each	Disburse	emen	t this F	Period	Ī
	Portland	ME 04104			-				2	2000.0	00	٦
	Purpose of Disbursement Re-election to US Senate			011		-					-	-
	Candidate Name		Ca	tegory/								
	Sen. Olympia Snowe		T	уре								
	Office Sought: House X Senate President State: ME Disburse	ement For: 2006 Primary X General Other (specify)			F	Re-elec	ction to	US Sen	ate			
	Full Name (Last, First, Middle Initial)				-	-	-4: ID-	040100	000			_
3.	Feinstein For Senate					Date of	Disburse		369			
	Mailing Address 601 S Glenoaks Blvd #2	11				0 9	/ D 1	^D 2	Ý Ž	o ŏ e	Y	
	City	State Zip Code				Amount	of Each	Disburse	emen	t this F	Period	_
	Burbank	CA 91502										\neg
	Purpose of Disbursement			011						0.000	00	_
	Candidate Name Sen. Dianne Feinstein		Ca	tegory/ ype								
	Office Sought: House Disburse X Senate President State: CA District: 1	ement For: 2006 Primary X General Other (specify)	•									
	Full Name (Last, First, Middle Initial)				٠,	Transa	otion ID:	2/6120	110			
).	Pete Stark Re-Election Committee						Disburse	: 246139 ement	710			
	Mailing Address P.O. Box 8331					0 ^M 9 M	/ D	2 /	^Y 2	0 Ď 6	Y	
	City Fremont	State Zip Code CA 94537			,	Amount	of Each	Disburse	emen	t this F	Period	_
	Purpose of Disbursement Re-election to US House of Reps			011						000.0	00	╛
	Candidate Name Rep. Fortney Stark		Ca	tegory/ ype								
	Office Sought: X House Senate President State: CA District: 13	ement For: 2006 Primary X General Other (specify)	•			Re-elect f Reps		US Hou	se			
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	y Information copied from such Reports and State											
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$ \rangle$	UnitedHealth Group Incorporated PAC (U	nited for Health)										
_	Full Name (Last, First, Middle Initial)					Trans	sacti	ion ID:	: 246	614009)	
Α.	Santorum Victory Committee							isburs		nt	.,	
	Mailing Address 1203 Portner Road					0 9	М	/ D 1	2	/ L	žoŏ	6 [*]
	City Arlington	State Zip Code VA 22202				Amou	ınt o	f Each	n Disk	ourseme	ent this	Period
	Purpose of Disbursement										2500	.00
	Candidate contribution - US Senate			Ó	11							
	Candidate Name				egory/ vpe							
	Senate President	ement For: Primary General Other (specify)				Cand US S			ntribu	ution -		
_	State: District:											
В.	Full Name (Last, First, Middle Initial) Jim Gerlach For Congress Committee					Date	of D	isburs	emer	14026 nt		
	Mailing Address PO Box 87					0 9	М	/ D 1	2	/ L	žoŏ	6 ^Y
	City Uwchland	State Zip Code PA 19480				Amou	ınt o	f Each	n Disk	ourseme		
	Purpose of Disbursement Candidate contribution - US House of Rep			٨	11	L.		-			1000	.00
	Candidate Name Rep. James Gerlach		Ca	ate	egory/ rpe							
	Senate President	ement For: 2006 Primary X General Other (specify)	!		<u> </u>	Cand US H	idat ous	e con e of F	ntribu Reps	ution -		
	State: PA District: 6											
C.	Full Name (Last, First, Middle Initial) Friends of Clay Shaw							isburs	emer	521042 nt	2	
	Mailing Address P.O. Box 2188					0 9	М	/ D 1	1 3 ^D	/ Y	žoŏ	6 ^Y
	City Ft. Lauderdale	State Zip Code FL 33303				Amou	ınt o	f Each	Disk	ourseme	ent this	Period
	Purpose of Disbursement Re-election to US House of Reps			Ó	11	L.					1000	.00
	Candidate Name E. Clay Shaw, Jr.				egory/ /pe							
	Senate President	ement For: 2006 Primary X General Other (specify)	I			Re-el of Re		on to	US	House		
	State: FL District: 22											
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SCHEDULE B (FEC Form 3X)	Use seperate schedule		NE NUMBER:	PAGE 93 / 105			
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Any Information copied from such Reports and State or for commercial purposes, other than using the na							
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC (U	··-						
