

**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

United Health Group Incorporated Political Fund

ADDRESS (number and street)

8900 Bran 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

X

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)

X

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

11

02

2004

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

10

01

2004

through

10

13

2004

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

18

2004

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

United Health Group Incorporated Political Fund

Report Covering the Period: From: ^M10 ^Y01 ^Y2004 To: ^M10 ^Y13 ^Y2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^Y 2004 ^Y		33920.24
(b) Cash on Hand at Beginning of Reporting Period	35712.99	
(c) Total Receipts (from Line 19)	11276.96	276844.71
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	46989.95	310764.95
<hr/>		
7. Total Disbursements (from Line 31)	10700.00	274475.00
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	36289.95	36289.95
<hr/>		
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

United Health Group Incorporated Political Fund

Report Covering the Period: From: ^M10 ⁻01 ⁻2004 To: ^M10 ⁻13 ⁻2004

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	10155.18	
(ii) Unitemized	1121.78	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	11276.96	275344.71
(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)	11276.96	275344.71
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	1500.00
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))	11276.96	276844.71
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	11276.96	276844.71

DETAILED SUMMARY PAGE

of Disbursements

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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)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6500.00	254775.00
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.....	2200.00	19700.00
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 ActMty (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))..	10700.00	274475.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	10700.00	274475.00

DETAILED SUMMARY PAGE
of Disbursements

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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)	11276.96	275344.71
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11276.96	275344.71
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 / 82
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. KEVIN J CASEY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road E. Suite 305 MNC08-T302		Transaction ID: PR115983649670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer UnitedHealth Group, Inc.	Occupation Senior VP, Uniprise Health Plan Ops	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) B. PAUL J GRANDPRE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 450 Columbus Blvd 3NB-A		Transaction ID: PR115983719670
City Hartford	State CT	Zip Code 06115-0450
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer UnitedHealth Group, Inc.	Occupation Director, Customer Admin Svcs	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) C. ROBERT G HARMON, MD		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 10467 White Granite Dr. Suite 300, VA31-1000		Transaction ID: PR115983749670
City Oakton	State VA	Zip Code 22124-0450
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation National Medical Director	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

SUBTOTAL of Receipts This Page (optional)	▶	40.00
TOTAL This Period (last page this line number only)	▶	

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

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FOR LINE NUMBER: PAGE 7 / 82
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. JOHN F STEVENSON		Date of Receipt M / D / Y
Mailing Address 450 Columbus Blvd SNB-B		Transaction ID: PR115983939670
City Hartford	State Zip Code CT 06115-0450	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 9.80
Name of Employer UnitedHealth Group, Inc.	Occupation Associate General Counsel	P/R Deduction (\$9.80 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 215.60	

Full Name (Last, First, Middle Initial) B. JACK A WICKENS		Date of Receipt M / D / Y
Mailing Address 278 Franklin Rd, Suite 280 TN007-1000		Transaction ID: PR115983959670
City Brentwood	State Zip Code TN 37024	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation SVP Regional Operations	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 848.12	

Full Name (Last, First, Middle Initial) C. ROB VHERNDON, III		Date of Receipt M / D / Y
Mailing Address 415 N. McKinley, Suite 820		Transaction ID: PR115984059670
City Little Rock	State Zip Code AR 72205	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer United HealthCare Corpora- tion	Occupation CEO, UHC of Arkansas	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 348.14	

SUBTOTAL of Receipts TN's Page (optional)	67.49
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 8 / 82
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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. ROBERT CHANNING WHEELER		Date of Receipt M / D / Y
Mailing Address 450 Columbus Blvd CT030-12BB		Transaction ID: PR115984219670
City Hartford	State CT	Zip Code 06115-0450
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 180.00
Name of Employer UnitedHealth Group, Inc.	Occupation Uniprise CEO	P/R Deduction (\$180.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3960.00	

Full Name (Last, First, Middle Initial) B. PETER M LANDAU		Date of Receipt M / D / Y
Mailing Address 505 Boices Lane		Transaction ID: PR115978679670
City Kingston	State NY	Zip Code 12401
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer UnitedHealth Group, Inc.	Occupation Director of OPS, Kingston Service Cent	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) C. MOLLIE CHAPMAN		Date of Receipt M / D / Y
Mailing Address 4501 Erskine Road OH035-3035		Transaction ID: PR115978059670
City Cincinnati	State OH	Zip Code 45242
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer UnitedHealth Group, Inc.	Occupation Manager, Provider Relations	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional)	200.00
TOTAL This Period (last page this line number only)	

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

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FOR LINE NUMBER: PAGE 9 / 82
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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. KEN L HOVERMAN		Date of Receipt M / D / Y
Mailing Address 385D Olentangy River Rd OH020-3010		Transaction ID: PR115979099670
City Columbus	State OH	Zip Code 43214-1138
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer UnitedHealth Group, Inc.	Occupation OOO UHC Ohio	P/R Deduction (\$30.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 660.00	

Full Name (Last, First, Middle Initial) B. PAMELA A TULUMELLO		Date of Receipt M / D / Y
Mailing Address 1949 E. Sunshine, Suite 300 MO015-1000		Transaction ID: PR115979319670
City Springfield	State MO	Zip Code 65804
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer UnitedHealth Group, Inc.	Occupation Director, Group Services Admin	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) C. ROBERT J SHEEHY		Date of Receipt M / D / Y
Mailing Address 9900 Bren Road East MND08-W3D1		Transaction ID: PR115979409670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 190.00
Name of Employer UnitedHealth Group, Inc.	Occupation Executive Management	P/R Deduction (\$190.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4180.00	

SUBTOTAL of Receipts This Page (optional)	▶	230.00
TOTAL This Period (last page this line number only)	▶	

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

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. DEBORAH S STREB		Date of Receipt M / D / Y
Mailing Address 365D Olentangy River Rd. OH020-3010		Transaction ID: PR115979419670
City Columbus	State OH	Zip Code 43214-1138
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer UnitedHealth Group, Inc.	Occupation	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) B. BRETT L BABY		Date of Receipt M / D / Y
Mailing Address 365D Olentangy River Rd. OH020-3010		Transaction ID: PR115979429670
City Columbus	State OH	Zip Code 43214-1138
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11.54
Name of Employer UnitedHealth Group, Inc.	Occupation Director, Provider Relations/Contracti	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 253.88	

Full Name (Last, First, Middle Initial) C. ANTHONY J KAZLAUSKAS		Date of Receipt M / D / Y
Mailing Address 475 Kilvart St, Suite 310 RI010-3400		Transaction ID: PR115979489670
City Warwick	State RI	Zip Code 02888-1392
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Medical Director	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

SUBTOTAL of Receipts This Page (optional)	41.54
TOTAL This Period (last page this line number only)	

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

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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. GEORGE D SHAFER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 8801 Centerville business Pkwy OH010-3005		Transaction ID: PR115979499670
City Dayton	State OH	Zip Code 45459-8028
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation CEO Dayton Ohio Plan	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

Full Name (Last, First, Middle Initial) B. MICHAEL J KOEHLER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 106 Farmers Alley, Suite 400 MI012-3200		Transaction ID: PR115979539670
City Kalamazoo	State MI	Zip Code 49005-0271
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer UnitedHealth Group, Inc.	Occupation CEO PHP Southwest Michigan	P/R Deduction (\$40.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 880.00	

Full Name (Last, First, Middle Initial) C. WILLIAM D FELSING		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 10701 W. Research Drive WI130-H420		Transaction ID: PR115979589670
City Milwaukee	State WI	Zip Code 53228-0649
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation VP&COO PrimeCare HealthPlan Inc.	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 848.12	

SUBTOTAL of Receipts This Page (optional)	▶	98.46
TOTAL This Period (last page this line number only)	▶	

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

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

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. R EDWARD BERGMARK		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 8300 Olson Memorial Hwy MND010-S203		Transaction ID: PR115979609670
City Golden Valley	State MN	Zip Code 55427
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.47
Name of Employer UnitedHealth Group, Inc.	Occupation Vice President CEO IHR (OPTUM)	P/R Deduction (\$38.47 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 846.34	

Full Name (Last, First, Middle Initial) B. RONALD B COLBY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Rd East MND08-E211		Transaction ID: PR115979629670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 175.00
Name of Employer UnitedHealth Group, Inc.	Occupation Senior VP, Insurance & Product Mgmt	P/R Deduction (\$175.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3850.00	

Full Name (Last, First, Middle Initial) C. LYNNE MONTAGUE-CLOUSE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 12125 Technology Drive MND02-D181		Transaction ID: PR115979639670
City Eden Prairie	State MN	Zip Code 55344
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation International HealthCare Consultant	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

SUBTOTAL of Receipts This Page (optional)	▶	233.47
TOTAL This Period (last page this line number only)	▶	

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

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FOR LINE NUMBER: PAGE 13 / 82
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. MARY A WARNE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 255D University Ave W, S#401S MNO40-2500		Transaction ID: PR115979719670
City St. Paul	State MN	Zip Code 55114-1804
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer UnitedHealth Group, Inc.	Occupation Clinical Team Leader	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) B. CARLA M MUGGIO		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address One South Wacker ILD14-3605		Transaction ID: PR115979829670
City Chicago	State IL	Zip Code 60606
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer UnitedHealth Group, Inc.	Occupation VP Operations	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 423.08	

