

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

Office Use Only

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

UnitedHealth Group Incorporated PAC (United for Health)

ADDRESS (number and street)

9900 Bren Road East

☐Check if different
than previously
reported. (ACC)

Minnetonka

MN

55343

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00274431

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

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

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

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

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

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

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

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

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

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

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2006

through

09

30

2006

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

Type or Print Name of Treasurer

Patrick J. Erlandson

Signature of Treasurer

Electronically Filed by Patrick J. Erlandson

Date

10

13

2006

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
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

UnitedHealth Group Incorporated PAC (United for Health)

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2006		100128.32
(b) Cash on Hand at Beginning of Reporting Period	165021.04	
(c) Total Receipts (from Line 19)	113573.69	393466.41
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	278594.73	493594.73
7. Total Disbursements (from Line 31)	117500.00	332500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	161094.73	161094.73
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

UnitedHealth Group Incorporated PAC (United for Health)

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	0	6

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	89936.63	194434.56
(i) Itemized (use Schedule A)	23637.06	54979.63
(ii) Unitemized	113573.69	249414.19
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤		
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➤	113573.69	249414.19
12. Transfers From Affiliated/Other Party Committees	0.00	142052.22
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	2000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	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

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		107000.00	305000.00
24. Independent Expenditure (use Schedule E)		0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....		0.00	0.00
26. Loan Repayments Made.....		0.00	0.00
27. Loans Made.....		0.00	0.00
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees		0.00	0.00
(b) Political Party Committees		0.00	0.00
(c) Other Political Committees (such as PACs)		0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		0.00	0.00
29. Other Disbursements.....		10500.00	27500.00
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share		0.00	0.00
(ii) "Levin" Share		0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds		0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		117500.00	332500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		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
33. Total Contributions (other than loans) from Line 11(d), page 3)	113573.69	249414.19
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	113573.69	249414.19
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 / 105

(check only one)

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

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

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)

William W. McGuire

Mailing Address 9900 Bren Road East
MN008-8092

City State Zip Code
Minnetonka MN 55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
President, CEO & Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 5 / 2 0 0 6

Transaction ID: 24796895

Amount of Each Receipt this Period

5000.00

B. Full Name (Last, First, Middle Initial)

Nadine M. McGuire

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Spouse

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 5 / 2 0 0 6

Transaction ID: 24796898

Amount of Each Receipt this Period

5000.00

C. Full Name (Last, First, Middle Initial)

KEN L HOVERMAN

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
COO UHC Ohio

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: PR1159790915207

Amount of Each Receipt this Period

210.00

P/R Deduction (\$30.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

10210.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 7 / 105

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A.

Full Name (Last, First, Middle Initial)

ROBERT J SHEEHY

Mailing Address 9900 Bren Road East
MN008-W301

City State Zip Code
Minnetonka MN 55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Executive Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3800.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159794015207

Amount of Each Receipt this Period

1330.00

P/R Deduction (\$190.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

ANTHONY J KAZLAUSKAS

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159794615207

Amount of Each Receipt this Period

140.00

P/R Deduction (\$20.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

MICHAEL J KOEHLER

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
CEO PHP Southwest Michigan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159795315207

Amount of Each Receipt this Period

280.00

P/R Deduction (\$40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 8 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A.

Full Name (Last, First, Middle Initial)

CARLA M MUGGIO

Mailing Address 9900 Bren Road
East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
VP Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159798215207

Amount of Each Receipt this Period

134.61

P/R Deduction (\$19.23 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

BRIAN R BELLOWS

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Vice President Sales Strategic Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159803815207

Amount of Each Receipt this Period

105.00

P/R Deduction (\$15.00 Bi-
Weekly)

C.

Full Name (Last, First, Middle Initial)

KEITH W NOBLITT

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Strategic Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159805515207

Amount of Each Receipt this Period

140.00

P/R Deduction (\$20.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

379.61

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 9 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. JAMES S WATSON

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.Occupation
V.P. Govt Relations, UHC Midlands

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159806015207

Amount of Each Receipt this Period

134.61

P/R Deduction (\$19.23 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. TRACY L BAHL

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.Occupation
President, Strategic Services Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159808415207

Amount of Each Receipt this Period

1346.10

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. KENNETH A BURDICK

Mailing Address 9900 Bren Road East
MN008-W318

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.Occupation
VP of Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159808915207

Amount of Each Receipt this Period

140.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1620.71

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)
NANCY C ABELMANN

Mailing Address 9900 Bren Road
East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthCare Corpora-
tion

Occupation
Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159809115207

Amount of Each Receipt this Period

80.78

P/R Deduction (\$11.54 Bi-
Weekly)

B. Full Name (Last, First, Middle Initial)
WILLIAM P WHITELY

Mailing Address 9900 Bren Road
East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
CEO, United HealthCare of Illinois

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159812615207

Amount of Each Receipt this Period

1346.10

P/R Deduction (\$192.30 Bi-
Weekly)

C. Full Name (Last, First, Middle Initial)
RICHARD J RASKIN, MD

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 44114

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159813515207

Amount of Each Receipt this Period

134.61

P/R Deduction (\$19.23 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

1561.49

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial) LOIS E QUAM			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> </div>	
Mailing Address 9900 Bren Road East MN008-T300			Transaction ID: PR1159813715207	
City State Zip Code Minnetonka MN 55343			Amount of Each Receipt this Period <div>1346.10</div>	
FEC ID number of contributing federal political committee. C				
Name of Employer UnitedHealth Group, Inc.		Occupation CEO, Ovations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div>3846.00</div>		
B. Full Name (Last, First, Middle Initial) RICHARD A COLLINS			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> </div>	
Mailing Address 9900 Bren Road East			Transaction ID: PR1159814015207	
City State Zip Code Minnetonka MN 55343-9664			Amount of Each Receipt this Period <div>350.00</div>	
FEC ID number of contributing federal political committee. C				
Name of Employer UnitedHealth Group, Inc.		Occupation Director, Underwriting		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div>1000.00</div>		
C. Full Name (Last, First, Middle Initial) THOMAS H LINDQUIST			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> </div>	
Mailing Address 9900 Bren Road East MN008-T300			Transaction ID: PR1159814115207	
City State Zip Code Minnetonka MN 55343			Amount of Each Receipt this Period <div>1076.88</div>	
FEC ID number of contributing federal political committee. C				
Name of Employer UnitedHealth Group, Inc.		Occupation President, AARP Division, Ovations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div>3076.80</div>		

P/R Deduction (\$192.30 Bi-Weekly)

P/R Deduction (\$50.00 Bi-Weekly)

P/R Deduction (\$153.84 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

2772.98

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 12 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)

DAVID S WICHMANN

Mailing Address 9900 Bren Road East
MN008-W304

City State Zip Code
Minnetonka MN 55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
SVP - Corporate Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159814715207

Amount of Each Receipt this Period

1346.10

P/R Deduction (\$192.30 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)

SAUL FELDMAN

Mailing Address 9900 Bren Road
East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
CEO United Behavioral Health

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1538.40

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159815215207

Amount of Each Receipt this Period

538.44

P/R Deduction (\$76.92 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)

PATRICK J ERLANDSON

Mailing Address 9900 Bren Road E
MN008-8315

City State Zip Code
Minnetonka MN 55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
VP Corporate Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159815915207

Amount of Each Receipt this Period

1346.10

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

3230.64

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 13 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A.

Full Name (Last, First, Middle Initial)

PATRICIA R SAURO

Mailing Address 9900 Bren Road East
MN008-T500

City State Zip Code
Minnetonka MN 55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
United HealthGroup, Inc.

Occupation
VP Product Development AARP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159816415207

Amount of Each Receipt this Period

134.61

P/R Deduction (\$19.23 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

WILLIAM A MUNSELL

Mailing Address 9900 Bren Road E
MN008-W301

City State Zip Code
Minnetonka MN 55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Chief Operating Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159816615207

Amount of Each Receipt this Period

700.00

P/R Deduction (\$100.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

JOHN S PENSCHORN

Mailing Address 9900 Bren Road East
MN008-8092

City State Zip Code
Minnetonka MN 55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
VP Investor Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159816915207

Amount of Each Receipt this Period

700.00

P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1534.61

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 14 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)
SHEILA E MCMILLAN

Mailing Address 9900 Bren Road East
MN008-T300

City State Zip Code
Minnetonka MN 55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
VP - Finance AARP Division

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1538.40

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159817515207

Amount of Each Receipt this Period

538.44

P/R Deduction (\$76.92 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
JOHN R MACH JR

Mailing Address 9900 Bren Road East
MN008-W130

City State Zip Code
Minnetonka MN 55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Chief Medical Officer, Evercare

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159817615207

Amount of Each Receipt this Period

560.00

P/R Deduction (\$80.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
TIMOTHY F RYAN

Mailing Address 9900 Bren Rd East
MN008-T400

City State Zip Code
Minnetonka MN 55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group

Occupation
Segment General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159817915207

Amount of Each Receipt this Period

133.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1231.44

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 15 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A.

Full Name (Last, First, Middle Initial)

L ROBERT DAPPER

Mailing Address 9900 Bren Road East
MN008-T902

City State Zip Code
Minnetonka MN 55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group

Occupation
Senior Vice President Human Capital

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3077.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159818015207

Amount of Each Receipt this Period

1076.95

P/R Deduction (\$153.85 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

KELLY J DEKEYSER

Mailing Address 9900 Bren Road
East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group

Occupation
Senior VP, Business Process Outsourcing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159818415207

Amount of Each Receipt this Period

134.61

P/R Deduction (\$19.23 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

MARK F LINDSAY

Mailing Address 9900 Bren Road
East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Public Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159818615207

Amount of Each Receipt this Period

1346.10

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

2557.66

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 16 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. THOMAS J QUIRK

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group

Occupation
CEO Dallas/Austin Health Plan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159819115207

Amount of Each Receipt this Period

269.22

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. AMY K KNAPP

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group

Occupation
Regional President, Eastern Region, UH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159819315207

Amount of Each Receipt this Period

807.66

P/R Deduction (\$115.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. WILLIAM E MOELLER

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group

Occupation
CEO UnitedHealthcare Illinois

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1461.48

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159819515207

Amount of Each Receipt this Period

461.52

P/R Deduction (\$76.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1538.40

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 17 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)
REED V TUCKSON, M.D.