Full Name (Last, First, Middle Initial) A. Rogers For Congress			Transaction I Date of Disbu				
Mailing Address Post Office Box 581			09 /	2006			
City Brighton	State Zip Code MI 48116		Amount of Eac	ch Disbursement this Period			
Purpose of Disbursement Re-election to US House of Reps		011		2000.00			
Candidate Name Rep. Michael Rogers	Category/ Type						
Office Sought: X House Disbur Senate President State: MI District: 8	sement For: 2006 Primary X Gener Other (specify)	al	Re-election t of Reps	o US House			
Full Name (Last, First, Middle Initial) Menendez For Senate		Transaction ID: 24621097 Date of Disbursement					
Mailing Address P.O. Box 848			0 9 1	2006			
City Union City	State Zip Code NJ 07087		Amount of Eac	ch Disbursement this Period			
Purpose of Disbursement Election to US Senate Candidate Name		011		3000.00			
Rep. Robert Menendez		Category/ Type					
Office Sought: X House Disbur Senate President State: NJ District: 13	sement For: 2006 Primary X Gener Other (specify)	al	Election to U	S Senate			
Full Name (Last, First, Middle Initial) Gard For Congress			Transaction I				
Mailing Address PO Box 277			09 /	2006			
City Green Bay	State Zip Code WI 54305		Amount of Eac	ch Disbursement this Period			
Purpose of Disbursement Election to US House of Reps		011		1000.00			
Candidate Name Mr. John Gard		Category/ Type					
Office Sought: X House Disbur Senate President State: WI District: 8	sement For: 2006 Primary X Gener Other (specify)	al	Election to U Reps	S House of			
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ITEMIZED DISBURSEMENTS	for each category of the	1b 22 X 23 24 25 26
Any Information copied from such Reports and State		
or for commercial purposes, other than using the nar	ne and address of any political committee	to solicit contributions from such committee
NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC (L	nited for Health)	
Officed realth Group incorporated FAC (C	nited for Fleattil)	
Full Name (Last, First, Middle Initial) A. Boswell For Congress		Transaction ID: 24621045
A. Boswell For Congress		Date of Disbursement
Mailing Address PO Box 6220		0 9 M / D 1 3 / Y 2 0 0 6 Y
City	State Zip Code	Amount of Each Disbursement this Period
Des Moines Purpose of Disbursement	IA 50309	1000.00
Re-election to US House of Reps	011	
Candidate Name Rep. Leonard Boswell	Category Type	<u>, </u>
	ement For: 2006	Re-election to US House
Senate President	Primary X General Other (specify) ▼	of Reps
State: IA District: 3	Cirici (specify)	
Full Name (Last, First, Middle Initial)		Transaction ID: 24629444
B. J.D. Hayworth for Congress		Date of Disbursement
Mailing Address P.O. Box 14273		09
City Scottsdale	State Zip Code AZ 85267	Amount of Each Disbursement this Period
Purpose of Disbursement		1000.00
Re-election to US House of Reps	011	
Candidate Name J.D. Hayworth	Category Type	1
Office Sought: X House Disburs	ement For: 2006	Re-election to US House
Senate	Primary X General	of Reps
State: AZ District: 6	Other (specify) ▼	
Full Name (Last, First, Middle Initial)		Transaction ID: 24629460
C. Salazar For Senate		Date of Disbursement
Mailing Address PO Box 600		0 9 M / 1 8 / Y 2 0 0 6 Y
City Denver	State Zip Code CO 80201	Amount of Each Disbursement this Period
Purpose of Disbursement Re-election to US Senate	011	1000.00
Candidate Name Sen. Ken Salazar	Category Type	
	ement For: 2010 Primary General Other (specify)	Re-election to US Senate
State: CO District: 2		
SUBTOTAL of Disbursements This Page (optional		3000.00
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Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				
 NAME OF COMMITTEE (In Full) 	and address of any political co	minitee to so	non continuutions Hom Such	Committee