Full Name (Last, First, Middle Initial) C. CHERYL A POPECK		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 800 N Magnolia Ave., S#600 FLD29-1029		Transaction ID: PR115979949670
City Orlando	State FL	Zip Code 32803
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer UnitedHealth Group, Inc.	Occupation Director of Operations	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional)	▶	39.23
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 / 82
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. HERBERT L WHESTINE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 513 Eaton St. MN003-1000		Transaction ID: PR115980389670
City State Zip Code St. Paul MN 55107	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 9.61
Name of Employer UnitedHealth Group, Inc.	Occupation Aviation Department Manager Aggregate Year-to-Date ▼ 211.42	P/R Deduction (\$9.61 Bi-W- eekly)
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. BRIAN R BELLOWS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 1175 Post Rd East		Transaction ID: PR115980389670
City State Zip Code Westport CT 06880	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 15.00
Name of Employer UnitedHealth Group, Inc.	Occupation Vice President Sales Strategic Service Aggregate Year-to-Date ▼ 330.00	P/R Deduction (\$15.00 Bi- Weekly)
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. RUTH J KAPLAN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 425 Market St. 27th Floor CA035-2707		Transaction ID: PR115980389670
City State Zip Code San Francisco CA 94105	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 11.54
Name of Employer UnitedHealth Group, Inc.	Occupation UBH VP of Employer Svcs Aggregate Year-to-Date ▼ 253.88	P/R Deduction (\$11.54 Bi- Weekly)
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	36.15
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 / 82
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. CHARLES B SHIPP		Date of Receipt M / D / Y
Mailing Address 3401 West End Avenue Ste670 TN002		Transaction ID: PR115980539670
City Nashville	State TN	Zip Code 37203
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 28.85
Name of Employer UnitedHealth Group, Inc.	Occupation CEO UHC of Tennessee	P/R Deduction (\$28.85 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.06	

Full Name (Last, First, Middle Initial) B. KEITH W NOBLITT		Date of Receipt M / D / Y
Mailing Address 2970 Clairmont Rd #650		Transaction ID: PR115980559670
City Atlanta	State GA	Zip Code 30329-1634
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Strategic Account Executive	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

Full Name (Last, First, Middle Initial) C. JAMES S WATSON		Date of Receipt M / D / Y
Mailing Address 2717 N. 118th Lucile		Transaction ID: PR115980609670
City Omaha	State NE	Zip Code 68164
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer UnitedHealth Group, Inc.	Occupation V.P. Govt Relations, UHC Midlands	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 423.06	

SUBTOTAL of Receipts TN's Page (optional)	68.08
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 / 82
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. DAVID J FALK		Date of Receipt M / D / Y
Mailing Address 2 Penn Plaza Ste 700 NY036-1000		Transaction ID: PR115982029670
City New York	State NY	Zip Code 10121
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 12.50
Name of Employer UnitedHealth Group, Inc.	Occupation Medical Director	P/R Deduction (\$12.50 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) B. ROBERT G HUSSEY		Date of Receipt M / D / Y
Mailing Address 833D Boone Blvd Ste 300 VA30-1030		Transaction ID: PR115982129670
City Vienna	State VA	Zip Code 22182-2624
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation VP, Public Policy & Comm Ovations	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 848.12	

Full Name (Last, First, Middle Initial) C. WILLIAM D YOUNG		Date of Receipt M / D / Y
Mailing Address 800 N. Magnolia Ave Ste 600 FL029-1029		Transaction ID: PR115982139670
City Orlando	State FL	Zip Code 32803
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.45
Name of Employer UnitedHealth Group, Inc.	Occupation Sr. Medical Director	P/R Deduction (\$38.45 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 730.54	

SUBTOTAL of Receipts TNs Page (optional)	89.41
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 / 82

(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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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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. WILLIAM C TRACY		Date of Receipt M / D / Y
Mailing Address 8300 W. 110th Ste 350		Transaction ID: PR115982159670
City	State	Zip Code
Overland	KS	66210
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer UnitedHealth Group, Inc.	Occupation VP Sales	P/R Deduction (\$25.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) B. MICHAEL J HARRINGTON		Date of Receipt M / D / Y
Mailing Address 8300 Olson Memorial Hwy MN10-S203		Transaction ID: PR115982179670
City	State	Zip Code
Golden Valley	MN	55427
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer UnitedHealth Group, Inc.	Occupation Optum-Sales	P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) C. MICHAEL M HAWKINS		Date of Receipt M / D / Y
Mailing Address 1250 Capital of Tx Hwy S. Bldg 1, Ste 400		Transaction ID: PR115982209670
City	State	Zip Code
Austin	TX	78748
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11.54
Name of Employer UnitedHealth Group, Inc.	Occupation Medical Director	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 247.72	

SUBTOTAL of Receipts This Page (optional)	96.54
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

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(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. MARGARET E STERNBERG		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 2307 W. Cone Blvd NC10-3750		Transaction ID: PR115982289670
City Greensboro	State NC	Zip Code 27408
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 28.85
Name of Employer UnitedHealth Group, Inc.	Occupation VP Corp Affairs & Gov't Programs	P/R Deduction (\$28.85 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 634.70	

Full Name (Last, First, Middle Initial) B. RHONDA R BAGBY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 3838 N Causeway Blvd Ste 2100 LA035-1000		Transaction ID: PR115982329670
City Metairie	State LA	Zip Code 70002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer UnitedHealth Group, Inc.	Occupation Dir. of Finance, UHC of AL, LA, & MS	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 392.30	

Full Name (Last, First, Middle Initial) C. CHARLES F WEBER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9705 Data Park Drive MN008-0252		Transaction ID: PR115982349670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer UnitedHealth Group, Inc.	Occupation Information Systems	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional)	▶	58.08
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 10 / 82
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. CAROL M SCHNEEWEIS			Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 8300 Olson Memorial Hwy MND10-S201			Transaction ID: PR115982359670
City Golden Valley	State MN	Zip Code 55427	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer UnitedHealth Group, Inc.	Occupation HealthCare	Aggregate Year-to-Date ▼ 1100.00	P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. JOSEPH A BERRY			Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-S24B			Transaction ID: PR115982379670
City Edina	State MN	Zip Code 55426	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			
Name of Employer UnitedHealth Group, Inc.	Occupation National Medical Director	Aggregate Year-to-Date ▼ 440.00	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. DAVID J LUBBEN			Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Rd East			Transaction ID: PR115982389670
City Minnetonka	State MN	Zip Code 55343	Amount of Each Receipt this Period 192.31
FEC ID number of contributing federal political committee. C			
Name of Employer UnitedHealth Group, Inc.	Occupation General Counsel	Aggregate Year-to-Date ▼ 4230.66	P/R Deduction (\$192.31 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	262.31
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 20 / 82
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. ELISE A GEMEINHARDT		Date of Receipt M / D / Y
Mailing Address 1620 L St. NY #B00 DC030-1000		Transaction ID: PR115982499670
City	State	
Washington	DC	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C		76.92
Name of Employer UnitedHealth Group, Inc.	Occupation VP Federal Affairs	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1384.56	

Full Name (Last, First, Middle Initial) B. BEVERLY H NYCE		Date of Receipt M / D / Y
Mailing Address 450 Columbus Blvd, CT030-1030		Transaction ID: PR115982609670
City	State	
Hartford	CT	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C		115.38
Name of Employer UnitedHealth Group, Inc.	Occupation Senior VP Uniprise	P/R Deduction (\$115.38 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2538.38	

Full Name (Last, First, Middle Initial) C. LAWRENCE J KISSNER		Date of Receipt M / D / Y
Mailing Address 13621 NW 12Th Street FL075-1000		Transaction ID: PR115982689670
City	State	
Sunrise	FL	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C		19.23
Name of Employer UnitedHealth Group, Inc.	Occupation Vice President Sales & Marketing	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 423.08	

SUBTOTAL of Receipts This Page (optional)	211.53
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 / 82
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. RICHARD J MIGLIORI		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 12125 Technology Drive MN002-0145		Transaction ID: PR115982749670
City Eden Prairie	State MN	Zip Code 55344
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group, Inc.	Occupation Senior VP Ingenix Employer Group	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1692.24	

Full Name (Last, First, Middle Initial) B. BARBARA C BUENEMANN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 13855 Riverport Trail MO050-1000		Transaction ID: PR115982879670
City Maryland Heights	State MO	Zip Code 63043
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11.54
Name of Employer UnitedHealth Group, Inc.	Occupation COO UHC of the Midwest, Inc.	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 253.88	

Full Name (Last, First, Middle Initial) C. JEANNINE M RIVET		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road E. MND08-W315		Transaction ID: PR115983009670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.30
Name of Employer UnitedHealth Group, Inc.	Occupation Executive VP/Operations	P/R Deduction (\$192.30 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4230.60	