Mailing Address 9900 Bren Road East
MN008-T902

City State Zip Code
Minnetonka MN 55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group

Occupation
Sr. V.P. Consumer Health & Medical Car

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159819815207

Amount of Each Receipt this Period

807.66

P/R Deduction (\$115.38 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
DAVID J FALK

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159820215207

Amount of Each Receipt this Period

87.50

P/R Deduction (\$12.50 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
WILLIAM D YOUNG

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Sr. Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159821315207

Amount of Each Receipt this Period

269.15

P/R Deduction (\$38.45 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1164.31

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 18 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)

WILLIAM C TRACY

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159821515207

Amount of Each Receipt this Period

175.00

P/R Deduction (\$25.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)

MICHAEL M HAWKINS

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159822015207

Amount of Each Receipt this Period

80.78

P/R Deduction (\$11.54 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)

CAROL M SCHNEEWEIS

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
HealthCare

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159823515207

Amount of Each Receipt this Period

350.00

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

605.78

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 19 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A.

Full Name (Last, First, Middle Initial)

DAVID J LUBBEN

Mailing Address 9900 Bren Rd East

City

Minnetonka

State

MN

Zip Code

55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation

General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.04

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159823815207

Amount of Each Receipt this Period

1346.17

P/R Deduction (\$192.31 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

ELISE A GEMEINHARDT

Mailing Address 9900 Bren Road
East

City

Minnetonka

State

MN

Zip Code

55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation

VP Federal Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1538.40

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159824915207

Amount of Each Receipt this Period

538.44

P/R Deduction (\$76.92 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

BEVERLY H NYCE

Mailing Address 9900 Bren Road
East

City

Minnetonka

State

MN

Zip Code

55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation

Senior VP Uniprise

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159826015207

Amount of Each Receipt this Period

807.66

P/R Deduction (\$115.38 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

2692.27

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 20 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial) RICHARD J MIGLIORI Mailing Address 9900 Bren Road East City State Zip Code Minnetonka MN 55343-9664 FEC ID number of contributing federal political committee. C Name of Employer UnitedHealth Group, Inc. Occupation Senior VP Ingenix Employer Group Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1538.40			Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1159827415207 Amount of Each Receipt this Period 538.44 P/R Deduction (\$76.92 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) BARBARA C BUENEMANN Mailing Address 9900 Bren Road East City State Zip Code Minnetonka MN 55343-9664 FEC ID number of contributing federal political committee. C Name of Employer UnitedHealth Group, Inc. Occupation COO UHC of the Midwest, Inc. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 230.80			Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1159828715207 Amount of Each Receipt this Period 80.78 P/R Deduction (\$11.54 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) JEANNINE M RIVET Mailing Address 9900 Bren Road E. MN008-W315 City State Zip Code Minnetonka MN 55343-9664 FEC ID number of contributing federal political committee. C Name of Employer UnitedHealth Group, Inc. Occupation Executive VP/Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3846.00			Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1159830015207 Amount of Each Receipt this Period 1346.10 P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1965.32

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 21 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)
WILLIAM J ANTHONY

Mailing Address 9900 Bren Road East
MN008-W130

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
V.P. Call Center Operations - Ovations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159830215207

Amount of Each Receipt this Period

269.22

P/R Deduction (\$38.46 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
JACK E SHUFF

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Director, Sales and Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1159830515207

Amount of Each Receipt this Period

134.61

P/R Deduction (\$19.23 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
DONNA L. HOFFMEIER

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Public Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1162354515207

Amount of Each Receipt this Period

-70.00

P/R Deduction (\$-210.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

333.83

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 22 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)
Mr. ANTHONY WELTERS

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1332013215207

Amount of Each Receipt this Period

1346.10

P/R Deduction (\$192.30 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
JOHN KIRCHNER

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1530190515207

Amount of Each Receipt this Period

269.22

P/R Deduction (\$38.46 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
LESLIE GIDDENS ROBINSON

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
SVP Medical Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1530798315207

Amount of Each Receipt this Period

807.66

P/R Deduction (\$115.38 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

2422.98

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 23 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)
DEBORAH MATES CHASKES

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1530798515207

Amount of Each Receipt this Period

700.00

P/R Deduction (\$100.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
THELMA DUGGIN

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.04

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1530799215207

Amount of Each Receipt this Period

1346.17

P/R Deduction (\$192.31 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Mr EDGAR G RIOS

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1550188315207

Amount of Each Receipt this Period

1346.10

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

3392.27

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 24 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)
MARY G SHINHAM
Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1550190915207

Amount of Each Receipt this Period

140.00

P/R Deduction (\$20.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
JAQUELYN E ALBRIGHT
Mailing Address 9900 Bren Road East
MN008-T202

City State Zip Code
Minnetonka MN 55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1550191015207

Amount of Each Receipt this Period

201.95

P/R Deduction (\$28.85 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
DAVID P INGRAHAM
Mailing Address 9900 Bren Road East
MN008-T500

City State Zip Code
Minnetonka MN 55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1346.20

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1550191115207

Amount of Each Receipt this Period

471.17

P/R Deduction (\$67.31 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

813.12

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 25 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)
DAVID R ASTAR
Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
COO Ingenix

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1551005115207

Amount of Each Receipt this Period

1346.10

P/R Deduction (\$192.30 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
ROBERT J BOHNENKAMP
Mailing Address 9900 Bren Road East
MN008-W300

City State Zip Code
Minnetonka MN 55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1160.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1551005615207

Amount of Each Receipt this Period

406.00

P/R Deduction (\$58.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
MICHAEL J BRESOLIN
Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Health Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1551005715207

Amount of Each Receipt this Period

140.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1892.10

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 26 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. TIMOTHY J HEADY

Mailing Address 9900 Bren Road
East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1551122515207

Amount of Each Receipt this Period

280.00

P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. CHRISTOPHER R HOCK

Mailing Address 9900 Bren Road
East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1551128915207

Amount of Each Receipt this Period

80.78

P/R Deduction (\$11.54 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JAMES THOMAS JARRATT

Mailing Address 9900 Bren Road East
MN008-E115

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Customer Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1551132115207

Amount of Each Receipt this Period

269.22

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

630.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 27 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. JEFFREY W KAGAN

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Financial Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1551132315207

Amount of Each Receipt this Period

140.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MICHAEL C MATTEO

Mailing Address 9900 Bren Road
East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1551133415207

Amount of Each Receipt this Period

134.61

P/R Deduction (\$19.23 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DAWN M OWENS

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3840.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1551160315207

Amount of Each Receipt this Period

1344.00

P/R Deduction (\$192.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1618.61

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 28 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial) CATHERINE M PERRY Mailing Address 9900 Bren Road East City State Zip Code Minnetonka MN 55343-9664 FEC ID number of contributing federal political committee. C Name of Employer UnitedHealth Group, Inc. Occupation Nurse Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00			Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1551160415207 Amount of Each Receipt this Period 140.00 P/R Deduction (\$20.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) THOMAS J VALERIUS Mailing Address 9900 Bren Road East MN008-T850 City State Zip Code Minnetonka MN 55343 FEC ID number of contributing federal political committee. C Name of Employer UnitedHealth Group, Inc. Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1538.40			Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1551161315207 Amount of Each Receipt this Period 538.44 P/R Deduction (\$76.92 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) LOIS T WEIHRAUCH Mailing Address 9900 Bren Road East MN008-W130 City State Zip Code Minnetonka MN 55343 FEC ID number of contributing federal political committee. C Name of Employer UnitedHealth Group, Inc. Occupation Computer Systems Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1551161415207 Amount of Each Receipt this Period 105.00 P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

783.44

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 29 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)

ANTHONY R CARR

Mailing Address 9900 Bren Road
East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1554323415207

Amount of Each Receipt this Period

105.00

P/R Deduction (\$15.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)

JOHN O ENDERLE

Mailing Address 9900 Bren Road
East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1554323515207

Amount of Each Receipt this Period

77.00

P/R Deduction (\$11.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)

RICK M JELINEK

Mailing Address 9900 Bren Road East
MN008-T500

City State Zip Code
Minnetonka MN 55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Senior Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1554323915207

Amount of Each Receipt this Period

336.00

P/R Deduction (\$48.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

518.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 30 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. JOSEPH J MCERLANE

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1554324115207

Amount of Each Receipt this Period

134.61

P/R Deduction (\$19.23 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MICHAEL RADU

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1554324515207

Amount of Each Receipt this Period

134.61

P/R Deduction (\$19.23 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. CATHERINE E SPILLANE

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Administration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1554324615207

Amount of Each Receipt this Period

134.61

P/R Deduction (\$19.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

403.83

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 31 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)
KIRK E STAPLETON

Mailing Address 9900 Bren Road
East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Network Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1554324715207

Amount of Each Receipt this Period

350.00

P/R Deduction (\$50.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
CRAIG C ANDERSON

Mailing Address 9900 Bren Road
East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1575957315207

Amount of Each Receipt this Period

134.61

P/R Deduction (\$19.23 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
KAREN L ERICKSON

Mailing Address 9900 Bren Road
East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1575957615207

Amount of Each Receipt this Period

280.00

P/R Deduction (\$40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

764.61

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 32 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A.