UnitedHealth Group Incorporated PAC (Un	ted for Health)			
Full Name (Last, First, Middle Initial)			Transaction ID: 246294	166
Chocola For Congress Inc			Date of Disbursement	W * V * V
Mailing Address PO Box 6728			09 / 18 /	Ž 0 0 6 Š
•	State Zip Code N 46660		Amount of Each Disburse	ement this Period
Purpose of Disbursement				1000.00
Re-election to US House of Reps		011		
Candidate Name Rep. Christopher Chocola		Category/ Type		
Office Sought: X House Disburse Senate President	nent For: 2006 Primary X General Other (specify)		Re-election to US Hou of Reps	se
State: IN District: 2	Other (specify)			
Full Name (Last, First, Middle Initial)			Transaction ID: 246294	 !91
Charles A Gonzalez Congressional Campa	gn		Date of Disbursement	
Mailing Address PO Box 12612			09 18 /	2006
•	State Zip Code FX 78212		Amount of Each Disburse	
Purpose of Disbursement Re-election to US House of Reps		011		1000.00
Candidate Name Rep. Charles Gonzalez		Category/		
Office Sought: X House Disburse	ment For: 2006	Туре		
Senate	Primary X General		Re-election to US Hou of Reps	se
State: TX District: 20	Other (specify) ▼			
Full Name (Last, First, Middle Initial) Friends Of Lois Capps			Transaction ID: 246295	523
- Therius Of Lois Capps			Date of Disbursement 0 9 1 8	YYYYY
Mailing Address PO Box 23940				Ž 0 Ŏ 6 Š
•	State Zip Code CA 93121		Amount of Each Disburse	ement this Period
Purpose of Disbursement Re-election to US House of Reps		011		1000.00
Candidate Name Rep. Lois Capps		Category/ Type		
Office Sought: X House Disburse Senate President	nent For: 2006 Primary X General Other (specify)	Miss	Re-election to US Hou of Reps	se
State: CA District: 23	· ·			
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	CHEDULE B (FEC Form 3X)	Use seperate schedule(s))		FOR LINE NUMBER: P (check only one)		PAGE	96/	105			
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	y Information copied from such Reports and State for commercial purposes, other than using the na											IS
	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PAC (U								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u></u>		
_	Full Name (Last, First, Middle Initial)					Trans	actio	n ID:	2462	9528		
Α.	Mike Thompson For Congress					Date o	of Disl м /			V .	V V	V
	Mailing Address 5429 Madison Avenue					0 9		1	8		ž 0 ŏ 6	3
	City	State Zip Code CA 95841				Amou	nt of E	Each	Disbu	ırseme	ent this F	Period
	Sacramento Purpose of Disbursement	CA 95641		_	_	- [1000.	00
	Re-election to US House of Reps		-	01								
	Candidate Name Rep. Michael Thompson			ate Ty	gory/ oe							
	Senate President	sement For: 2005 Primary General X Other (specify)	•			Re-ele of Rep		ı to l	US H	ouse		
	State: CA District: 1 2006 Full Name (Last, First, Middle Initial)	General Electio				_			0.400			
В.	Friends of Joe Liberman					Date o	of Dist	burse	ment	39789		_
	Mailing Address PO Box 4322 State House Square					0 9	1	9 /	Y	žοŏε	6 Y	
	City Hamden	State Zip Code CT 06514			Amount of E				Disbu	rseme	nt this I	Period
	Purpose of Disbursement Re-election to US Senate			01	1	L.			_		2000.	00
	Candidate Name Joseph I. Lieberman			ate Ty	gory/ oe	y/						
	χ Senate President	sement For: 2006 Primary X General Other (specify) ▼	!			Re-ele	ectior	ı to l	US S	enate	ı	
	State: CT District: 2 Full Name (Last, First, Middle Initial)											
C.	Earl Pomeroy for Congress					Date o	of Dist	burse	ment	39725		
	Mailing Address P.O. Box 75214					0 ^M 9	M /	^D 1	9 /	Y	ž 0 ŏ 6	3 ^Y
	City Washington	State Zip Code DC 20013-5214				Amou	nt of E	Each	Disbu	rseme	ent this f	Period
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Α.	Friends Of John Tanner								Date o	of D				γ ,	YYY	Y
	Mailing Address Post Office Bo	x 3301							0 9		L	1 9		2	ž o ŏ (6