SUBTOTAL of Receipts This Page (optional)	▶	290.76
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 / 82
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. WILLIAM J ANTHONY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-W130		Transaction ID: PR115983029670
City Minnetonka	State MN	Zip Code 55440-1459
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation V.P. Call Center Operations - Oventions	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 846.12	

Full Name (Last, First, Middle Initial) B. JACK E SHUFF		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 1160 Town Center Dr., Ste 390 NV005-1000		Transaction ID: PR115983059670
City Las Vegas	State NV	Zip Code 89134
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer UnitedHealth Group, Inc.	Occupation Director, Sales and Service	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 423.08	

Full Name (Last, First, Middle Initial) C. MARILYN C NEVIN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-N220		Transaction ID: PR115980749670
City Edina	State MN	Zip Code 55438
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer UnitedHealth Group, Inc.	Occupation Director of Risk Management	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional)	67.69
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 / 82
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. TRACY L BAHL		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 450 Columbus Blvd Uniprise Towers, 12NB		Transaction ID: PR115980849670
City Hartford	State CT	Zip Code 06115
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer UnitedHealth Group, Inc.	Occupation President, Strategic Services Group	P/R Deduction (\$115.38 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2538.36	

Full Name (Last, First, Middle Initial) B. KENNETH A BURDICK		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-W318		Transaction ID: PR115980899670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation VP of Underwriting	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. NANCY G ABELMANN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-N220		Transaction ID: PR115980919670
City Edina	State MN	Zip Code 55440-1459
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11.54
Name of Employer United HealthCare Corpora- tion	Occupation Tax Director	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 253.88	

SUBTOTAL of Receipts This Page (optional)	▶	146.92
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 / 82
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. MARCIA E SMITH		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-W211		Transaction ID: PR115981009670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 9.70
Name of Employer UnitedHealth Group, Inc.	Occupation CEO - Evercare	P/R Deduction (\$9.70 Bi-W- eekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 213.40	

Full Name (Last, First, Middle Initial) B. JOHN P ANTON		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 297D Clairmont Rd Suite 650 GA01D-3360		Transaction ID: PR115981169670
City Atlanta	State GA	Zip Code 30329-1634
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Senior Vice President	P/R Deduction (\$38.46 Bi- Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 848.12	

Full Name (Last, First, Middle Initial) C. SHEILA G LETSCHER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T203		Transaction ID: PR115981209670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer UnitedHealth Group, Inc.	Occupation Attorney	P/R Deduction (\$19.23 Bi- Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 423.06	

SUBTOTAL of Receipts This Page (optional)	67.39
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

FOR LINE NUMBER: PAGE 25 / 82

(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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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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. WILLIAM P WHITELY		Date of Receipt M / D / Y
Mailing Address One South Wacker IL014-0810		Transaction ID: PR115981289670
City Chicago	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.30
Name of Employer UnitedHealth Group, Inc.	Occupation CEO, United HealthCare of Illinois	P/R Deduction (\$192.30 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2615.28	

Full Name (Last, First, Middle Initial) B. WAYNE F COOK		Date of Receipt M / D / Y
Mailing Address 801 Office Center Drive PA020-1008		Transaction ID: PR115981289670
City Fort Washington	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer United HealthGroup	Occupation Accountant AARP	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) C. RICHARD J RASKIN, MD		Date of Receipt M / D / Y
Mailing Address 1375 E 9th St, Suite 1100 OH030-3015		Transaction ID: PR115981359670
City Cleveland	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer UnitedHealth Group, Inc.	Occupation Medical Director	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 423.08	

SUBTOTAL of Receipts TNs Page (optional)	▶	221.53
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 / 82
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. LOIS E QUAM		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-T300		Transaction ID: PR115981379670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.30
Name of Employer UnitedHealth Group, Inc.	Occupation CEO, Ovations	P/R Deduction (\$192.30 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4230.60	

Full Name (Last, First, Middle Initial) B. RICHARD A COLLINS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 450 Columbus Blvd CTD90-1030		Transaction ID: PR115981409670
City Hartford	State CT	Zip Code 06115-0450
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer UnitedHealth Group, Inc.	Occupation Director, Underwriting	P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 848.18	

Full Name (Last, First, Middle Initial) C. THOMAS H LINDQUIST		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T300		Transaction ID: PR115981419670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 153.84
Name of Employer UnitedHealth Group, Inc.	Occupation President, AARP Division, Ovations	P/R Deduction (\$153.84 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2249.91	

SUBTOTAL of Receipts This Page (optional)	▶	396.14
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 27 / 82
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. THOMAS G FAUSTMAN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 450 Columbus Blvd CT030-05BB		Transaction ID: PR115981439670
City Hartford	State CT	Zip Code 06115
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer United Health Group	Occupation V.P. Operations & Services Uniprise	P/R Deduction (\$15.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) B. GLENN J REINHARDT		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 10701 W. Research Drive WI030-S420		Transaction ID: PR115981449670
City Milwaukee	State WI	Zip Code 53226
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer United Health Group, Inc.	Occupation Vice President, Finance and Medicare	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) C. DAVID S WICHMANN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MN008-W304		Transaction ID: PR115981479670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.30
Name of Employer United Health Group, Inc.	Occupation SVP - Corporate Development	P/R Deduction (\$192.30 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4230.60	

SUBTOTAL of Receipts This Page (optional)	▶	217.30
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 / 82
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. SAUL FELDMAN		Date of Receipt M / D / Y
Mailing Address 405 Market Street CA035-2701		Transaction ID: PR115981529670
City San Francisco	State Zip Code CA 94105	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group, Inc.	Occupation CEO United Behavioral Health	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1692.24	

Full Name (Last, First, Middle Initial) B. EUGENE C. CAVANAUGH		Date of Receipt M / D / Y
Mailing Address 450 Columbus Blvd CT030-12NB-BB		Transaction ID: PR115981539670
City Hartford	State Zip Code CT 06115	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group, Inc.	Occupation CFO Uniprise	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1423.02	

Full Name (Last, First, Middle Initial) C. PATRICK J. ERLANDSON		Date of Receipt M / D / Y
Mailing Address 9900 Bren Road E MND08-B315		Transaction ID: PR115981599670
City Minnetonka	State Zip Code MN 55343	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.30
Name of Employer UnitedHealth Group, Inc.	Occupation VP Corporate Controller	P/R Deduction (\$192.30 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4230.60	

SUBTOTAL of Receipts This Page (optional)	346.14
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 28 / 82

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. PIERRE A MCMAHON		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 450 Columbus Blvd CT030-12BB		Transaction ID: PR115981609670
City Hartford	State CT	Zip Code 06115-0430
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer UnitedHealth Group, Inc.	Occupation General Council - Uniprise	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) B. PATRICIA R SAURO		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T500		Transaction ID: PR115981649670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer United Health Group, Inc.	Occupation VP Product Development AARP	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 423.08	

Full Name (Last, First, Middle Initial) C. DANIEL J MCATHIE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road E. MND08-W318		Transaction ID: PR115981659670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer UnitedHealth Group, Inc.	Occupation Senior VP Finance & HealthCare Economi	P/R Deduction (\$100.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2200.00	

SUBTOTAL of Receipts This Page (optional)	▶	129.23
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 / 82
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. WILLIAM A MUNSELL		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road E MNC08-W301		Transaction ID: PR115981669670
City	State	Zip Code
Minnetonka	MN	55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer UnitedHealth Group, Inc.	Occupation Chief Operating Officer	P/R Deduction (\$100.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2200.00	

Full Name (Last, First, Middle Initial) B. JOHN S PENSCHORN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-B092		Transaction ID: PR115981669670
City	State	Zip Code
Minnetonka	MN	55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer UnitedHealth Group, Inc.	Occupation VP Investor Relations	P/R Deduction (\$100.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2200.00	

Full Name (Last, First, Middle Initial) C. GERAFIN F SANDELLA		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 601 Office Center Drive		Transaction ID: PR115981729670
City	State	Zip Code
Ft Washington	PA	19034
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer United Health Group, Inc.	Occupation Director Compliance AARP	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional)	210.00
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 31 / 82
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. PAUL D KALLMEYER		Date of Receipt M / D / Y
Mailing Address 801 Office Center Drive PA020-1011		Transaction ID: PR115981749670
City Ft. Washington	State PA	Zip Code 19034
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer United Health Group	Occupation Attorney	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) B. SHEILA E MCMILLAN		Date of Receipt M / D / Y
Mailing Address 9900 Bren Road East MND08-T300		Transaction ID: PR115981759670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer United Health Group, Inc.	Occupation VP - Finance AARP Division	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 861.50	

Full Name (Last, First, Middle Initial) C. JOHN R MAGH JR		Date of Receipt M / D / Y
Mailing Address 9900 Bren Road East MND08-W130		Transaction ID: PR115981769670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.00
Name of Employer United Health Group, Inc.	Occupation Chief Medical Officer, Evercare	P/R Deduction (\$80.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 430.00	

SUBTOTAL of Receipts This Page (optional)	166.92
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 / 82

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. KEVIN W PEARSON		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5225 Wiley Post Way, Suite 500 UT015-0500		Transaction ID: PR115981789670
City Salt Lake City	State UT	Zip Code 84116
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer UnitedHealth Group, Inc.	Occupation CEO Ingenix Health Intelligence	P/R Deduction (\$75.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1650.00	