Full Name (Last, First, Middle Initial)

ERNEST MONFILETTO

Mailing Address 9900 Bren Road East

City

Minnetonka

State

MN

Zip Code

55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation

Computer Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1538.40

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1575958115207

Amount of Each Receipt this Period

538.44

P/R Deduction (\$76.92 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

LEE D VALENTA

Mailing Address 9900 Bren Road East

City

Minnetonka

State

MN

Zip Code

55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation

Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3846.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1575958515207

Amount of Each Receipt this Period

1346.10

P/R Deduction (\$192.30 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

TOM M DAVIS

Mailing Address 9900 Bren Road East

City

Minnetonka

State

MN

Zip Code

55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation

Director Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1580863515207

Amount of Each Receipt this Period

280.00

P/R Deduction (\$40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

2164.54

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 33 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. THOMAS S PAUL

Mailing Address 9900 Bren Road East
MN008-T500

City State Zip Code
Minnetonka MN 55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Pharmacy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1580864715207

Amount of Each Receipt this Period

269.22

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JIMMIE L POGUE

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664V

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Health Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1580864815207

Amount of Each Receipt this Period

134.61

P/R Deduction (\$19.23 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. KAREN R SCHIEVELBEIN

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1538.40

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1580865115207

Amount of Each Receipt this Period

538.44

P/R Deduction (\$76.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

942.27

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 34 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. JOSEPH O WEISSENBORN

Mailing Address 9900 Bren Road East
MN008-T850

City State Zip Code
Minnetonka MN 55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
HR Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1580865415207

Amount of Each Receipt this Period

595.00

P/R Deduction (\$85.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. WILLIAM S BOJAN

Mailing Address 9900 Bren Road East
MN008-T205

City State Zip Code
Minnetonka MN 55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Risk Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596303715207

Amount of Each Receipt this Period

280.00

P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. BRIGID A BONNER

Mailing Address 9900 Bren Road East
MN008-W212

City State Zip Code
Minnetonka MN 55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Information Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596303815207

Amount of Each Receipt this Period

140.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1015.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 35 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial) CHARLES A BOWLES		Date of Receipt <div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div>	
Mailing Address 9900 Bren Road East		Transaction ID: PR1596303915207	
City State Zip Code Minnetonka MN 55343-9664	Amount of Each Receipt this Period <div>134.61</div>		
FEC ID number of contributing federal political committee. C			
Name of Employer UnitedHealth Group, Inc.	Occupation Sales & Marketing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <div>384.60</div>		
B. Full Name (Last, First, Middle Initial) PAUL H GULSTRAND		Date of Receipt <div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div>	
Mailing Address 9900 Bren Road East		Transaction ID: PR1596304015207	
City State Zip Code Minnetonka MN 55343-9664	Amount of Each Receipt this Period <div>269.22</div>		
FEC ID number of contributing federal political committee. C			
Name of Employer UnitedHealth Group, Inc.	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <div>769.20</div>		
C. Full Name (Last, First, Middle Initial) PAMELA N HURSH		Date of Receipt <div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div>	
Mailing Address 9900 Bren Road East		Transaction ID: PR1596304215207	
City State Zip Code Minnetonka MN 55343-9664	Amount of Each Receipt this Period <div>175.00</div>		
FEC ID number of contributing federal political committee. C			
Name of Employer UnitedHealth Group, Inc.	Occupation Accountant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <div>500.00</div>		

P/R Deduction (\$19.23 Bi-Weekly)

P/R Deduction (\$38.46 Bi-Weekly)

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

578.83

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 36 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A.

Full Name (Last, First, Middle Initial)

GAYE ADAMS MASSEY

Mailing Address 9900 Bren Road East
MN008-T500

City State Zip Code
Minnetonka MN 55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596304515207

Amount of Each Receipt this Period

134.61

P/R Deduction (\$19.23 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

JAY S MATUSHAK

Mailing Address 9900 Bren Road East
MN008-T700

City State Zip Code
Minnetonka MN 55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596304615207

Amount of Each Receipt this Period

80.78

P/R Deduction (\$11.54 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

MICHAEL JOHN MCDONNELL

Mailing Address 9900 Bren Road
East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1540.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596304715207

Amount of Each Receipt this Period

539.00

P/R Deduction (\$77.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

754.39

TOTAL This Period (last page this line number only)

X	11a		11b		11c		12			
	13		14		15		16			17

UnitedHealth Group Incorporated PAC (United for Health)

FEC Schedule A (Form 3X) Rev. 02/2003

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

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

FOR LINE NUMBER: PAGE 38 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. SCOTT E THEISEN

Mailing Address 9900 Bren Road East
MN008-W395

City State Zip Code
Minnetonka MN 55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596305615207

Amount of Each Receipt this Period

134.61

P/R Deduction (\$19.23 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ROGER A WEBER

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Administration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596305715207

Amount of Each Receipt this Period

80.78

P/R Deduction (\$11.54 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. GEOFFREY ALAN GOTHRO

Mailing Address 9900 Bren Road East
MN008-T700

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596306815207

Amount of Each Receipt this Period

269.22

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

484.61

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 39 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. THOMAS D LEWIS

Full Name (Last, First, Middle Initial)

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596306915207

Amount of Each Receipt this Period

269.22

P/R Deduction (\$38.46 Bi-Weekly)

B. ROBERT W OBERRENDER

Full Name (Last, First, Middle Initial)

Mailing Address 9900 Bren Road East
MN008-T380

City State Zip Code
 Minnetonka MN 55343

FEC ID number of contributing federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.Occupation
Cash Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596307015207

Amount of Each Receipt this Period

203.00

P/R Deduction (\$29.00 Bi-Weekly)

C. ROBERT REBITZER

Full Name (Last, First, Middle Initial)

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596307115207

Amount of Each Receipt this Period

134.61

P/R Deduction (\$19.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

606.83

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 40 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)
DIANE L BEDNAR-FLYNN

Mailing Address 9900 Bren Road East
MN008-W130

City State Zip Code
Minnetonka MN 55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Health Care Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596309715207

Amount of Each Receipt this Period

140.00

P/R Deduction (\$20.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
LISA M BEHNKE

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Medicine

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596309815207

Amount of Each Receipt this Period

700.00

P/R Deduction (\$100.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
JAMES M BOGDAN

Mailing Address 9900 Bren Road
East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596310315207

Amount of Each Receipt this Period

133.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

973.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 41 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. JEFFREY S COOK

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Network Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596311315207

Amount of Each Receipt this Period

80.78

P/R Deduction (\$11.54 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. RAMON E COTO

Mailing Address 9900 Bren Road
East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596311515207

Amount of Each Receipt this Period

134.61

P/R Deduction (\$19.23 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. ANNE D DEFUSCO

Mailing Address 9900 Bren Road
East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596311715207

Amount of Each Receipt this Period

80.78

P/R Deduction (\$11.54 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

296.17

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 42 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. JEFFREY P DOOLEY

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596312115207

Amount of Each Receipt this Period

80.78

P/R Deduction (\$11.54 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. RICHARD G DUNLOP

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596312315207

Amount of Each Receipt this Period

175.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. KEITH A EPPERSON

Mailing Address 9900 Bren Road
East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596312415207

Amount of Each Receipt this Period

105.00

P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

360.78

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 43 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. JILLIAN R FOUCRE

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Senior Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596312715207

Amount of Each Receipt this Period

140.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. STEVAN D GARCIA

Mailing Address 9900 Bren Road
East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Data Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596312915207

Amount of Each Receipt this Period

134.61

P/R Deduction (\$19.23 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. RANDY P GILES

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Health Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596313215207

Amount of Each Receipt this Period

269.22

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

543.83

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 44 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)

EDWARD J HAWLEY

Mailing Address 9900 Bren Road
East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Health Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596313615207

Amount of Each Receipt this Period

269.22

P/R Deduction (\$38.46 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)

KURT A HEUMANN

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Information Networking

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596313715207

Amount of Each Receipt this Period

84.00

P/R Deduction (\$12.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)

NANETTE R KARTSONIS

Mailing Address 9900 Bren Road East
MN008-W130

City State Zip Code
Minnetonka MN 55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596314615207

Amount of Each Receipt this Period

140.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

493.22

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 45 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)
EDWARD LAGERSTROM

Mailing Address 9900 Bren Road East
MN008-T430

City State Zip Code
Minnetonka MN 55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Information Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596315015207

Amount of Each Receipt this Period

269.22

P/R Deduction (\$38.46 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
THOMAS CHARLES REKART

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Information Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596316715207

Amount of Each Receipt this Period

134.61

P/R Deduction (\$19.23 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
JOHN H RENNICK JR

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Doctor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596316815207

Amount of Each Receipt this Period

134.61

P/R Deduction (\$19.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

538.44

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 46 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. JAMISON RICE

Mailing Address 9900 Bren Road
East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596316915207

Amount of Each Receipt this Period

80.78

P/R Deduction (\$11.54 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. STEPHAN S RODGERS

Mailing Address 9900 Bren Road
East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596317115207

Amount of Each Receipt this Period

807.66

P/R Deduction (\$115.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DANIEL I ROSENTHAL

Mailing Address 9900 Bren Road
East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596317315207

Amount of Each Receipt this Period

134.61

P/R Deduction (\$19.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1023.05

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 47 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial) KEVIN J RUTH		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1596317415207
Mailing Address 9900 Bren Road East		
City Minnetonka	State MN	Zip Code 55343-9664
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 525.00
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
		P/R Deduction (\$75.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial) MANUEL A SELVA		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1596317715207
Mailing Address 9900 Bren Road East		
City Minnetonka	State MN	Zip Code 55343-9664
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 134.61
Name of Employer UnitedHealth Group, Inc.	Occupation Doctor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 384.60	
		P/R Deduction (\$19.23 Bi-Weekly)

C. Full Name (Last, First, Middle Initial) JUAN R SERRANO		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1596317815207
Mailing Address 9900 Bren Road East		
City Minnetonka	State MN	Zip Code 55343-9664
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 134.61
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 384.60	
		P/R Deduction (\$19.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

794.22

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A.