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_	Full Name (Last, First, Middle Initial)								Trans	acti	on IE): 24	1639	770		
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	Mailing Address 2021 East Dub Suite 2000	lin Granville	e Road						0 ^M 9	М	/ D	1 9	/	Y	Ý 0 Ŏ 6	S ^Y
	City Columbus		tate OH	Zip Code 43229					Amou	nt o	f Eac	h Dis	sburs	emer	nt this	Period
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С.	Full Name (Last, First, Middle Initial) Rangel For Congress	1							Trans Date of					782		
	Mailing Address PO Box 5577 Manhattanville	Sta							0 ^M 9	М	/ D	1 9	/	YZ	ó ó é	3 Y
	City New York	S	tate IY	Zip Code 10027					Amou	nt o	f Eac	h Dis	sburs	emer	nt this	Period
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UnitedHealth Group Incorporated PAC (Ur	ited for Health)								
Full Name (Last, First, Middle Initial)				Trans	action ID	246397	744		
Anna Eshoo For Congress					of Disburs		v v	· V ·	v .
Mailing Address 555 Capitol Mall Suite 14	25			0 9		9 /	2 (0 Ď 6	
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Full Name (Last, First, Middle Initial)				Trans	action ID	: 246395	500		
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Mailing Address Post Office Box 12567				0 9	M / D 1	9 /	ž	0 Ď 6	Y
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Mailing Address Box 49756				0 ^M 9	M / D	9 /	ž	0 Ď 6	Y
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UnitedHealth Group Incorporated PAC (Un	ited for Health)						
Full Name (Last, First, Middle Initial)			Transac	tion ID:	246550	69	
Committee for Preservation of Capitalism				Disburse			
Mailing Address PO Box 22614			0 9	[/] ^D 2	1 / [ž 0 Ŏ	6 [*]
City Alexandria	State Zip Code VA 22304		Amount	of Each	Disburse	ment this	Period
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Leadership PAC for Sen Jim McCrery		011					
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Mailing Address P.O Box 573			0 9	2			
City Richmond	State Zip Code VA 23218		Amount	of Each	Disburse	ment this	Period
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Re-election to US Senate		011					
Candidate Name George Allen		Category/ Type					
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Mailing Address P.O. Box 261060			0 9	[/] ^D 2	1 / Y	200	6 ^Y
City Los Angeles	State Zip Code CA 90026		Amount	of Each	Disburse	ment this	Period
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Candidate Name Rep. Xavier Becerra		Category/ Type					
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Full Name (Last, First, Middle Initial)				ion ID: 2465	5072		
Chet Edwards For Congress				isbursement	YY	· v · \	7
Mailing Address PO Box 23273			0 9	21	2	0 0 6	
City Waco	State Zip Code TX 76702		Amount o	f Each Disbu	rsement	this Pe	eriod
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Candidate Name Rep. Chet Edwards		Category/ Type					
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Full Name (Last, First, Middle Initial)			Transacti	ion ID: 2465	5078		
3. Weldon Victory Committee				isbursement		Υ ,	7
Mailing Address P. O. Box 1992			0 9	21	2	0 0́ 6 `	
City Media	State Zip Code PA 19063		Amount o	f Each Disbu			-
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Candidate Name Rep. Curt Weldon		Category/ Type					
Office Sought: X House Disburse Senate President	ement For: 2006 Primary X General Other (specify)						
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Full Name (Last, First, Middle Initial) Pryce for Congress				ion ID: 2466 isbursement	4822		
Mailing Address 340 East Gay Street			0 9	^D 26	y y	0 0́ 6 Ì	
City Columbus	State Zip Code OH 43215		Amount o	f Each Disbu	rsement	this Pe	eriod
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Candidate Name Deborah Pryce		Category/ Type					