Full Name (Last, First, Middle Initial) B. TIMOTHY F RYAN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Rd East MND08-T400		Transaction ID: PR115981789670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.00
Name of Employer UnitedHealth Group	Occupation Segment General Counsel	P/R Deduction (\$19.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 418.00	

Full Name (Last, First, Middle Initial) C. L ROBERT DAPPER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T802		Transaction ID: PR115981809670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 153.85
Name of Employer UnitedHealth Group	Occupation Senior Vice President Human Capital	P/R Deduction (\$153.85 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3384.70	

SUBTOTAL of Receipts This Page (optional)	▶	247.85
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 / 82

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. KELLY J DEKEYSER		Date of Receipt M / D / Y
Mailing Address 450 Columbus Blvd CT030-15NB		Transaction ID: PR115981849670
City Hartford	State Zip Code CT 06103	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer UnitedHealth Group	Occupation Senior VP, Business Process Outsourcin	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 423.06	

Full Name (Last, First, Middle Initial) B. TERRY L CAMERON		Date of Receipt M / D / Y
Mailing Address 5225 Wiley Post Way, Suite 500 UTD15-0500		Transaction ID: PR115981859670
City Salt Lake City	State Zip Code UT 84116	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group	Occupation Senior VP Business Development Inge	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 848.12	

Full Name (Last, First, Middle Initial) C. MARK F LINDSAY		Date of Receipt M / D / Y
Mailing Address 1225 New York Ave DC03D-1000		Transaction ID: PR115981869670
City Washington	State Zip Code DC 20005	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.30
Name of Employer UnitedHealth Group	Occupation Director Business Development	P/R Deduction (\$192.30 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4230.60	

SUBTOTAL of Receipts This Page (optional)	▶	249.99
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 34 / 82
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. MATTHEW M DAVIES		Date of Receipt M / D / Y
Mailing Address 800 N. Magnolia Ave, Suite 800 FL029-1029		Transaction ID: PR115981909670
City Orlando	State FL	Zip Code 32803
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group	Occupation CEO, Health Plans	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 723.04	

Full Name (Last, First, Middle Initial) B. THOMAS J QUIRK		Date of Receipt M / D / Y
Mailing Address 5900 Granite Parkway, ste 900 TX033-1000		Transaction ID: PR115981919670
City Plano	State TX	Zip Code 75024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group	Occupation CEO Dallas/Austin Health Plan	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 732.28	

Full Name (Last, First, Middle Initial) C. CHARLES C PITTS		Date of Receipt M / D / Y
Mailing Address 3700 Colonnade Parkway AL001-0607		Transaction ID: PR115981929670
City Birmingham	State AL	Zip Code 35243
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group	Occupation CEO, UnitedHealthCare of AL, LA & MS	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 848.12	

SUBTOTAL of Receipts TNs Page (optional)	115.38
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 / 82
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. AMY K KNAPP		Date of Receipt M / D / Y
Mailing Address Two Penn Plaza, 7th Floor NY036-1000		Transaction ID: PR115981939670
City New York	State Zip Code NY 10121	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer UnitedHealth Group	Occupation Regional President, Eastern Region, UH	P/R Deduction (\$115.38 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2538.36	

Full Name (Last, First, Middle Initial) B. WILLIAM E MOELLER		Date of Receipt M / D / Y
Mailing Address 233 North Michigan Ave IL014-0300		Transaction ID: PR115981959670
City Chicago	State Zip Code IL 60601	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group	Occupation CEO UnitedHealthcare Illinois	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1348.10	

Full Name (Last, First, Middle Initial) C. LYNELLE IRELAN		Date of Receipt M / D / Y
Mailing Address 333 North Alabama St Ste 350 IND36-1000		Transaction ID: PR115981989670
City Indianapolis	State Zip Code IN 46204	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer UnitedHealth Group, Inc.	Occupation Executive Director LifeMark	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional)	202.30
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 / 82

(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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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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. ROBERT FLESHNER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 4418 East-West Highway MD031-1000		Transaction ID: PR115981979670
City Bethesda	State MD	Zip Code 20817
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group	Occupation CEO UHC of the Mid Atlantic	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 846.12	

Full Name (Last, First, Middle Initial) B. REED V TUCKSON, M.D.		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T902		Transaction ID: PR115981989670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer UnitedHealth Group	Occupation Sr. V.P. Consumer Health & Medical Car	P/R Deduction (\$115.38 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2538.38	

Full Name (Last, First, Middle Initial) C. DONNA L. HOFFMEIER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 1225 New York Ave, Nw, Suite 475 DC03D-1000		Transaction ID: PR116235459670
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 70.00
Name of Employer UnitedHealth Group, Inc.	Occupation Public Affairs	P/R Deduction (\$70.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

SUBTOTAL of Receipts This Page (optional)	▶	223.84
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 37 / 82
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. STEVEN MATTHEWS		Date of Receipt M / D / Y
Mailing Address 7 Hanover Square NY 037-1000		Transaction ID: PR153018949670
City New York	State NY	Zip Code 10004
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer UnitedHealth Group, Inc.	Occupation Public Affairs	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 423.06	

Full Name (Last, First, Middle Initial) B. JESS E SWEELY		Date of Receipt M / D / Y
Mailing Address 8045 Leesburg Pke Ste 650 VA 028-1000		Transaction ID: PR153018979670
City Vienna	State VA	Zip Code 22182
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.31
Name of Employer UnitedHealth Group, Inc.	Occupation Chief Operating Officer	P/R Deduction (\$192.31 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4230.82	

Full Name (Last, First, Middle Initial) C. JOHN KIRCHNER		Date of Receipt M / D / Y
Mailing Address 172 West State St., Suite 102 NJ 040-1000		Transaction ID: PR153018059670
City Trenton	State NJ	Zip Code 08530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Vice President	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 848.12	

SUBTOTAL of Receipts This Page (optional)	▶	250.00
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 38 / 82
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. SHIVRAJ J DESAI		Date of Receipt M / D / Y
Mailing Address The Wannamaker Building 100 Penn S PA040-1000		Transaction ID: PR153079759670
City Philadelphia	State PA	Zip Code 19107
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Medical Director	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 846.12	

Full Name (Last, First, Middle Initial) B. LESLIE GIDDENS ROBINSON		Date of Receipt M / D / Y
Mailing Address 8045 Leesburg Pike Ste B50 VA028-1000		Transaction ID: PR153079839670
City Vienna	State VA	Zip Code 22182
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer UnitedHealth Group, Inc.	Occupation SVP Medical Management	P/R Deduction (\$115.38 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2538.38	

Full Name (Last, First, Middle Initial) C. DEBORAH MATES CHASKEG		Date of Receipt M / D / Y
Mailing Address 8045 Leesburg Pike Ste B50 VA028-1000		Transaction ID: PR153079839670
City Vienna	State VA	Zip Code 22182
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer UnitedHealth Group, Inc.	Occupation Attorney	P/R Deduction (\$100.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2200.00	

SUBTOTAL of Receipts This Page (optional)	▶	253.84
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 38 / 82

(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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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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. THELMA DUGGIN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 8045 Leesburg Pike Ste 650 VA026-1000		Transaction ID: PR153079929670
City Vienna	State VA	Zip Code 22182
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.31
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$192.31 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4230.82	

Full Name (Last, First, Middle Initial) B. RICHARD H MCCASKILL JR		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Rd East MND08-T500		Transaction ID: PR155018879670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer UnitedHealth Group, Inc.	Occupation Administration	P/R Deduction (\$115.38 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1861.48	

Full Name (Last, First, Middle Initial) C. MARY G SHINHAM		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 100 Penn Square, FL9 PAD40-1000		Transaction ID: PR155018099670
City Philadelphia	State PA	Zip Code 19107
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

SUBTOTAL of Receipts This Page (optional)	▶	327.89
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 / 82

(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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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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. JAQUELYN E ALBRIGHT		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-T202		Transaction ID: PR155019109670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 28.85
Name of Employer UnitedHealth Group, Inc.	Occupation Attorney	P/R Deduction (\$28.85 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 634.70	

Full Name (Last, First, Middle Initial) B. DAVID P INGRAHAM		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-T500		Transaction ID: PR155019119670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 67.31
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$67.31 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 832.67	

Full Name (Last, First, Middle Initial) C. CYNTHIA ADAMS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9700 Bissonnet Suite 2300/2500 TX037-E288		Transaction ID: PR155100399670
City Houston	State TX	Zip Code 77038-6000
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11.54
Name of Employer UnitedHealth Group, Inc.	Occupation	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 253.88	

SUBTOTAL of Receipts TNs Page (optional)	▶	107.70
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 / 82
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. DAVID R ASTAR		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 12125 Technology Drive MNC02-0100		Transaction ID: PR155100519670
City Eden Prairie	State MN	Zip Code 55344
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer UnitedHealth Group, Inc.	Occupation OOO Ingenix	P/R Deduction (\$100.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. ROBERT J BOHNENKAMP		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-W300		Transaction ID: PR155100569670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Systems	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 848.12	