Full Name (Last, First, Middle Initial)

DAVID C STURKEY

Mailing Address 9900 Bren Road East

City

Minnetonka

State

MN

Zip Code

55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Health Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596318415207

Amount of Each Receipt this Period

269.22

P/R Deduction (\$38.46 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

ROXANNE THOMAS

Mailing Address 9900 Bren Road East
MN008-T615

City

Minnetoka

State

MN

Zip Code

55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Administrative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596318915207

Amount of Each Receipt this Period

80.78

P/R Deduction (\$11.54 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

ROSEMARY VENUTO

Mailing Address 9900 Bren Road East

City

Minnetonka

State

MN

Zip Code

55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Medicine

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596319315207

Amount of Each Receipt this Period

134.61

P/R Deduction (\$19.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

484.61

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

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

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)
M LAURIE WASSERSTEIN

Mailing Address 9900 Bren Road
East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Information Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596319515207

Amount of Each Receipt this Period

134.61

P/R Deduction (\$19.23 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
MYRON R WERLEY

Mailing Address 9900 Bren Road
East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Insurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1596319615207

Amount of Each Receipt this Period

87.50

P/R Deduction (\$12.50 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
EDWARD J WHEELER

Mailing Address 9900 Bren Road
East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Mktg & Strategic Performance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1600594415207

Amount of Each Receipt this Period

280.00

P/R Deduction (\$40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

502.11

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

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.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Securities

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1600597215207

Amount of Each Receipt this Period

80.78

P/R Deduction (\$11.54 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JOHN P DODDY

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Information Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1600597315207

Amount of Each Receipt this Period

140.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MARGUERITE EDWARDS

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1600597415207

Amount of Each Receipt this Period

269.22

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

490.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial) MICHAEL ILE Mailing Address 9900 Bren Road East City State Zip Code Minnetonka MN 55343-9664 FEC ID number of contributing federal political committee. C Name of Employer UnitedHealth Group, Inc. Occupation Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 384.60			Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1600597615207 Amount of Each Receipt this Period 134.61 P/R Deduction (\$19.23 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) THOMAS J O'BRIEN Mailing Address 9900 Bren Road East City State Zip Code Minnetonka MN 55343-9664 FEC ID number of contributing federal political committee. C Name of Employer UnitedHealth Group, Inc. Occupation Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 769.20			Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1600597815207 Amount of Each Receipt this Period 269.22 P/R Deduction (\$38.46 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) LISA VANDERHEYDEN Mailing Address 9900 Bren Road East City State Zip Code Minnetonka MN 55343-9664 FEC ID number of contributing federal political committee. C Name of Employer UnitedHealth Group, Inc. Occupation Information Systems Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 280.00			Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1600598015207 Amount of Each Receipt this Period 20.00 P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

423.83

TOTAL This Period (last page this line number only)

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

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

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)
STEPHEN B GREENBERG

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1600598415207

Amount of Each Receipt this Period

134.61

P/R Deduction (\$19.23 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
MICHAEL D MICHAUX

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1600598515207

Amount of Each Receipt this Period

80.78

P/R Deduction (\$11.54 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
LEWIS G SANDY

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Doctor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1600598715207

Amount of Each Receipt this Period

455.00

P/R Deduction (\$65.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

670.39

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A.

Full Name (Last, First, Middle Initial)

MICHAEL P CAUTIN

Mailing Address 9900 Bren Road East
MN008-T500

City State Zip Code
Minnetonka MN 55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Information Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1602667515207

Amount of Each Receipt this Period

134.61

P/R Deduction (\$19.23 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

MATTHEW W PETERSON

Mailing Address 9900 Bren Road
East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1602669915207

Amount of Each Receipt this Period

280.00

P/R Deduction (\$40.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

JEFF W MALONEY

Mailing Address 9900 Bren Road East
MN008-W130

City State Zip Code
Minnetonka MN 55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1538.40

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1613243515207

Amount of Each Receipt this Period

538.44

P/R Deduction (\$76.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

953.05

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 54 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)
LAURA M BRANKER

Mailing Address 9900 Bren Road
East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Public Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1613243615207

Amount of Each Receipt this Period

201.95

P/R Deduction (\$28.85 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
ALLEN LAWRENCE FINKELSTEIN

Mailing Address 9900 Bren Road
East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Administration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1620989015207

Amount of Each Receipt this Period

269.22

P/R Deduction (\$38.46 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
VALERIE GREY

Mailing Address 9900 Bren Road
East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Information Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.91

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1620989215207

Amount of Each Receipt this Period

76.92

P/R Deduction (\$19.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

548.09

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 55 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A.

Full Name (Last, First, Middle Initial)

DANIEL S WALLER

Mailing Address 9900 Bren Road East
MN008-W385

City State Zip Code
Minnetonka MN 55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1632360015207

Amount of Each Receipt this Period

201.95

P/R Deduction (\$28.85 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

WILLIAM F KENNEDY

Mailing Address 9900 Bren Road
East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Information Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.80

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1653443115207

Amount of Each Receipt this Period

107.73

P/R Deduction (\$15.39 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

STEVE R KOOREN

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1653443215207

Amount of Each Receipt this Period

403.83

P/R Deduction (\$57.69 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

713.51

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 56 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A.

Full Name (Last, First, Middle Initial)

SUE E BRAY

Mailing Address 9900 Bren Road East

City

Minnetonka

State

MN

Zip Code

55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1653444415207

Amount of Each Receipt this Period

80.78

P/R Deduction (\$11.54 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

ANTHONY D OLSON

Mailing Address 9900 Bren Road
East

City

Minnetonka

State

MN

Zip Code

55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Information Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1653445315207

Amount of Each Receipt this Period

84.00

P/R Deduction (\$12.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

DANIEL T SULLIVAN

Mailing Address 9900 Bren Road
East

City

Minnetonka

State

MN

Zip Code

55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Information Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1653445815207

Amount of Each Receipt this Period

80.78

P/R Deduction (\$11.54 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

245.56

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 57 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)
FEATHER O HOUSTOUN

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1653446115207

Amount of Each Receipt this Period

350.00

P/R Deduction (\$50.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
JOYCE A LARKINMailing Address 9900 Bren Road East
MN008-T500

City State Zip Code
 Minnetonka MN 55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.Occupation
Public Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1538.40

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1677771615207

Amount of Each Receipt this Period

538.44

P/R Deduction (\$76.92 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
JOHN T KOUTSOUMPAS JR

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.Occupation
Public Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1748514515207

Amount of Each Receipt this Period

269.22

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1157.66

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 58 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial) LEE R SHAPIRO			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> </div>	
Mailing Address 9900 Bren Road East			Transaction ID: PR1775550915207	
City State Zip Code Minnetonka MN 55343-9664			Amount of Each Receipt this Period <div>201.95</div>	
FEC ID number of contributing federal political committee. <div>C</div>				
Name of Employer UnitedHealth Group, Inc.		Occupation HealthCare Provider		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div>577.00</div>		
B. Full Name (Last, First, Middle Initial) ANN DESTWOLINSKI			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> </div>	
Mailing Address 9900 Bren Road East			Transaction ID: PR1806441615207	
City State Zip Code Minnetonka MN 55343-9664			Amount of Each Receipt this Period <div>77.00</div>	
FEC ID number of contributing federal political committee. <div>C</div>				
Name of Employer UnitedHealth Group, Inc.		Occupation Medical		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div>220.00</div>		
C. Full Name (Last, First, Middle Initial) DEBORAH A GOUGH			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> </div>	
Mailing Address 9900 Bren Road East			Transaction ID: PR1806442115207	
City State Zip Code Minnetonka MN 55343-9664			Amount of Each Receipt this Period <div>132.30</div>	
FEC ID number of contributing federal political committee. <div>C</div>				
Name of Employer UnitedHealth Group, Inc.		Occupation Sales & Marketing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div>378.00</div>		

P/R Deduction (\$28.85 Bi-Weekly)

P/R Deduction (\$11.00 Bi-Weekly)

P/R Deduction (\$18.90 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

411.25

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 59 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A.

Full Name (Last, First, Middle Initial)

JEFF L LEVINE

Mailing Address 9900 Bren Road East

City

Minnetonka

State

MN

Zip Code

55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1806443215207

Amount of Each Receipt this Period

140.00

P/R Deduction (\$20.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

WILLIAM TALAMANTES

Mailing Address 9900 Bren Road East

City

Minnetonka

State

MN

Zip Code

55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1806444715207

Amount of Each Receipt this Period

123.20

P/R Deduction (\$17.60 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

LORI A ARCHER

Mailing Address 9900 Bren Road East

City

Minnetonka

State

MN

Zip Code

55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1806750115207

Amount of Each Receipt this Period

80.78

P/R Deduction (\$11.54 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

343.98

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 105

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)
GREGORY A BAYER
Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1806750215207

Amount of Each Receipt this Period

420.00

P/R Deduction (\$60.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
PAUL M EMERSON
Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1806750315207

Amount of Each Receipt this Period

134.61

P/R Deduction (\$19.23 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
HOLLY A BODE
Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Administration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1817581115207

Amount of Each Receipt this Period

269.22

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

823.83

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 61 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A.