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UnitedHealth Group Incorporated PAC (Un	ted for Health)								
Full Name (Last, First, Middle Initial)				Transact	-		827		
Talent For Senate Committee				Date of D			v v	V .	V
Mailing Address 147 N Meramec Suite 10)			0 ^M 9 M	2	6 /	2	0 ŏ 6	
,	State Zip Code MO 63105			Amount o	of Each	Disburs	ement	t this P	eriod
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Candidate Name Sen. James Talent		Category/ Type							
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3. Gard For Congress				Transact Date of D	isburse	ement			
Mailing Address PO Box 277				0 9	[′] 2	6 /	Ý Ž	0 Ď 6	Y
•	State Zip Code WI 54305			Amount o	of Each	Disburs			
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Candidate Name Mr. John Gard		011 Category/ Type	1						
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Bachmann For Congress				Date of D			034		
Mailing Address Box 49756				0 9 M	[/] 2	^D /	^Y ^Y 2	0 Ď 6	Υ
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	NAME OF COMMITTEE (In Full) UnitedHealth Group Incorporated PA				
<u></u> А.	Full Name (Last, First, Middle Initial) Chafee For Senate			Transaction ID: 24	
	Mailing Address PO Box 7329			0 9 / Disburseme	
	City Warwick	State Zip Code RI 02887		Amount of Each Dis	sbursement this Period
	Purpose of Disbursement Re-election to US Senate		011		2500.00
	Candidate Name Sen. Lincoln Chafee		Category/ Type		
	Office Sought: House Di X Senate President State: RI District: 2	sbursement For: 2006 Primary X General Other (specify)		Re-election to US	S Senate
В.	Full Name (Last, First, Middle Initial) Chocola For Congress Inc			Transaction ID: 24	
	Mailing Address PO Box 6728			Date of Disbursement Date of Date of Disbursement Date of D	ent
	City South Bend	State Zip Code IN 46660		Amount of Each Dis	sbursement this Period
	Purpose of Disbursement Re-election to US House of Reps		011		1000.00
	Candidate Name Rep. Christopher Chocola		Category/ Type		
	Office Sought: X House Senate President State: IN District: 2	sbursement For: 2006 Primary X General Other (specify)		Re-election to US of Reps	S House
<u> </u>	Full Name (Last, First, Middle Initial) Porter For Congress			Transaction ID: 24	
	Mailing Address PO Box 26087			09 / 28	2006
	City Las Vegas	State Zip Code NV 89126		Amount of Each Dis	sbursement this Period
	Purpose of Disbursement Re-election to US House of Reps		011		1000.00
	Candidate Name Rep. Jon Porter		Category/ Type		
	Senate President	sbursement For: 2006 Primary X General Other (specify)		Re-election to US of Reps	3 House
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$ \rangle$	UnitedHealth Group Incorporated PAC (Un	ited for He	ealth)												
Α.	Full Name (Last, First, Middle Initial) Strickland for Governor									ID: 2 ırser		10375	5		
	Mailing Address 42 Park Dr					C) ^M 7	М	′	0 9	D /	Υ	ž 0 ŏ	6 ^Y	
		State OH	Zip Code 43215			Ar	nou	nt o	f Ea	ach E	Disbu	irsem	ent this		od .
	Purpose of Disbursement Ted Strickland, GOVERNOR OH			0.	11							•	1000	.00	
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В.	Full Name (Last, First, Middle Initial) Ohioans for Blackwell					Da	ate o	of D	isbu	ırser	nent	10372		* 1/	
	Mailing Address 172 E. State St. 6th Floor) ^M 7	М	L	0 9	5 /	L,	ž 0 ŏ	6 ^Y	
	,	State OH	Zip Code 43215			Ar	nou	nt o	of Ea	ach [Disbu	ırsem	ent this		od
	Purpose of Disbursement Ken Blackwell, GOVERNOR OH			0									1000	.00	
	Candidate Name Ken Blackwell			ate Ty	gory/ pe										
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C.	Friends of Todd Eachus					Da	ate d		isbu	ırser	nent	35892		V	
	Mailing Address RR4 Box 4289					C	8 (IVI	Ĺ	1	7 ′	Ľ.	ž 0 ŏ	6	
	Drums	State PA	Zip Code 18222			Ar	nou	nt o	f Ea	ach [Disbu	irsem	ent this		od .