Full Name (Last, First, Middle Initial) C. MICHAEL J BREGOLIN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 1900 E Golf Rd #200/300 IL035-0300		Transaction ID: PR155100579670
City Schaumburg	State IL	Zip Code 60173
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Health Care	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

SUBTOTAL of Receipts This Page (optional)	158.46
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 / 82

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. TIMOTHY J HEADY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-S234		Transaction ID: PR155112259670
City Edina	State Zip Code MN 55436	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer UnitedHealth Group, Inc.	Occupation Management	P/R Deduction (\$40.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 820.00	

Full Name (Last, First, Middle Initial) B. CHRISTOPHER R RHOCK		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 450 Columbus Blvd CT030-13NB		Transaction ID: PR155112899670
City Hartford	State Zip Code CT 06103	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11.54
Name of Employer UnitedHealth Group, Inc.	Occupation Management	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 223.12	

Full Name (Last, First, Middle Initial) C. JAMES T JARRATT		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-E115		Transaction ID: PR155113219670
City Minnetonka	State Zip Code MN 55343	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Customer Relations	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 846.12	

SUBTOTAL of Receipts This Page (optional)	▶	90.00
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 43 / 82
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. JEFFREY W W KAGAN		Date of Receipt M / D / Y
Mailing Address 295D Expressway Drive South Ste 24 NY033-1000		Transaction ID: PR155113239670
City Islandia	State NY	Zip Code 11749-1412
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Financial Analyst	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

Full Name (Last, First, Middle Initial) B. MICHAEL C MATTED		Date of Receipt M / D / Y
Mailing Address 450 Columbus Blvd CT030-15NB		Transaction ID: PR155113349670
City Hartford	State CT	Zip Code 06103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer UnitedHealth Group, Inc.	Occupation Management	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 423.08	

Full Name (Last, First, Middle Initial) C. KAREN ELIZABETH WILLIAMSON		Date of Receipt M / D / Y
Mailing Address Americhoice 8045 Leesburg Pike Ste VA026-1000		Transaction ID: PR155113659670
City Vienna	State VA	Zip Code 22182
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3.85
Name of Employer UnitedHealth Group, Inc.	Occupation Sales	P/R Deduction (\$3.85 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 257.75	

SUBTOTAL of Receipts This Page (optional)	43.08
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 / 82

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. DAWN M OWENS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 450 Columbus Blve CT030-15NB		Transaction ID: PR155116039670
City Hartford	State CT	Zip Code 06103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.00
Name of Employer UnitedHealth Group, Inc.	Occupation Management	P/R Deduction (\$192.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4224.00	

Full Name (Last, First, Middle Initial) B. CATHERINE M PERRY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 8051 East Maplewood Ave. #300 CO030-1000		Transaction ID: PR155116049670
City Greenwood Village	State CO	Zip Code 80111
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Nurse	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

Full Name (Last, First, Middle Initial) C. MILES R PORTER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MN008-W212		Transaction ID: PR155116089670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer UnitedHealth Group, Inc.	Occupation	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional)	222.00
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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. ERIKA A. ROGERS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 208D East 20th Street CA060-1000		Transaction ID: PR155116079670
City Chicago	State CA	Zip Code 95828
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer UnitedHealth Group, Inc.	Occupation Management	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) B. THOMAS J VALERIUS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 990D Bren Road East MND08-T850		Transaction ID: PR155116139670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1692.24	

Full Name (Last, First, Middle Initial) C. LOIS T WEIHRACH		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 990D Bren Road East MND08-W130		Transaction ID: PR155116149670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer UnitedHealth Group, Inc.	Occupation Computer Systems	P/R Deduction (\$15.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

SUBTOTAL of Receipts This Page (optional)	101.92
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 / 82
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. RONALD C WHITE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-T830		Transaction ID: PR155116159670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Sales	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 846.12	

Full Name (Last, First, Middle Initial) B. ANTHONY R CARR		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 13621 Nw 12th St FLD75-1000		Transaction ID: PR155432349670
City Sunrise	State FL	Zip Code 33323
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer UnitedHealth Group, Inc.	Occupation Sales	P/R Deduction (\$15.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Full Name (Last, First, Middle Initial) C. JOHN O ENDERLE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 450 Columbus Blvd CT030-075B		Transaction ID: PR155432359670
City Hartford	State CT	Zip Code 06103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11.00
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$11.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 242.00	

SUBTOTAL of Receipts This Page (optional)	▶	64.46
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 / 82
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. CHRISTINE M HARRIS			Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 450 Columbus Blve CT030-11NA			Transaction ID: PR155432369670
City	State	Zip Code	Amount of Each Receipt this Period
Hartford	CT	06103	10.00
FEC ID number of contributing federal political committee. C			
Name of Employer UnitedHealth Group, Inc.	Occupation Marketing	Aggregate Year-to-Date ▼ 220.00	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. RICK M JELINEK			Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T500			Transaction ID: PR155432369670
City	State	Zip Code	Amount of Each Receipt this Period
Minnetonka	MN	55343	48.00
FEC ID number of contributing federal political committee. C			
Name of Employer UnitedHealth Group, Inc.	Occupation Senior Management	Aggregate Year-to-Date ▼ 874.74	P/R Deduction (\$48.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. CYNTHIA H JOHNSON			Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 3700 Colonnade Parkway AL001-02D1			Transaction ID: PR155432409670
City	State	Zip Code	Amount of Each Receipt this Period
Birmingham	AL	35243	11.54
FEC ID number of contributing federal political committee. C			
Name of Employer UnitedHealth Group, Inc.	Occupation Sales	Aggregate Year-to-Date ▼ 253.88	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	69.54
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 48 / 82
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. JOSEPH J MCERLANE		Date of Receipt M / D / Y
Mailing Address 5402 Parkdale Drive #300 MN025-2500		Transaction ID: PR155432419670
City Minneapolis	State Zip Code MN 55416	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer UnitedHealth Group, Inc.	Occupation	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 423.06	

Full Name (Last, First, Middle Initial) B. MICHAEL RADU		Date of Receipt M / D / Y
Mailing Address 3141 North Third Ave AZ060-S120		Transaction ID: PR155432459670
City Phoenix	State Zip Code AZ 85013	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer UnitedHealth Group, Inc.	Occupation	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 423.08	

Full Name (Last, First, Middle Initial) C. CATHERINE E SPILLANE		Date of Receipt M / D / Y
Mailing Address 9700 Bissonnet Suite 2300/2500 TX037-0100		Transaction ID: PR155432489670
City Houston	State Zip Code TX 77038-6000	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer UnitedHealth Group, Inc.	Occupation	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 423.08	

SUBTOTAL of Receipts This Page (optional)	▶	57.89
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 48 / 82
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. KIRK E STAPLETON		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-S138		Transaction ID: PR155432479670
City	State Zip Code	
Edina	MN 55436	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C		50.00
Name of Employer UnitedHealth Group, Inc.	Occupation Network Development	P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) B. CRAIG C ANDERSON		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 450 Columbus Blvd CT030-15NB		Transaction ID: PR157595789670
City	State Zip Code	
Hartford	CT 06103	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C		19.23
Name of Employer UnitedHealth Group, Inc.	Occupation	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 423.08	

Full Name (Last, First, Middle Initial) C. KAREN L ERICKSON		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-N110		Transaction ID: PR157595789670
City	State Zip Code	
Edina	MN 55436	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C		40.00
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$40.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

SUBTOTAL of Receipts This Page (optional)	▶	109.23
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 60 / 82
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. MARIO F FABRIZIO JR		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 815D Trenton Lane N MND13-N300		Transaction ID: PR157595779670
City Plymouth	State MN	Zip Code 55442
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer UnitedHealth Group, Inc.	Occupation Data Systems Management	P/R Deduction (\$75.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

Full Name (Last, First, Middle Initial) B. CATHERINE B KILLIAN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address The Wannamaker Building 100 Penn S PAD40-1000		Transaction ID: PR157595789670
City Philadelphia	State PA	Zip Code 19107
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group, Inc.	Occupation Public Relations	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1692.24	

Full Name (Last, First, Middle Initial) C. ERNEST MONFILETTO		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address The Wannamaker Building 100 Penn S PAD40-1000		Transaction ID: PR157595819670
City Philadelphia	State PA	Zip Code 19107
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group, Inc.	Occupation Computer Operations	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1692.24	

SUBTOTAL of Receipts TNs Page (optional)	▶	228.84
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 51 / 82

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. LEE D VALENTA		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 12125 TECHNOLOGY DRIVE MND02-D100		Transaction ID: PR157595859670
City EDEN PRAIRIE	State MN	Zip Code 55344
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.30
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$192.30 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3164.50	

Full Name (Last, First, Middle Initial) B. PATRICK J BYRNE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 6300 Olson Memorial HWY MND10-S203		Transaction ID: PR158086309670
City Golden Valley	State MN	Zip Code 55427
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 848.12	

Full Name (Last, First, Middle Initial) C. DAVID L COLE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 6300 Olson Memorial HWY MND10-W120		Transaction ID: PR158086329670
City Golden Valley	State MN	Zip Code 55427
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 848.12	

SUBTOTAL of Receipts This Page (optional)	▶	269.22
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 52 / 82