Full Name (Last, First, Middle Initial)

SHERRIC PINOTTI

Mailing Address 9900 Bren Road
East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Information Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1832039815207

Amount of Each Receipt this Period

201.95

P/R Deduction (\$28.85 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

CHRISTIAN S BERGERON

Mailing Address 9900 Bren Road
East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1832301915207

Amount of Each Receipt this Period

201.95

P/R Deduction (\$28.85 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

SHAUNA D ULLOA

Mailing Address 9900 Bren Road
East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.26

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1832379115207

Amount of Each Receipt this Period

69.24

P/R Deduction (\$0.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

473.14

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 62 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)
MICHELLE D LEDELL

Mailing Address 9900 Bren Road East
MN008-T615

City State Zip Code
Minnetonka MN 55343

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1882850615207

Amount of Each Receipt this Period

280.00

P/R Deduction (\$40.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
CATHERINE K ANDERSON

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Administration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1903550715207

Amount of Each Receipt this Period

175.00

P/R Deduction (\$25.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
KATHLEEN L BISHOP

Mailing Address 9900 Bren Road
East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1903560815207

Amount of Each Receipt this Period

140.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

595.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 63 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)
ROBERT J DUFEK
Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Information Systems Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1903577115207

Amount of Each Receipt this Period

175.00

P/R Deduction (\$25.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
SUSAN B EDBERG
Mailing Address 9900 Bren Raod East
MN008-T615

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Customer Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1903578115207

Amount of Each Receipt this Period

700.00

P/R Deduction (\$100.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
HYONG JIN PARK
Mailing Address 9900 Bren Road
East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Information Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1903611415207

Amount of Each Receipt this Period

140.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1015.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 64 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)

STEVEN F PENN

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.68

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1903612915207

Amount of Each Receipt this Period

115.38

P/R Deduction (\$19.23 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)

THOMAS L TRAN

Mailing Address 9900 Bren Road
East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1903633215207

Amount of Each Receipt this Period

280.00

P/R Deduction (\$40.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)

PAUL D WEYMOUTH

Mailing Address 9900 Bren Road
East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.91

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1903636915207

Amount of Each Receipt this Period

134.61

P/R Deduction (\$19.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

529.99

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 65 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)
DELBERT D MASON

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1907906415207

Amount of Each Receipt this Period

140.00

P/R Deduction (\$20.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
JOSEPH E ADDIEGO

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Doctor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2119466615207

Amount of Each Receipt this Period

576.00

P/R Deduction (\$96.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
GARY J AHWAH

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2119466715207

Amount of Each Receipt this Period

300.00

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1016.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 105

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial) BRENDAN BAKER Mailing Address 9900 Bren Road East City State Zip Code Minnetonka MN 55343-9664 FEC ID number of contributing federal political committee. C Name of Employer UnitedHealth Group, Inc. Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00			Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR2119467415207 Amount of Each Receipt this Period 240.00 P/R Deduction (\$40.00 Bi-Weekly)
B. Full Name (Last, First, Middle Initial) SUSAN LYNN BERKEL Mailing Address 9900 Bren Road East City State Zip Code Minnetonka MN 55343-9664 FEC ID number of contributing federal political committee. C Name of Employer UnitedHealth Group, Inc. Occupation Finance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1152.00			Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR2119468115207 Amount of Each Receipt this Period 1152.00 P/R Deduction (\$192.00 Bi-Weekly)
C. Full Name (Last, First, Middle Initial) DAVID J BOHMFALK Mailing Address 9900 Bren Road East City State Zip Code Minnetonka MN 55343-9664 FEC ID number of contributing federal political committee. C Name of Employer UnitedHealth Group, Inc. Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR2119468415207 Amount of Each Receipt this Period 300.00 P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1692.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 67 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)
BRADFORD A BOWLUS

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1140.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2119468815207

Amount of Each Receipt this Period

1140.00

P/R Deduction (\$190.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
LESLIE J CARTER

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Information Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2119470315207

Amount of Each Receipt this Period

576.00

P/R Deduction (\$96.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
HAROLD COATS

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2119471015207

Amount of Each Receipt this Period

300.00

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

2016.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 68 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. ANDREA E DILWEG

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Public Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2119472915207

Amount of Each Receipt this Period

222.00

P/R Deduction (\$37.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. KATHERINE F FEENY

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1152.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2119473815207

Amount of Each Receipt this Period

1152.00

P/R Deduction (\$192.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. James Frey

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2119474415207

Amount of Each Receipt this Period

960.00

P/R Deduction (\$192.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

2334.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 69 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. JOHN F FRITZ

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2119474615207

Amount of Each Receipt this Period

360.00

P/R Deduction (\$60.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JOE L GUINN

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Public Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2119476215207

Amount of Each Receipt this Period

360.00

P/R Deduction (\$60.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DAVID M HANSEN

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2119476715207

Amount of Each Receipt this Period

810.00

P/R Deduction (\$135.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1530.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 70 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)
BRIDGET C HARPER
Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2119477015207

Amount of Each Receipt this Period

576.00

P/R Deduction (\$96.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
SAMUEL W HO
Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Doctor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2119477915207

Amount of Each Receipt this Period

600.00

P/R Deduction (\$100.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
JOHN D JONES
Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Public Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2119479215207

Amount of Each Receipt this Period

576.00

P/R Deduction (\$96.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1752.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 71 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)

SCOTT KEIM

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Information Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2119479815207

Amount of Each Receipt this Period

234.00

P/R Deduction (\$39.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)

HEATHER M MACE-MEADOR

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Legal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2119482515207

Amount of Each Receipt this Period

240.00

P/R Deduction (\$40.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)

MICHAEL S MALLORY

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2119482615207

Amount of Each Receipt this Period

576.00

P/R Deduction (\$96.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1050.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 72 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)
PETER W MCKINLEY

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Information Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2119483715207

Amount of Each Receipt this Period

450.00

P/R Deduction (\$75.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
CHARLEEN M MILBURN

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Public Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2119483915207

Amount of Each Receipt this Period

390.00

P/R Deduction (\$65.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
GILBERT J MILLER

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2119484015207

Amount of Each Receipt this Period

576.00

P/R Deduction (\$96.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1416.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 73 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)
NANCY J MONK
Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Public Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2119484315207

Amount of Each Receipt this Period

300.00

P/R Deduction (\$50.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
BRET A MORRIS
Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Web Design

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2119484615207

Amount of Each Receipt this Period

600.00

P/R Deduction (\$100.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
SCOTT A NEURURER
Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Information systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2119484915207

Amount of Each Receipt this Period

288.00

P/R Deduction (\$48.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1188.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 74 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. AUSTIN T PITTMAN

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
Executive

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2119486715207

Amount of Each Receipt this Period

810.00

P/R Deduction (\$135.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. CYNTHIA L POLICH

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2119486815207

Amount of Each Receipt this Period

288.00

P/R Deduction (\$48.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. GREGG R RATKOVIC

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2119487515207

Amount of Each Receipt this Period

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 only)

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

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

FOR LINE NUMBER: PAGE 75 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)
CHRISTINA M SUMPTER

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Informaiton Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2119490915207

Amount of Each Receipt this Period

576.00

P/R Deduction (\$96.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
CHERYL TANIGAWA, MD

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Doctor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2119491115207

Amount of Each Receipt this Period

300.00

P/R Deduction (\$50.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
GLENN TERWILLIGER

Mailing Address 9900 Bren Road East

City State Zip Code
Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Insurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2119491315207

Amount of Each Receipt this Period

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 only)

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

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

FOR LINE NUMBER: PAGE 76 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)

PATTI TUCKER

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2119491915207

Amount of Each Receipt this Period

576.00

P/R Deduction (\$96.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)

STEVEN M TUCKER

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Public Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2119492015207

Amount of Each Receipt this Period

576.00

P/R Deduction (\$96.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)

SUSAN VANASTEN

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Medical

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2119492615207

Amount of Each Receipt this Period

210.00

P/R Deduction (\$35.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1362.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 77 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

A. Full Name (Last, First, Middle Initial)
THOMAS G ZIELINSKI

Mailing Address 9900 Bren Road East

City State Zip Code
 Minnetonka MN 55343-9664

FEC ID number of contributing
federal political committee.

C

Name of Employer
UnitedHealth Group, Inc.

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y

Transaction ID: PR2119494615207

Amount of Each Receipt this Period

270.00

P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

89936.63

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Friends Of Mark Foley

Mailing Address 3507 Village Blvd #5-304

City West Palm Beach State FL Zip Code 33409

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Mark Foley

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 16

Transaction ID: 24240378

Date of Disbursement

07 / 05 / 2006

Amount of Each Disbursement this Period

1000.00

Re-election to US House
of Reps

Full Name (Last, First, Middle Initial)

B. Friends Of John Boehner

Mailing Address 7908-I Cincinnati Dayton Road

City West Chester State OH Zip Code 45069

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
John A. Boehner

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 8

Transaction ID: 24292770

Date of Disbursement

07 / 12 / 2006

Amount of Each Disbursement this Period

2000.00

Re-election to US House
of Reps

Full Name (Last, First, Middle Initial)

C. People with Hart

Mailing Address P.O. Box 435

City Wexford State PA Zip Code 15090

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Melissa Hart

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2005
☐ Primary ☐ General
☒ Other (specify) ▼

State: PA District: 4 2006 General Electio

Transaction ID: 24302362

Date of Disbursement

07 / 12 / 2006

Amount of Each Disbursement this Period

1000.00

Re-election to US House
of Reps

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 79 / 105

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Jon Kyl For U S Senate

Mailing Address Post Office Box 10246

City
Phoenix

State
AZ

Zip Code
85064

Purpose of Disbursement
Re-election to US Senate

Candidate Name
Sen. Jon Kyl

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: AZ District: 2

Transaction ID: 24302862

Date of Disbursement

07 / 12 / 2006

Amount of Each Disbursement this Period

1000.00

Re-election to US Senate

Full Name (Last, First, Middle Initial)

B. Friends Of Roy Blunt

Mailing Address Po Box 278

City
Strafford

State
MO

Zip Code
65757

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Roy Blunt

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: MO District: 7

Transaction ID: 24323118

Date of Disbursement

07 / 17 / 2006

Amount of Each Disbursement this Period

1000.00

Re-election to US House
of Reps

Full Name (Last, First, Middle Initial)

C. Dave Wu For Congress

Mailing Address 818 Sw 3rd St #1182

City
Portland

State
OR

Zip Code
97205

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Rep. David Wu

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: OR District: 1

Transaction ID: 24323119

Date of Disbursement

07 / 17 / 2006

Amount of Each Disbursement this Period

2000.00

Re-election to US House
of Reps

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Searchlight Leadership Fund

Mailing Address 422 C St. NE
Lower Level

City Washington State DC Zip Code 20002

Purpose of Disbursement
Leadership PAC for Sen Harry Reid

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 24323058

Date of Disbursement

07 / 17 / 2006

Amount of Each Disbursement this Period

2500.00

Leadership PAC for Sen Harry Reid

Full Name (Last, First, Middle Initial)

B. America's Health Insurance Plans PAC (AHIP PAC)

Mailing Address 601 Penn. Avenue NW
#500 South Bldg.