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	Representative Todd Eachus	ment For:	2006	Ty	gory/ pe										
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Α.	Full Name (Last, First, Middle Initial)						Trans					89			
Λ.	Friends of Mario Civera							_	isburs		nt /		V .	V	
	Mailing Address PO Box 882						0 8	IVI	์	7	Ĺ	2	οŏε	3	
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	Candidate Name				egory/	-									
	Representative Mario Civera, Jr.			T	уре										
	, <u>, , , , , , , , , , , , , , , , , , </u>	sement For: 2006					Mario			STA	TE H	HOL	ISE		
	Senate President	Primary X General Other (specify) ▼					164th	PΑ	١						
	State: PA District: 16														
_	Full Name (Last, First, Middle Initial)						Trans	acti	on ID:	: 244	1862	36			
В.	Committee to Elect Mike Veon							_	isburs		nt				
	Mailing Address P.O. Box 327						0 ^M 8	М	/ D	7	/ Y	ž	οŏε	Y	
	City Beaver Falls	State Zip Code PA 15010					Amou	nt o	f Each	n Disk	ourse	men	t this F	Perio	d
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	Michael Veon, STATE HOUSE 14th PA			0	11										
	Candidate Name Representative Michael Veon				egory/										
	·	sement For: 2006		17	/pe										
	Senate Sought.	Primary X General					Micha 14th F	el \	∕eon,	STA	ATE	HOI	JSE		
	President	Other (specify) ▼													
	State: PA District: 14														
C.	Full Name (Last, First, Middle Initial) Friends of Ted Erickson						Trans					58			
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	Mailing Address 101 West Baltimore Av	e., 2nd Floor					0 8		1	7	L	2	οŏε		
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	Edwin Erickson, STATE SENATE PA			0	11				-		-		-		
	Candidate Name				egory/										
	PA Sen. Edwin Erickson			T	/pe										
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	President	Other (specify) ▼					AIL I	^							
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or	for commercial purposes, other than usin	ng the name and addre	ss of any political	committee to so	licit contributions from such committee
Λ	NAME OF COMMITTEE (In Full)				
17	UnitedHealth Group Incorporated	PAC (United for He	ealth)		
\mathbb{L}					
	Full Name (Last, First, Middle Initial)				Transaction ID: 24486855
Α.	Friends of George Kenney				Date of Disbursement
	Mailing Address P.O. Box 11524				08 17 2006
	Mailing Address P.O. Box 11524	•			
	City	State	Zip Code		Amount of Each Disbursement this Period
	Philadelphia	PA	19116		
	Purpose of Disbursement			-	1000.00
	George Kenney, STATE HOUSE 170th	ı PA		011	
	Candidate Name	I		Category/	
	Representative George Kenney, J			Туре	
	Office Sought: X House	Disbursement For:	2006		George Kenney, STATE HOUSE
	Senate President	Primary Other (and	X General		170th PA
	State: PA District: 17	Other (spe	ecity) 🔻		
	Full Name (Last, First, Middle Initial)				
В.	Perdue for a New Georgia				Transaction ID: 24621236 Date of Disbursement
	reduction a New Georgia				
	Mailing Address 5600 Roswell R	oad			0 9 1 3 2 2 0 0 6
	Suite 250 East				
	City	State	Zip Code		Amount of Each Disbursement this Period
	Atlanta	GA	30342		2000.00
	Purpose of Disbursement Sonny Perdue, GOVERNOR GA			011	2000.00
	Candidate Name			Category/	
	Sonny Perdue			Type	
	Office Sought: House	Disbursement For:	I 2006	7122	
	Senate	Primary	X General		Sonny Perdue, GOVERNOR GA
	President	Other (spe	ecify) 🔻		
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