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. C RICHARD COOK		Date of Receipt M / D / Y
Mailing Address 5800 Granite PKWY STE 900 TX033-1000		Transaction ID: PR158086339670
City	State	Zip Code
Piano	TX	75024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 846.12	

Full Name (Last, First, Middle Initial) B. TOM M DAVIS		Date of Receipt M / D / Y
Mailing Address 5975 Castle Creek PKWY N DR STE 1 IND40-1000		Transaction ID: PR158086339670
City	State	Zip Code
Indianapolis	IN	46250
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer UnitedHealth Group, Inc.	Occupation Director Sales	P/R Deduction (\$40.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 880.00	

Full Name (Last, First, Middle Initial) C. DAVID BOSTLER		Date of Receipt M / D / Y
Mailing Address 2525 Lake Park Boulevard UT015-0500		Transaction ID: PR158086489670
City	State	Zip Code
West Valley City	UT	84120
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer UnitedHealth Group, Inc.	Occupation Marketing	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional)	▶	88.46
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 53 / 82
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. THOMAS S PAUL		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-T500		Transaction ID: PR158086479670
City	State	Zip Code
Minnetonka	MN	55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Pharmacy	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 846.12	

Full Name (Last, First, Middle Initial) B. JIMMIE L POGUE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 801 Office Center Drive PAD20-1000		Transaction ID: PR158086489670
City	State	Zip Code
Fort Washington	PA	19034
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer UnitedHealth Group, Inc.	Occupation Health Care	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 423.08	

Full Name (Last, First, Middle Initial) C. PAMELA J SAUNDERS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 145 Commercial St ME008-1000		Transaction ID: PR158086509670
City	State	Zip Code
Portland	ME	04101
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1223.80	

SUBTOTAL of Receipts This Page (optional)	67.69
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 / 82

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. KAREN R SCHIEVELBEIN		Date of Receipt M M / D D / Y Y Y Y
Mailing Address 425 Market St Floor 12/13/27 CA035-2700		Transaction ID: PR158086519670
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1692.24	

Full Name (Last, First, Middle Initial) B. JOSEPH O WEISSENBORN		Date of Receipt M M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T850		Transaction ID: PR158086549670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 85.00
Name of Employer UnitedHealth Group, Inc.	Occupation HR Benefits	P/R Deduction (\$85.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1870.00	

Full Name (Last, First, Middle Initial) C. GEORGE E BENNETT		Date of Receipt M M / D D / Y Y Y Y
Mailing Address 4170 Ashford Dunwoody RD Ste 100 GA035-1000		Transaction ID: PR158030389670
City Atlanta	State GA	Zip Code 30319
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional)	▶	171.92
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 / 82

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. WILLIAM S BOJAN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-T205		Transaction ID: PR159630379670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer UnitedHealth Group, Inc.	Occupation Risk Management	P/R Deduction (\$40.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 880.00	

Full Name (Last, First, Middle Initial) B. BRIGID A BONNER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-W212		Transaction ID: PR159630389670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Information Technology	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

Full Name (Last, First, Middle Initial) C. CHARLES A BOWLES		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address P.O. Box 9472 PA960-1000		Transaction ID: PR159630399670
City Minneapolis	State MN	Zip Code 55440-9472
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer UnitedHealth Group, Inc.	Occupation Sales & Marketing	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 423.06	

SUBTOTAL of Receipts This Page (optional)	79.23
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 / 82
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. PAUL H GULSTRAND			Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 8300 Olson Memorial HWY MND10-E112			Transaction ID: PR159630409670
City	State	Zip Code	Amount of Each Receipt this Period
Golden Valley	MN	55427	38.46
FEC ID number of contributing federal political committee. C			
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	Aggregate Year-to-Date ▼ 846.12	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. RICHARD J HUGHES			Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 8300 Olson Memorial Hwy MND10-S26B			Transaction ID: PR159630419670
City	State	Zip Code	Amount of Each Receipt this Period
Golden Valley	MN	55427	10.00
FEC ID number of contributing federal political committee. C			
Name of Employer UnitedHealth Group, Inc.	Occupation Administration	Aggregate Year-to-Date ▼ 220.00	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. PAMELA N HURSH			Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 8300 Olson Memorial HWY MND10-S203			Transaction ID: PR159630429670
City	State	Zip Code	Amount of Each Receipt this Period
Golden Valley	MN	55427	25.00
FEC ID number of contributing federal political committee. C			
Name of Employer UnitedHealth Group, Inc.	Occupation Accountant	Aggregate Year-to-Date ▼ 550.00	P/R Deduction (\$25.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	73.46
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 / 82
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. JOHN KING		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 450 Columbus Blvd CT030-03NB		Transaction ID: PR159630449670
City Hartford	State CT	Zip Code 06103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer UnitedHealth Group, Inc.	Occupation Sales	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) B. GAYE ADAMS MASSEY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T500		Transaction ID: PR159630449670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer UnitedHealth Group, Inc.	Occupation Attorney	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 423.08	

Full Name (Last, First, Middle Initial) C. JAY & MATUSHAK		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T700		Transaction ID: PR159630449670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11.54
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 253.88	

SUBTOTAL of Receipts This Page (optional)	40.77
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 / 82
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. MICHAEL JOHN MCDONNELL		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-N205		Transaction ID: PR159630479670
City Edina	State MN	Zip Code 55436
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 77.00
Name of Employer UnitedHealth Group, Inc.	Occupation Attorney	P/R Deduction (\$77.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1694.00	

Full Name (Last, First, Middle Initial) B. GEORGE L MIKAN III		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T700		Transaction ID: PR159630489670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1692.24	

Full Name (Last, First, Middle Initial) C. CAROL B MORNESS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 6300 Olson Memorial HWY MND10-E112		Transaction ID: PR159630499670
City Golden Valley	State MN	Zip Code 55427
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Underwriting	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 848.12	

SUBTOTAL of Receipts This Page (optional)	▶	192.38
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 / 82
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. PAMELA J RUSSO		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 425 Market St FL 12/13/27 CA035-2700		Transaction ID: PR159630509670
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11.54
Name of Employer UnitedHealth Group, Inc.	Occupation Personnel	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 253.88	

Full Name (Last, First, Middle Initial) B. METE SAHIN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 800 King Farm Blvd Ste 600 MD051-1000		Transaction ID: PR159630519670
City Rockville	State MD	Zip Code 20850
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1692.24	

Full Name (Last, First, Middle Initial) C. SCOTT E THEISEN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-W395		Transaction ID: PR159630589670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 423.06	

SUBTOTAL of Receipts This Page (optional)	▶	107.69
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 60 / 82
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. ROGER A WEBER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 8300 Olson Memorial Hwy MND010-W115		Transaction ID: PR159630579670
City Golden Valley	State MN	Zip Code 55427
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11.54
Name of Employer UnitedHealth Group, Inc.	Occupation Administration	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 253.88	

Full Name (Last, First, Middle Initial) B. GEOFFREY ALAN GOTHRO		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T700		Transaction ID: PR159630689670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Marketing	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 789.20	

Full Name (Last, First, Middle Initial) C. THOMAS D LEWIS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 3838 N Causeway Blvd STE 2100 LA035-1000		Transaction ID: PR159630689670
City Metairie	State LA	Zip Code 70002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 789.20	

SUBTOTAL of Receipts This Page (optional)	88.46
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 / 82
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. ROBERT W OBERRENDER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC008-T380		Transaction ID: PR159630709670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 29.00
Name of Employer UnitedHealth Group, Inc.	Occupation Cash Management	P/R Deduction (\$29.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 580.00	

Full Name (Last, First, Middle Initial) B. ROBERT REBITZER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 425 Market St Fl 12/13/27 CA035-2700		Transaction ID: PR159630719670
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 384.60	

Full Name (Last, First, Middle Initial) C. KEVIN JOE SWANSON		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address One Research Drive #300B MA085-1800		Transaction ID: PR159630739670
City Westborough	State MA	Zip Code 01581
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer UnitedHealth Group, Inc.	Occupation Sales	P/R Deduction (\$15.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	63.23
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 / 82

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. DIANE L BEDNAR FLYNN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MNC08-W130		Transaction ID: PR159630979670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Health Care Services	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) B. LISAM BEHNKE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address Two Penn Plaza 6/7 Floors NYD38-1000		Transaction ID: PR159630989670
City New York	State NY	Zip Code 10121
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer UnitedHealth Group, Inc.	Occupation Medicine	P/R Deduction (\$100.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1800.00	

Full Name (Last, First, Middle Initial) C. JAMES M BLETZER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address Two Penn Plaza 6/7 Floors NYD38-1000		Transaction ID: PR159631029670
City New York	State NY	Zip Code 10121
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Sales	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

SUBTOTAL of Receipts This Page (optional)	140.00
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 / 82

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. JAMES M BOGDAN		Date of Receipt M / D / Y
Mailing Address 5901 Lincoln Drive MNO12-S204		Transaction ID: PR159631039670
City	State Zip Code	
Edina	MN 55436	Amount of Each Receipt this Period 19.00
FEC ID number of contributing federal political committee. C		P/R Deduction (\$19.00 Bi-Weekly)
Name of Employer UnitedHealth Group, Inc.	Occupation Management	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 342.00	