City Washington State DC Zip Code 20004

Purpose of Disbursement
AHIP Trade Association PAC

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 24323111

Date of Disbursement

07 / 17 / 2006

Amount of Each Disbursement this Period

2000.00

AHIP Trade Association PAC

Full Name (Last, First, Middle Initial)

C. Committee for a Democratic Majority

Mailing Address 301 4th St. NE
Suite 202

City Washington State DC Zip Code 20002

Purpose of Disbursement
Committee Contribution - Leadership PAC

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 24323113

Date of Disbursement

07 / 17 / 2006

Amount of Each Disbursement this Period

1000.00

Committee Contribution -
Leadership PAC - Sen Edward Kennedy

SUBTOTAL of Disbursements This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Battle Born Political Action Committee

Mailing Address PO Box 40366
Suite 300

City Washington State DC Zip Code 20016

Purpose of Disbursement
Leadership PAC - Sen John Ensign

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 24323122

Date of Disbursement

07 / 17 / 2006

Amount of Each Disbursement this Period

1500.00

Leadership PAC - Sen John Ensign

Full Name (Last, First, Middle Initial)

B. Friends of Sam Johnson

Mailing Address PO Box 860096

City PLANO State TX Zip Code 75086

Purpose of Disbursement
Candidate contribution - US House of Rep

Candidate Name
Sam Johnson

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: TX District: 3

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 24339644

Date of Disbursement

07 / 21 / 2006

Amount of Each Disbursement this Period

2000.00

Candidate contribution - US House of Reps

Full Name (Last, First, Middle Initial)

C. Glacier PAC

Mailing Address 818 Connecticut Ave. NW
Suite 1100

City Washington State DC Zip Code 20006

Purpose of Disbursement
Committee Contribution - Leadership PAC

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 24339684

Date of Disbursement

07 / 21 / 2006

Amount of Each Disbursement this Period

2500.00

Committee Contribution - Leadership PAC for Sen Baucus

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Congressman Bart Gordon Committee

Mailing Address P.O. Box 2008

City Murfreesboro State TN Zip Code 37133

Purpose of Disbursement
Candidate contribution - US House of Rep

Candidate Name
Rep. Bart Gordon

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 6

Transaction ID: 24339643

Date of Disbursement

07 / 21 / 2006

Amount of Each Disbursement this Period

1000.00

Candidate contribution -
US House of Reps

Full Name (Last, First, Middle Initial)

B. Michigan/Washington Senate Victory

Mailing Address 120 Maryland Avenue NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Debbie Stabenow Candidate

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 24339645

Date of Disbursement

07 / 21 / 2006

Amount of Each Disbursement this Period

2000.00

Debbie Stabenow Candidate

Full Name (Last, First, Middle Initial)

C. Great Plains Leadership Fund

Mailing Address 818 Connecticut Ave NW
Suite 1100

City Washington State DC Zip Code 20006

Purpose of Disbursement
Committee Contribution Leadership PAC fo

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 24339677

Date of Disbursement

07 / 21 / 2006

Amount of Each Disbursement this Period

1000.00

Committee Contribution Le-
adership PAC for Sen Dorg-
an

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Nancy Pelosi For Congress

Mailing Address 235 Montgomery Street
Suite 610

City San Francisco State CA Zip Code 94104

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Rep. Nancy Pelosi

Office Sought: ☒ House
☐ Senate
☐ President

State: CA District: 8

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: 24339685

Date of Disbursement

07 / 21 / 2006

Amount of Each Disbursement this Period

1000.00

Re-election to US House
of Reps

Full Name (Last, First, Middle Initial)

B. Carper For Senate

Mailing Address 240 North James Street Suite 100a

City Newport State DE Zip Code 19804

Purpose of Disbursement
Re-election to US Senate

Candidate Name
Sen. Thomas Carper

Office Sought: ☐ House
☒ Senate
☐ President

State: DE District: 2

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: 24349157

Date of Disbursement

07 / 24 / 2006

Amount of Each Disbursement this Period

500.00

Re-election to US Senate

Full Name (Last, First, Middle Initial)

C. Ron Lewis For Congress

Mailing Address PO Box 307

City Elizabethtown State KY Zip Code 42702

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Rep. Ron Lewis

Office Sought: ☒ House
☐ Senate
☐ President

State: KY District: 2

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: 24349159

Date of Disbursement

07 / 24 / 2006

Amount of Each Disbursement this Period

1000.00

Re-election to US House
of Reps

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Hall For Congress Committee (Ralph Hall - Rockwall)

Mailing Address Post Office Box 711

City State Zip Code
 Rockwall TX 75087

Purpose of Disbursement
 Re-election to US House of Reps

Candidate Name
 Rep. Ralph Hall

011
 Category/
 Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2005
☐ Primary ☐ General
☒ Other (specify) ▼
 2006 General Electio

State: TX District: 4

Transaction ID: 24349177

Date of Disbursement

07 / 24 / 2006

Amount of Each Disbursement this Period

1000.00

Re-election to US House
 of Reps

Full Name (Last, First, Middle Initial)

B. Dave Camp For Congress 2006

Mailing Address P.O. Box 423

City State Zip Code
 Midland MI 48640

Purpose of Disbursement
 Re-election to US House of Reps

Candidate Name
 Rep. David Camp

011
 Category/
 Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 4

Transaction ID: 24349196

Date of Disbursement

07 / 24 / 2006

Amount of Each Disbursement this Period

2000.00

Re-election to US House
 of Reps

Full Name (Last, First, Middle Initial)

C. John Spratt For Congress

Mailing Address PO Box 636

City State Zip Code
 Annandale VA 22003

Purpose of Disbursement

Candidate Name
 Rep. John Spratt, Jr.

011
 Category/
 Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: SC District: 5

Transaction ID: 24349201

Date of Disbursement

07 / 24 / 2006

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Solis For Congress

Mailing Address 6380 Wilshire Blvd. #1612

City Los Angeles State CA Zip Code 90048

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Rep. Hilda Solis

Office Sought: ☒ House
☐ Senate
☐ President

State: CA District: 32

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: 24400383

Date of Disbursement

08 / 03 / 2006

Amount of Each Disbursement this Period

1000.00

Re-election to US House
of Reps

Full Name (Last, First, Middle Initial)

B. Nelson For U S Senate

Mailing Address PO Box 540154

City Omaha State NE Zip Code 68154

Purpose of Disbursement
Re-election to US Senate

Candidate Name
Sen. Ben Nelson

Office Sought: ☐ House
☒ Senate
☐ President

State: NE District: 2

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: 24430342

Date of Disbursement

08 / 10 / 2006

Amount of Each Disbursement this Period

2500.00

Re-election to US Senate

Full Name (Last, First, Middle Initial)

C. Hastert for Congress Committee

Mailing Address P.O. Box 625

City Batavia State IL Zip Code 60510

Purpose of Disbursement
Re election to US House of Reps

Candidate Name
Dennis Hastert

Office Sought: ☒ House
☐ Senate
☐ President

State: IL District: 14

Disbursement For: 2005
☐ Primary ☐ General
☒ Other (specify) ▼
2006 General Electio

011
Category/
Type

Transaction ID: 24595286

Date of Disbursement

09 / 11 / 2006

Amount of Each Disbursement this Period

1000.00

Re election to US House
of Reps

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Johnson for Congress Committee

Mailing Address P.O. Box 1986

City
New Britain

State
CT

Zip Code
06050

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Nancy L. Johnson

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: CT District: 6

Transaction ID: 24597691

Date of Disbursement

09 / 11 / 2006

Amount of Each Disbursement this Period

1000.00

Re-election to US House
of Reps

Full Name (Last, First, Middle Initial)

B. Friends of Blanche Lincoln

Mailing Address P.O. Box 77572

City
Washington

State
DC

Zip Code
20013

Purpose of Disbursement
Re-election to US Senate

Candidate Name
Blanche Lambert Lincoln

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: AR District: 1

Transaction ID: 24597694

Date of Disbursement

09 / 11 / 2006

Amount of Each Disbursement this Period

1000.00

Re-election to US Senate

Full Name (Last, First, Middle Initial)

C. Sue Myrick For Congress

Mailing Address 1850 E. Third Street,
Suite 350

City
Charlotte

State
NC

Zip Code
28204

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Sue Myrick

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: NC District: 9

Transaction ID: 24597693

Date of Disbursement

09 / 11 / 2006

Amount of Each Disbursement this Period

1000.00

Re-election to US House
of Reps

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Ramstad Volunteer Committee

Mailing Address 8100 Penn Avenue South
Suite #104

City Bloomington State MN Zip Code 55431

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Jim Ramstad

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2005
☐ Primary ☐ General
☒ Other (specify) ▼

State: MN District: 3

2006 General Electio

Transaction ID: 24596196

Date of Disbursement

09 / 11 / 2006

Amount of Each Disbursement this Period

1000.00

Re-election to US House
of Reps

Full Name (Last, First, Middle Initial)

B. Brown-Waite For Congress

Mailing Address 704 Ponce De Leon Blvd

City Brooksville State FL Zip Code 34601

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Rep. Virginia Brown-Waite

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: FL District: 5

Transaction ID: 24597687

Date of Disbursement

09 / 11 / 2006

Amount of Each Disbursement this Period

1000.00

Re-election to US House
of Reps

Full Name (Last, First, Middle Initial)

C. Hoyer For Congress

Mailing Address 7905 Malcolm Road Suite 102

City Clinton State MD Zip Code 20735

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Rep. Steny Hoyer

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: MD District: 5

Transaction ID: 24597686

Date of Disbursement

09 / 11 / 2006

Amount of Each Disbursement this Period

2000.00

Re-election to US House
of Reps

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Andrews For Congress Committee