Full Name (Last, First, Middle Initial) B. THOMAS R BRADY		Date of Receipt M / D / Y
Mailing Address 9200 Worthington Road OH020-301D		Transaction ID: PR159631059670
City	State Zip Code	
Westerville	OH 43082	Amount of Each Receipt this Period 76.92
FEC ID number of contributing federal political committee. C		P/R Deduction (\$76.92 Bi-Weekly)
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1384.58	

Full Name (Last, First, Middle Initial) C. ROBERT W BURG		Date of Receipt M / D / Y
Mailing Address 2700 Midwest Drive WI010-100D		Transaction ID: PR159631089670
City	State Zip Code	
Onalaska	WI 54650	Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. C		P/R Deduction (\$40.00 Bi-Weekly)
Name of Employer UnitedHealth Group, Inc.	Occupation Attorney	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 720.00	

SUBTOTAL of Receipts This Page (optional)	▶	135.92
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 / 82

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. JEFFREY S COOK		Date of Receipt M / D / Y
Mailing Address 5959 Northwest Pkwy Ste 107 TX061-1000		Transaction ID: PR159631139670
City San Antonio	State TX	Zip Code 78249
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11.54
Name of Employer UnitedHealth Group, Inc.	Occupation Network Management	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 207.72	

Full Name (Last, First, Middle Initial) B. RAMON E COTO		Date of Receipt M / D / Y
Mailing Address 13621 NW 12th St FL075-1000		Transaction ID: PR159631159670
City Sunrise	State FL	Zip Code 33323
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 348.14	

Full Name (Last, First, Middle Initial) C. ANNE D DEFUSCO		Date of Receipt M / D / Y
Mailing Address 450 Columbus Blvd CT030-15NA		Transaction ID: PR159631179670
City Hartford	State CT	Zip Code 06103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11.54
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 207.72	

SUBTOTAL of Receipts This Page (optional)	▶	42.31
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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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. JEFFREY P DOOLEY		Date of Receipt M / D / Y
Mailing Address 900B Corporate Lake Drive FL021-1021		Transaction ID: PR159631219670
City Tampa	State FL	Zip Code 33634
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11.54
Name of Employer UnitedHealth Group, Inc.	Occupation Sales	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 207.72	

Full Name (Last, First, Middle Initial) B. RICHARD G DUNLOP		Date of Receipt M / D / Y
Mailing Address 920D Worthington Road OH020-3010		Transaction ID: PR159631239670
City Westerville	State OH	Zip Code 43082
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$25.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) C. KEITH A EPPERSON		Date of Receipt M / D / Y
Mailing Address 5901 Lincoln Drive MND12-N230		Transaction ID: PR159631249670
City Edina	State MN	Zip Code 55438
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer UnitedHealth Group, Inc.	Occupation Actuary	P/R Deduction (\$15.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

SUBTOTAL of Receipts This Page (optional)	51.54
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 66 / 82
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. JILLIAN R FOUCRE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 233 North Michigan Ave IL014-3605		Transaction ID: PR159631279670
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Senior Management	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) B. STEVAN D GARCIA		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-N110		Transaction ID: PR159631289670
City Edina	State MN	Zip Code 55426
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer UnitedHealth Group, Inc.	Occupation Data Systems	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 348.14	

Full Name (Last, First, Middle Initial) C. RANDY P GILES		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 2000 West Loop South Suite #60070 TX035-1000		Transaction ID: PR159631329670
City Houston	State TX	Zip Code 77027
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Health Care	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 692.28	

SUBTOTAL of Receipts This Page (optional)	77.69
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 / 82

(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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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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. RONALD H HARMS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-S110		Transaction ID: PR159631359670
City Edina	State MN	Zip Code 55436
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1384.56	

Full Name (Last, First, Middle Initial) B. EDWARD J HAWLEY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 2700 Midwest Drive WID10-1000		Transaction ID: PR159631369670
City Onalaska	State WI	Zip Code 54650
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Health Care	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 692.28	

Full Name (Last, First, Middle Initial) C. KURT A HEJMANN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 13655 Riverport Drive MO050-1000		Transaction ID: PR159631379670
City Maryland Heights	State MO	Zip Code 63043
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 12.00
Name of Employer UnitedHealth Group, Inc.	Occupation Information Networking	P/R Deduction (\$12.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 216.00	

SUBTOTAL of Receipts This Page (optional)	▶	127.38
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 / 82
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. DALE JONES		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 10 Cadillac Drive #200 TN002-1002		Transaction ID: PR159631429670
City Brentwood	State TN	Zip Code 37027
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Health Care	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 692.28	

Full Name (Last, First, Middle Initial) B. NANETTE R. KARTSONIS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-W130		Transaction ID: PR159631469670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Sales	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

Full Name (Last, First, Middle Initial) C. EDWARD LAGERSTROM		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T430		Transaction ID: PR159631509670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 692.28	

SUBTOTAL of Receipts TN's Page (optional)	96.92
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

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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. KATHLEEN A MALLATT		Date of Receipt M / D / Y
Mailing Address 2717 N 118th Circle Ste 300 NE010-3700		Transaction ID: PR159631549670
City Omaha	State NE	Zip Code 68164-9672
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer UnitedHealth Group, Inc.	Occupation Health Care	P/R Deduction (\$40.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 720.00	

Full Name (Last, First, Middle Initial) B. THOMAS CHARLES REKART		Date of Receipt M / D / Y
Mailing Address 12125 Technology Drive MND02-D100		Transaction ID: PR159631679670
City Eden Prairie	State MN	Zip Code 55344
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer UnitedHealth Group, Inc.	Occupation Information Systems	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 348.14	

Full Name (Last, First, Middle Initial) C. JOHN H RENNICK JR		Date of Receipt M / D / Y
Mailing Address 6230 Rainview Rd #315 NC015-1000		Transaction ID: PR159631689670
City Charlotte	State NC	Zip Code 28210-5253
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer UnitedHealth Group, Inc.	Occupation Doctor	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 348.14	

SUBTOTAL of Receipts This Page (optional)	78.46
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 / 82
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. JAMISON RICE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-S200		Transaction ID: PR159631699670
City Edina	State MN	Zip Code 55436
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11.54
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 207.72	

Full Name (Last, First, Middle Initial) B. STEPHAN S RODGERS		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-S200		Transaction ID: PR159631719670
City Edina	State MN	Zip Code 55436
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.98
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$115.98 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2078.84	

Full Name (Last, First, Middle Initial) C. DANIEL I ROSENTHAL		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 13621 NW 12Th St FLD75-1000		Transaction ID: PR159631739670
City Sunrise	State FL	Zip Code 33323
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 348.14	

SUBTOTAL of Receipts This Page (optional)	148.15
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 / 82
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. KEVIN J RUTH		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 80 King Farm Blvd Ste 600 MD051-1000		Transaction ID: PR159631749670
City Rockville	State MD	Zip Code 20850
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$75.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00	

Full Name (Last, First, Middle Initial) B. MANJEL A SELVA		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 13621 NW 12th St FLD75-1000		Transaction ID: PR159631779670
City Sunrise	State FL	Zip Code 33323
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer UnitedHealth Group, Inc.	Occupation Doctor	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 348.14	

Full Name (Last, First, Middle Initial) C. JUAN R SERRANO		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5800 Granite Parkway Ste 900 TX033-1000		Transaction ID: PR159631789670
City Plano	State TX	Zip Code 75024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer UnitedHealth Group, Inc.	Occupation Executive	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 348.14	

SUBTOTAL of Receipts This Page (optional)	▶	113.48
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 / 82

(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. DAVID C STURKEY		Date of Receipt M / D / Y
Mailing Address 107 Westpark Blvd Ste 110 SC020-1000		Transaction ID: PR159631849670
City Columbia	State SC	Zip Code 29210
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Health Care	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 692.28	

Full Name (Last, First, Middle Initial) B. ROXANNE THOMAS		Date of Receipt M / D / Y
Mailing Address 9900 Bren Road East MND08-T815		Transaction ID: PR159631899670
City Minnetoka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11.54
Name of Employer UnitedHealth Group, Inc.	Occupation Administrative	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 207.72	

Full Name (Last, First, Middle Initial) C. ROSEMARY VEMTO		Date of Receipt M / D / Y
Mailing Address 1900 E Golf Road #200/300 IL035-0300		Transaction ID: PR159631939670
City Schaumburg	State IL	Zip Code 60173
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer UnitedHealth Group, Inc.	Occupation Medicine	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 348.14	

SUBTOTAL of Receipts This Page (optional)	69.23
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 / 82
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. M LAURIE WASSERSTEIN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 450 Columbus Blvd CT030-12NB		Transaction ID: PR159631959670
City Hartford	State CT	Zip Code 06103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer UnitedHealth Group, Inc.	Occupation Information Systems	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 346.14	

Full Name (Last, First, Middle Initial) B. MYRON R WERLEY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-N123		Transaction ID: PR159631969670
City Edina	State MN	Zip Code 55426
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 12.50
Name of Employer UnitedHealth Group, Inc.	Occupation Insurance	P/R Deduction (\$12.50 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) C. JANET K WORENMA		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-W130		Transaction ID: PR159632029670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer UnitedHealth Group, Inc.	Occupation Administration	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 346.14	

SUBTOTAL of Receipts This Page (optional)	▶	50.98
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 74 / 82

(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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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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. EDWARD J WHEELER		Date of Receipt M / D / Y
Mailing Address 84 Warner Road OH910-1000		Transaction ID: PR160059449670
City Hubbard	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer UnitedHealth Group, Inc.	Occupation Mktg & Strategic Performance	P/R Deduction (\$40.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. JOHN P DODDY		Date of Receipt M / D / Y
Mailing Address 131 MORRISTOWN ROAD NJ006-1200		Transaction ID: PR160059739670
City BASKING RIDGE	State NJ	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Information Systems	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

Full Name (Last, First, Middle Initial) C. MARGUERITE EDWARDS		Date of Receipt M / D / Y
Mailing Address 9009 CORPORATE LAKE DRIVE FLD21-D540		Transaction ID: PR160059749670
City TAMPA	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Management	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 653.82	

SUBTOTAL of Receipts This Page (optional)	▶	98.46
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 / 82
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. MICHAEL ILE		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 LINCOLN DRIVE MN012-5200		Transaction ID: PR160059789670
City EDINA	State MN	Zip Code 55436
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer UnitedHealth Group, Inc.	Occupation Management	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 326.91	

Full Name (Last, First, Middle Initial) B. THOMAS J O'BRIEN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 860 OAKMONT LANE #200 IL038-1000		Transaction ID: PR160059789670
City WESTMONT	State IL	Zip Code 60559
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Management	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 653.82	

Full Name (Last, First, Middle Initial) C. LISA VANDERHEYDEN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 6150 TRENTON LN N MND13-N400		Transaction ID: PR160059809670
City PLYMOUTH	State MN	Zip Code 55442
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer UnitedHealth Group, Inc.	Occupation Information Systems	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

SUBTOTAL of Receipts This Page (optional)	▶	77.69
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 / 82

(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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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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. STEPHEN B GREENBERG		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 1925 ISAAC NEWTON SQ STE 300 VA019-1000		Transaction ID: PR160059849670
City RESTON	State VA	Zip Code 20191
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer UnitedHealth Group, Inc.	Occupation Operations	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68	

Full Name (Last, First, Middle Initial) B. LEWIS G SANDY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 LINCOLN DRIVE MND12-N205		Transaction ID: PR160059879670
City EDINA	State MN	Zip Code 55436
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 65.00
Name of Employer UnitedHealth Group, Inc.	Occupation Doctor	P/R Deduction (\$65.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1040.00	

Full Name (Last, First, Middle Initial) C. MICHAEL P GAULTIN		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-T500		Transaction ID: PR160266759670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer UnitedHealth Group, Inc.	Occupation Information Systems	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 288.45	

SUBTOTAL of Receipts This Page (optional)	▶	103.45
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 / 82
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. MATTHEW W PETERSON		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 5901 Lincoln Drive MND12-5286		Transaction ID: PR160266999670
City Edina	State MN	Zip Code 55436
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer UnitedHealth Group, Inc.	Occupation Human Resources	P/R Deduction (\$40.00 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. JEFF W MALONEY		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 9900 Bren Road East MND08-W130		Transaction ID: PR161324359670
City Minnetonka	State MN	Zip Code 55343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1078.88	

Full Name (Last, First, Middle Initial) C. LAURA M BRANKER		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 8045 Leesburg Pike VAD26-1000		Transaction ID: PR161324389670
City Vienna	State VA	Zip Code 22182
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 28.85
Name of Employer UnitedHealth Group, Inc.	Occupation Public Relations	P/R Deduction (\$28.85 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.05	

SUBTOTAL of Receipts This Page (optional)	145.77
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 78 / 82
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. ALLEN LAWRENCE FINKELSTEIN		Date of Receipt M / D / Y
Mailing Address 2 Gateway Center NJ040-1000		Transaction ID: PR162098909670
City Newark	State Zip Code NJ 07102	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer UnitedHealth Group, Inc.	Occupation Administration	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 461.52	

Full Name (Last, First, Middle Initial) B. VALERIE GREY		Date of Receipt M / D / Y
Mailing Address 7 Hanover Square NY037-1000		Transaction ID: PR162098929670
City New York	State Zip Code NY 10004	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer UnitedHealth Group, Inc.	Occupation Information Systems	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.78	

Full Name (Last, First, Middle Initial) C. DANIEL S WALLER		Date of Receipt M / D / Y
Mailing Address 9900 Bren Road East MND08-W385		Transaction ID: PR163238009670
City Minnetonka	State Zip Code MN 55343	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 28.85
Name of Employer UnitedHealth Group, Inc.	Occupation Management	P/R Deduction (\$28.85 Bi-Weekly)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 259.65	

SUBTOTAL of Receipts This Page (optional)	96.54
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 78 / 82
(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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial) A. STEVE R KOOREN		Date of Receipt * * / * * / * * * *	
Mailing Address 815D Trenton Lane N MND13-N400		Transaction ID: PR165344329670	
City Plymouth	State MN	Zip Code 55442	Amount of Each Receipt this Period 57.69
FEC ID number of contributing federal political committee. C		P/R Deduction (\$57.69 Bi-Weekly)	
Name of Employer UnitedHealth Group, Inc.	Occupation Finance	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 403.83
Full Name (Last, First, Middle Initial) B. JOYCE A LARKIN		Date of Receipt * * / * * / * * * *	
Mailing Address 990D Bren Road East MND08-T500		Transaction ID: PR167777169670	
City Minnetonka	State MN	Zip Code 55343	Amount of Each Receipt this Period 76.92
FEC ID number of contributing federal political committee. C		P/R Deduction (\$76.92 Bi-Weekly)	
Name of Employer UnitedHealth Group, Inc.	Occupation Public Relations	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.78

SUBTOTAL of Receipts This Page (optional)	▶	134.81
TOTAL This Period (last page this line number only)	▶	10155.18

**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 80 / 82

<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of 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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. Andrews For Congress Committee

Mailing Address 215 Fourth Avenue
Suite 20D

City Haddon Heights State NJ Zip Code 08035

Purpose of Disbursement
General 2004 election

Candidate Name
Rep. Robert Andrews

Office Sought: House
 Senate
 President

State: NJ District 1

Disbursement For: 2004
Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 20384298
Date of Disbursement

10 / 01 / 2004

Amount of Each Disbursement this Period

2000.00

General 2004 election

Full Name (Last, First, Middle Initial)

B. Evan Bayh Committee

Mailing Address 801 15th Street, N.W.

City Washington State DC Zip Code 20005

Purpose of Disbursement
2004 General Election

Candidate Name
Evan Bayh

Office Sought: House
 Senate
 President

State: IN District

Disbursement For: 2004
Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 20384309
Date of Disbursement

10 / 05 / 2004

Amount of Each Disbursement this Period

3000.00

2004 General Election

Full Name (Last, First, Middle Initial)

C. Friends Of Katherine Harris

Mailing Address P. O. Box 251B7

City Sarasota State FL Zip Code 34277

Purpose of Disbursement
2004 General Election

Candidate Name
Rep. Katherine Harris

Office Sought: House
 Senate
 President

State: FL District 13

Disbursement For: 2004
Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 20384308
Date of Disbursement

10 / 05 / 2004

Amount of Each Disbursement this Period

500.00

2004 General Election

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)

PAGE 81 / 82

<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of 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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)
A. Martinez For Senate

Mailing Address 1522 South Mills Ave

City Orlando State FL Zip Code 32806

Purpose of Disbursement
2004 General Election

Candidate Name
Mr. Mel Martinez

Office Sought: House Disbursement For: 2004
 Senate Primary General
 President
 State: FL District: 2 Other (specify) ▼

011
Category/
Type

Transaction ID: 20384303
Date of Disbursement

10 / 05 / 2004

Amount of Each Disbursement this Period

2000.00

2004 General Election

Full Name (Last, First, Middle Initial)
B. Debbie Wasserman Schultz for Congress

Mailing Address 1725 Main Street, Suite 215

City Weston State FL Zip Code 33331

Purpose of Disbursement
2004 General Election

Candidate Name
Debbie Schultz

Office Sought: House Disbursement For: 2004
 Senate Primary General
 President
 State: FL District: 20 Other (specify) ▼

011
Category/
Type

Transaction ID: 20384306
Date of Disbursement

10 / 05 / 2004

Amount of Each Disbursement this Period

1000.00

2004 General Election

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

8500.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 82 / 82

<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)
United Health Group Incorporated Political Fund

Full Name (Last, First, Middle Initial)

A. Georgia Leaders

Mailing Address 750 Piedmont Avenue

City Atlanta State GA Zip Code 30308

Purpose of Disbursement
GA House of Representatives Support for D

Candidate Name

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

011
Category/
Type

Transaction ID: 20386738

Date of Disbursement

10 / 11 / 2004

Amount of Each Disbursement this Period

2000.00

GA House of Representatives
Support for Democrats

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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

2000.00