Mailing Address 215 Fourth Avenue
Suite 200

City Haddon Heights State NJ Zip Code 08035

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Rep. Robert Andrews

Office Sought: ☒ House
☐ Senate
☐ President

State: NJ District: 1

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 24595273

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Re-election to US House
of Reps

Full Name (Last, First, Middle Initial)

B. Talent For Senate Committee

Mailing Address 147 N Meramec Suite 100

City St Louis State MO Zip Code 63105

Purpose of Disbursement
Re-election to US Senate

Candidate Name
Sen. James Talent

Office Sought: ☐ House
☒ Senate
☐ President

State: MO District: 2

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 24595382

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

Re-election to US Senate

Full Name (Last, First, Middle Initial)

C. Committee To Re-Elect Bobby Jindal Inc

Mailing Address PO Box 8628

City Metairie State LA Zip Code 70011

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Rep. Bobby Jindal

Office Sought: ☒ House
☐ Senate
☐ President

State: LA District: 1

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 24595711

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Re-election to US House
of Reps

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Prosperity PAC

Mailing Address 429 North Saint Asaph

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Leadership PAC for Rep. Paul Ryan

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 24595246

Date of Disbursement

09 / 11 / 2006

Amount of Each Disbursement this Period

1000.00

Leadership PAC for Rep.
Paul Ryan

Full Name (Last, First, Middle Initial)

B. Wally Herger For Congress Committee

Mailing Address P.O. Box 1500

City Chico State CA Zip Code 95927

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Rep. Wally Herger

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: CA District: 2

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 24595254

Date of Disbursement

09 / 11 / 2006

Amount of Each Disbursement this Period

1000.00

Re-election to US House
of Reps

Full Name (Last, First, Middle Initial)

C. Hawkeye PAC, The

Mailing Address PO Box 7255

City Des Moines State IA Zip Code 50309

Purpose of Disbursement
Leadership PAC Sen Chuck Grassley

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 24595291

Date of Disbursement

09 / 11 / 2006

Amount of Each Disbursement this Period

1000.00

Leadership PAC Sen Chuck
Grassley

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Pryce for Congress

Mailing Address 340 East Gay Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Deborah Pryce

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 15

Transaction ID: 24613938

Date of Disbursement

09 / 12 / 2006

Amount of Each Disbursement this Period

1000.00

Re-election to US House
of Reps

Full Name (Last, First, Middle Initial)

B. Citizens For Rush

Mailing Address 3 First Natl. Plaza, 70 W. Madison

City Chicago State IL Zip Code 60616

Purpose of Disbursement
US House of Reps

Candidate Name
Bobby L. Rush

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 1

Transaction ID: 24613841

Date of Disbursement

09 / 12 / 2006

Amount of Each Disbursement this Period

2000.00

US House of Reps

Full Name (Last, First, Middle Initial)

C. Heather Wilson for Congress

Mailing Address P.O. Box 14070

City Albuquerque State NM Zip Code 87102

Purpose of Disbursement
Candidate contribution - US House of Rep

Candidate Name
Heather A. Wilson

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: NM District: 1

Transaction ID: 24613943

Date of Disbursement

09 / 12 / 2006

Amount of Each Disbursement this Period

1000.00

Candidate contribution -
US House of Reps

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Snowe For Senate

Mailing Address PO Box 2006

City
Portland

State
ME

Zip Code
04104

Purpose of Disbursement
Re-election to US Senate

Candidate Name
Sen. Olympia Snowe

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: ME District: 1

Transaction ID: 24613928

Date of Disbursement

09 / 12 / 2006

Amount of Each Disbursement this Period

2000.00

Re-election to US Senate

Full Name (Last, First, Middle Initial)

B. Feinstein For Senate

Mailing Address 601 S Glenoaks Blvd #211

City
Burbank

State
CA

Zip Code
91502

Purpose of Disbursement

Candidate Name
Sen. Dianne Feinstein

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 1

Transaction ID: 24613869

Date of Disbursement

09 / 12 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Pete Stark Re-Election Committee

Mailing Address P.O. Box 8331

City
Fremont

State
CA

Zip Code
94537

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Rep. Fortney Stark

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 13

Transaction ID: 24613918

Date of Disbursement

09 / 12 / 2006

Amount of Each Disbursement this Period

1000.00

Re-election to US House
of Reps

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Santorum Victory Committee

Mailing Address 1203 Portner Road

City
Arlington

State
VA

Zip Code
22202

Purpose of Disbursement
Candidate contribution - US Senate

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 24614009

Date of Disbursement

09 / 12 / 2006

Amount of Each Disbursement this Period

2500.00

Candidate contribution -
US Senate

Full Name (Last, First, Middle Initial)

B. Jim Gerlach For Congress Committee

Mailing Address PO Box 87

City
Uwchland

State
PA

Zip Code
19480

Purpose of Disbursement
Candidate contribution - US House of Rep

Candidate Name
Rep. James Gerlach

011

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: PA District: 6

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 24614026

Date of Disbursement

09 / 12 / 2006

Amount of Each Disbursement this Period

1000.00

Candidate contribution -
US House of Reps

Full Name (Last, First, Middle Initial)

C. Friends of Clay Shaw

Mailing Address P.O. Box 2188

City
Ft. Lauderdale

State
FL

Zip Code
33303

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
E. Clay Shaw, Jr.

011

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: FL District: 22

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 24621042

Date of Disbursement

09 / 13 / 2006

Amount of Each Disbursement this Period

1000.00

Re-election to US House
of Reps

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Rogers For Congress

Mailing Address Post Office Box 581

City Brighton State MI Zip Code 48116

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Rep. Michael Rogers

Office Sought: ☒ House
☐ Senate
☐ President

State: MI District: 8

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 24621051

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

Re-election to US House
of Reps

Full Name (Last, First, Middle Initial)

B. Menendez For Senate

Mailing Address P.O. Box 848

City Union City State NJ Zip Code 07087

Purpose of Disbursement
Election to US Senate

Candidate Name
Rep. Robert Menendez

Office Sought: ☒ House
☐ Senate
☐ President

State: NJ District: 13

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 24621097

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3000.00

Election to US Senate

Full Name (Last, First, Middle Initial)

C. Gard For Congress

Mailing Address PO Box 277

City Green Bay State WI Zip Code 54305

Purpose of Disbursement
Election to US House of Reps

Candidate Name
Mr. John Gard

Office Sought: ☒ House
☐ Senate
☐ President

State: WI District: 8

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 24621038

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Election to US House of
Reps

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Boswell For Congress

Mailing Address PO Box 6220

City
Des Moines

State
IA

Zip Code
50309

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Rep. Leonard Boswell

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: IA District: 3

Transaction ID: 24621045

Date of Disbursement

09 / 13 / 2006

Amount of Each Disbursement this Period

1000.00

Re-election to US House
of Reps

Full Name (Last, First, Middle Initial)

B. J.D. Hayworth for Congress

Mailing Address P.O. Box 14273

City
Scottsdale

State
AZ

Zip Code
85267

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
J.D. Hayworth

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: AZ District: 6

Transaction ID: 24629444

Date of Disbursement

09 / 18 / 2006

Amount of Each Disbursement this Period

1000.00

Re-election to US House
of Reps

Full Name (Last, First, Middle Initial)

C. Salazar For Senate

Mailing Address PO Box 600

City
Denver

State
CO

Zip Code
80201

Purpose of Disbursement
Re-election to US Senate

Candidate Name
Sen. Ken Salazar

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: CO District: 2

Transaction ID: 24629460

Date of Disbursement

09 / 18 / 2006

Amount of Each Disbursement this Period

1000.00

Re-election to US Senate

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Chocola For Congress Inc

Mailing Address PO Box 6728

City
South Bend

State
IN

Zip Code
46660

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Rep. Christopher Chocola

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: IN District: 2

Transaction ID: 24629466

Date of Disbursement

09 / 18 / 2006

Amount of Each Disbursement this Period

1000.00

Re-election to US House
of Reps

Full Name (Last, First, Middle Initial)

B. Charles A Gonzalez Congressional Campaign

Mailing Address PO Box 12612

City
San Antonio

State
TX

Zip Code
78212

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Rep. Charles Gonzalez

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District: 20

Transaction ID: 24629491

Date of Disbursement

09 / 18 / 2006

Amount of Each Disbursement this Period

1000.00

Re-election to US House
of Reps

Full Name (Last, First, Middle Initial)

C. Friends Of Lois Capps

Mailing Address PO Box 23940

City
Santa Barbara

State
CA

Zip Code
93121

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Rep. Lois Capps

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 23

Transaction ID: 24629523

Date of Disbursement

09 / 18 / 2006

Amount of Each Disbursement this Period

1000.00

Re-election to US House
of Reps

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Mike Thompson For Congress

Mailing Address 5429 Madison Avenue

City Sacramento State CA Zip Code 95841

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Rep. Michael Thompson

Office Sought: ☒ House
☐ Senate
☐ President

State: CA District: 1

Disbursement For: 2005
☐ Primary ☐ General
☒ Other (specify) ▼

2006 General Electio

Transaction ID: 24629528

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Re-election to US House
of Reps

Full Name (Last, First, Middle Initial)

B. Friends of Joe Lieberman

Mailing Address PO Box 4322
State House Square

City Hamden State CT Zip Code 06514

Purpose of Disbursement
Re-election to US Senate

Candidate Name
Joseph I. Lieberman

Office Sought: ☐ House
☒ Senate
☐ President

State: CT District: 2

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 24639789

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

Re-election to US Senate

Full Name (Last, First, Middle Initial)

C. Earl Pomeroy for Congress

Mailing Address P.O. Box 75214

City Washington State DC Zip Code 20013-5214

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Earl Pomeroy

Office Sought: ☒ House
☐ Senate
☐ President

State: ND District: 1

Disbursement For: 2005
☐ Primary ☐ General
☒ Other (specify) ▼

2006 General Electio

Transaction ID: 24639725

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Re-election to US House
of Reps

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

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

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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Friends Of John Tanner

Mailing Address Post Office Box 3301

City Alexandria State VA Zip Code 22302

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
John S. Tanner

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President
Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: TN District: 8

Transaction ID: 24639796

Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

2000.00

Re-election to US House
of Reps

Full Name (Last, First, Middle Initial)

B. Tiberi For Congress

Mailing Address 2021 East Dublin Granville Road
Suite 2000

City Columbus State OH Zip Code 43229

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Rep. Patrick Tiberi

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President
Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 12

Transaction ID: 24639770

Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

2000.00

Re-election to US House
of Reps

Full Name (Last, First, Middle Initial)

C. Rangel For Congress

Mailing Address PO Box 5577
Manhattanville Sta

City New York State NY Zip Code 10027

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Rep. Charles Rangel

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President
Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 15

Transaction ID: 24639782

Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

2000.00

Re-election to US House
of Reps

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

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

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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Anna Eshoo For Congress

Mailing Address 555 Capitol Mall Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Rep. Anna Eshoo

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 14

Transaction ID: 24639744

Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

1000.00

Re-election to US House
of Reps

Full Name (Last, First, Middle Initial)

B. Friends Of Jim Clyburn

Mailing Address Post Office Box 12567

City Columbia State SC Zip Code 29211

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Rep. James Clyburn

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: SC District: 6

Transaction ID: 24639500

Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

2000.00

Re-election to US House
of Reps

Full Name (Last, First, Middle Initial)

C. Bachmann For Congress

Mailing Address Box 49756

City Blaine State MN Zip Code 55449

Purpose of Disbursement
Election to US House of Reps

Candidate Name
Michele Bachmann

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: MN District: 6

Transaction ID: 24639800

Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

1000.00

Election to US House of
Reps

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

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

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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Committee for Preservation of Capitalism

Mailing Address PO Box 22614

City Alexandria State VA Zip Code 22304

Purpose of Disbursement
Leadership PAC for Sen Jim McCrery

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 24655069

Date of Disbursement

09 / 21 / 2006

Amount of Each Disbursement this Period

5000.00

Leadership PAC for Sen Jim
McCrery

Full Name (Last, First, Middle Initial)

B. Friends of George Allen

Mailing Address P.O Box 573

City Richmond State VA Zip Code 23218

Purpose of Disbursement
Re-election to US Senate

Candidate Name
George Allen

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

State: VA District: 2

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 24655065

Date of Disbursement

09 / 21 / 2006

Amount of Each Disbursement this Period

2000.00

Re-election to US Senate

Full Name (Last, First, Middle Initial)

C. Becerra For Congress

Mailing Address P.O. Box 261060

City Los Angeles State CA Zip Code 90026

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Rep. Xavier Becerra

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: CA District: 31

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 24655085

Date of Disbursement

09 / 21 / 2006

Amount of Each Disbursement this Period

1000.00

Re-election to US House
of Reps

SUBTOTAL of Disbursements This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Chet Edwards For Congress

Mailing Address PO Box 23273

City
Waco

State
TX

Zip Code
76702

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Rep. Chet Edwards

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2005
☐ Primary ☐ General
☒ Other (specify) ▼
2006 General Electio

State: TX District: 17

Transaction ID: 24655072

Date of Disbursement

09 / 21 / 2006

Amount of Each Disbursement this Period

1000.00

Re-election to US House
of Reps

Full Name (Last, First, Middle Initial)

B. Weldon Victory Committee

Mailing Address P. O. Box 1992

City
Media

State
PA

Zip Code
19063

Purpose of Disbursement

Candidate Name
Rep. Curt Weldon

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 7

Transaction ID: 24655078

Date of Disbursement

09 / 21 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Pryce for Congress

Mailing Address 340 East Gay Street

City
Columbus

State
OH

Zip Code
43215

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Deborah Pryce

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 15

Transaction ID: 24664822

Date of Disbursement

09 / 26 / 2006

Amount of Each Disbursement this Period

2000.00

Re-election to US House
of Reps

SUBTOTAL of Disbursements This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Talent For Senate Committee

Mailing Address 147 N Meramec Suite 100

City
St Louis

State
MO

Zip Code
63105

Purpose of Disbursement
Re-election to US Senate

011

Category/
Type

Candidate Name
Sen. James Talent

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: MO District: 2

Transaction ID: 24664827

Date of Disbursement

09 / 26 / 2006

Amount of Each Disbursement this Period

1000.00

Re-election to US Senate

Full Name (Last, First, Middle Initial)

B. Gard For Congress

Mailing Address PO Box 277

City
Green Bay

State
WI

Zip Code
54305

Purpose of Disbursement
Re-election to US House of Reps

011

Category/
Type

Candidate Name
Mr. John Gard

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: WI District: 8

Transaction ID: 24664842

Date of Disbursement

09 / 26 / 2006

Amount of Each Disbursement this Period

2000.00

Re-election to US House of Reps

Full Name (Last, First, Middle Initial)

C. Bachmann For Congress

Mailing Address Box 49756

City
Blaine

State
MN

Zip Code
55449

Purpose of Disbursement
Re-election to US House of Reps

011

Category/
Type

Candidate Name
Michele Bachmann

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: MN District: 6

Transaction ID: 24664834

Date of Disbursement

09 / 26 / 2006

Amount of Each Disbursement this Period

1000.00

Re-election to US House of Reps

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Chafee For Senate

Mailing Address PO Box 7329

City
Warwick

State
RI

Zip Code
02887

Purpose of Disbursement
Re-election to US Senate

Candidate Name
Sen. Lincoln Chafee

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: RI District: 2

Transaction ID: 24664815

Date of Disbursement

09 / 26 / 2006

Amount of Each Disbursement this Period

2500.00

Re-election to US Senate

Full Name (Last, First, Middle Initial)

B. Chocola For Congress Inc

Mailing Address PO Box 6728

City
South Bend

State
IN

Zip Code
46660

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Rep. Christopher Chocola

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: IN District: 2

Transaction ID: 24675468

Date of Disbursement

09 / 28 / 2006

Amount of Each Disbursement this Period

1000.00

Re-election to US House
of Reps

Full Name (Last, First, Middle Initial)

C. Porter For Congress

Mailing Address PO Box 26087

City
Las Vegas

State
NV

Zip Code
89126

Purpose of Disbursement
Re-election to US House of Reps

Candidate Name
Rep. Jon Porter

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: NV District: 3

Transaction ID: 24675464

Date of Disbursement

09 / 28 / 2006

Amount of Each Disbursement this Period

1000.00

Re-election to US House
of Reps

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

107000.00

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Strickland for Governor

Mailing Address 42 Park Dr

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Ted Strickland, GOVERNOR OH

Candidate Name
Ted Strickland

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: OH District: Disbursement For: 2005
☐ Primary ☐ General
☒ Other (specify) ▼
2006 General Electio

Transaction ID: 24240375

Date of Disbursement

07 / 05 / 2006

Amount of Each Disbursement this Period

1000.00

Ted Strickland, GOVERNOR
OH

Full Name (Last, First, Middle Initial)

B. Ohioans for Blackwell

Mailing Address 172 E. State St.
6th Floor

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Ken Blackwell, GOVERNOR OH

Candidate Name
Ken Blackwell

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: OH District: Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 24240372

Date of Disbursement

07 / 05 / 2006

Amount of Each Disbursement this Period

1000.00

Ken Blackwell, GOVERNOR
OH

Full Name (Last, First, Middle Initial)

C. Friends of Todd Eachus

Mailing Address RR4 Box 4289

City Drums State PA Zip Code 18222

Purpose of Disbursement
Todd Eachus, STATE HOUSE 116th PA

Candidate Name
Representative Todd Eachus

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
State: PA District: 11 Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 24485892

Date of Disbursement

08 / 17 / 2006

Amount of Each Disbursement this Period

2500.00

Todd Eachus, STATE HOUSE
116th PA

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Friends of Mario Civera

Mailing Address PO Box 882

City
Pilgrim Gardens

State
PA

Zip Code
19026

Purpose of Disbursement
Mario Civera, STATE HOUSE 164th PA

Candidate Name
Representative Mario Civera, Jr.

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 16

Transaction ID: 24486089

Date of Disbursement

08 / 17 / 2006

Amount of Each Disbursement this Period

1000.00

Mario Civera, STATE HOUSE
164th PA

B. Committee to Elect Mike Veon

Mailing Address P.O. Box 327

City
Beaver Falls

State
PA

Zip Code
15010

Purpose of Disbursement
Michael Veon, STATE HOUSE 14th PA

Candidate Name
Representative Michael Veon

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 14

Transaction ID: 24486236

Date of Disbursement

08 / 17 / 2006

Amount of Each Disbursement this Period

1000.00

Michael Veon, STATE HOUSE
14th PA

C. Friends of Ted Erickson

Mailing Address 101 West Baltimore Ave., 2nd Floor

City
Media

State
PA

Zip Code
19063

Purpose of Disbursement
Edwin Erickson, STATE SENATE PA

Candidate Name
PA Sen. Edwin Erickson

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 26

Transaction ID: 24486458

Date of Disbursement

08 / 17 / 2006

Amount of Each Disbursement this Period

1000.00

Edwin Erickson, STATE SEN-
ATE PA

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 105 / 105

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Friends of George Kenney

Mailing Address P.O. Box 11524

City
Philadelphia

State
PA

Zip Code
19116

Purpose of Disbursement
George Kenney, STATE HOUSE 170th PA

Candidate Name
Representative George Kenney, Jr.

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 17

Transaction ID: 24486855

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

George Kenney, STATE HOUSE
170th PA

Full Name (Last, First, Middle Initial)

B. Perdue for a New Georgia

Mailing Address 5600 Roswell Road
Suite 250 East

City
Atlanta

State
GA

Zip Code
30342

Purpose of Disbursement
Sonny Perdue, GOVERNOR GA

Candidate Name
Sonny Perdue

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: GA District:

Transaction ID: 24621236

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

Sonny Perdue, GOVERNOR
GA

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

10500.00